**2017 Colorado SBDC Economic Impact**



Funded in part through a cooperative agreement with the U.S. Small Business Administration

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lead Consultant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Initial Counseling Session: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To be “in business” must meet 2/3 criteria below:**

Business Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Is the business registered with the state?

□ Has the client invested significantly in the business?

□ Does the business have sales (billings to customers)?

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Last fiscal year** | How much have you personally invested to date? | | | How much outside funding have you received to date? | | Last Year’s Employees  (including owners) | | | | | | What were your total sales last year/this year? | | How much did you secure\*\* in contracts last year? | | **Signatures** | |
| Part Time | | Full Time | | Total | |
|  | Cash | | | Bank | |  | |  | |  | |  | |  | | Client | |
| Credit | | | Private Investor | | SBDC Consultant | |
| Assets\* | | | Other | | SBDC Director/Coordinator | |
| **Have SBDC consulting and training services assisted you with any of the following activities?** | | | | | | | | | | | | | | | | | | |
| **Follow-on**  **Session**  **Date** | Did you start your business? (see blue box above for definition) | | Additional personal investment for this year since last reported: | | Additional outside funding for this year since last reported: | | Current # of Employees  (including owners) | | | | | | What are your current YTD sales? | | New contracts secured\*\* since last reported: | | ***I attribute that the assistance provided by the Colorado SBDC Network contributed to the results shown below (Client signature* required, *others optional)*** | |
| Part Time | | Full Time | | Total | |
|  |  | | Cash | | Bank | |  | |  | |  | |  | | # of contracts  $amount | | Client | |
| Credit | | Private Investor | | SBDC Consultant | |
| Assets\* | | Other | | SBDC Director/Coordinator | |
|  |  | | Cash | | Bank | |  | |  | |  | |  | | # of contracts    $amount | | Client | |
| Credit | | Private Investor | | SBDC Consultant | |
| Assets\* | | Other | | SBDC Director/Coordinator | |
|  |  | | Cash | | Bank | |  | |  | |  | |  | | # of contracts  $amount | | Client | |
| Credit | | Private Investor | | SBDC Consultant | |
| Assets\* | | Other | | SBDC Director/Coordinator | |
|  | | \* Computers, tools, vehicles, etc. \*\* Signed contracts | | | *If this information is not provided on a regular basis, access to consulting may be limited.*  **YOUR INDIVIDUAL BUSINESS DATA REMAINS CONFIDENTIAL.** | | | | | | | | | | | | | |

Organizational Entity Type: \_\_\_\_\_\_\_\_\_\_ Female Ownership %: \_\_\_\_\_\_\_\_\_  
 (Sole Proprietor, LLC, Inc., etc.)

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Business:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lead Consultant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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