



Grow Oregon Client Benefits and Commitments

Client Name: _____ Date: _____
 Business Name: _____ SBDC Center: _____
 Oregon Business ID Number: _____

Business Information

2011 Gross Sales \$ _____	2011 Net Income \$ _____
2012 Gross Sales \$ _____	2012 Net Income \$ _____
2013 Gross Sales \$ _____	2013 Net Income \$ _____
2014 Gross Sales \$ _____	2014 Net Income \$ _____
2015 Gross Sales \$ _____	2015 Net Income \$ _____

(Please allow your SBDC Business Advisor to review the following: Prior years' income tax returns/ YTD Financial Statement for current year)

Number of FTE* for Last Five Years 2011: _____ 2012: _____ 2013: _____ 2014: _____ 2015: _____

**Full Time (FT) equivalent: 1,820 Hours per year*

(Please allow your SBDC Business Advisor to review the following: U.I Form/ Past years' FUTA returns and YTD payroll record summary from last payroll)

Services Offered May Include:

Strategic Needs Assessment/ Strategic Actions Through work with Grow Oregon advisors, companies will:	<ul style="list-style-type: none"> o Identify companies' Strengths and Weaknesses o Determine areas to focus improvement efforts o Identify strategic objectives of company
Advanced Market Research/ GIS Analysis Grow Oregon clients will have access to in-depth, customized research that will give companies access to:	<ul style="list-style-type: none"> o New Markets o Industry Trends o Customer Mapping and Demographics o Sales Leads/ Customer Lists o Competitor Mapping
Digital Media Assistance/ Search Engine Optimization (SEO) Advising Clients will receive consulting services to achieve increased web presence through:	<ul style="list-style-type: none"> o Website Enhancements and On-line Marketing o Social Media deployment (Facebook, Twitter, LinkedIn, etc.) o Website analytics to help inform current/future online enterprise
C.E.O. Networking/Mentoring	<ul style="list-style-type: none"> o Networking sessions with other Grow Oregon CEOs to discuss opportunities, successes, and challenges. o One-on-one mentoring with industry experts, equity investment specialists, and/or other authoritative advisors.

Engagement with SBDC

Please briefly describe your desired outcomes from your participation in the Grow Oregon Program. These may include business goals, action items, or specific activities. Please estimate the potential financial impact (capital, increased revenues, jobs created) – what would it look like if you achieve your goals in working with the Grow Oregon team:

Eligibility and Participation Requirements

In working with the SBDC Grow Oregon team, client will provide the following:

- Payment of \$250 Grow Oregon Registration Fee
- Verification of Traded Sector, including NAICS Code and a brief description of business operations, customers and markets
- Validation of all reported economic impact via Grow Oregon Client Validation Form (Provided at time of impact, and updated upon annual request through 9/30/2017)
- Participation in periodic surveys conducted by the Oregon Small Business Development Center Network (OSBDCN), Oregon Business Development Department (OBDD) and/or authorized 3rd party entities on behalf of OBDD.

I permit the Oregon SBDC Network to use my name and address for surveys and economic impact validation. I understand that any information disclosed will be held in strict confidence. I further understand that the counselor(s) agrees not to: 1) recommend goods or services from sources in which he/she has an interest, and 2) solicit or accept any gift, loan, reward, equity in business, compensation, monetary remuneration, promise of future employment, favor, or service in return for services or recommendation of services.

Client Signature _____ **Date** _____

By signing above I have indicated that the above statements are true and correct.