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| Avon, IN 46123  Cell Phone: (513) 519-7227 or (513) 501-6287  [GeansManagement@gmail.com](mailto:GeansManagement@gmail.com)  [www.geansmg.com](http://www.geansmg.com)   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  | | | | | | | | **Date** |  | **Agent/Representative Name** | | | | | | | |  | | | | | | | **Client Name** | | | | | | | **Client Information** | | | | | | | | | |  | | | | | | | | | |  | | |  | |  | | | **Business Phone#** | | | | **Cell Phone#** | | | | |  | | | | | | | | | | **Business Address** | | | | | | | | | |  | | |  | |  | | | **City** | | |  | | **State.** | | | **Client Intake Questionnaire** | | | | | | | | | | 1. **Business Name:** 2. **Business established date:** 3. **What state is your business registered?** 4. **What is your EIN #:** 5. **Is your business a For Profit or Non-Profit?** 6. **Why did you start your business?** 7. **What is your product or service?** 8. **Please summarize services offered / what problem are you trying to solve?** 9. **Who is your target audience?** 10. **Explain your business process:** 11. **How can GMG, Inc. help you grow your business?** 12. **List all business licenses and certifications:** 13. **Have you established a business budget for the delivery of products/services?** 14. **What (if any) other pertinent information can you provide that can help us successful**   **help you grow your business?**  **Thank you for your time and consideration in working with GMG, Inc.**  **Once you have completed this form, please email it to geansmanagement@gmail.com.** | | | | | | | | | |  | | | | | | |