Prospect Organization:	
Contact Name: Phone:	
Address: City/ST/ZIP:	
What do they do?	
Source:	
Inbound lead?	
From? (check one) Option A Option B Option C Option D Other	
Out bound lead?	
From? (check one) Option A Option B Option C Option D Other	
Criteria	X
Are in one of our 3 focus industries (legs of the stool)	
Criteria #2	
Criteria #3	
Criteria #4	
Criteria #5	
Criteria #6	
Criteria #7	
Criteria #8	
Criteria #9	
Criteria #10	
TOTAL (If #1 is a no, all the rest must be a yes. Otherwise 7+ is minimum to actively pursue.)	
Things we should also consider (bonus points)	

