

Business Name:	_____	Industry:	_____
Contact Name:	_____	Position:	_____
Contact Phone:	_____	Location:	_____
Contact e-mail:	_____	Biggest Opportunities	#1 _____
Initial Meeting:	_____		#2 _____
Scheduled Follow-up:	_____		#3 _____

What is the biggest thing you want your business to do for you this year: _____

Complete from the customer's/ buyer's point of view except where noted.

Product / Service

Name	_____
What it does	_____
What it is	_____
Why I want it	_____
Why I need it	_____
Who else has it	_____
Who else has used it and commented	_____
What I tell my friends	_____
How it is delivered to me	_____
Guarantees	_____
Specials	_____
How does buyer learn	_____
About You	_____
Your Product/Service	_____
\$Cost	_____
\$Saved	_____
\$ Net Profit (company POV)	_____
% Profit Margin (co. POV)	_____
Related Products/Services (from Company POV)	_____
Customers buy concurrently?	_____
Without Prompting?	_____
Added Cost	_____
Added Revenue/Margin	_____
Competition	_____