

100 POINT EVALUATION

Investor:	Company:	Telephone: () -	Email:
Project/Company:	Company:	Telephone: () -	Email:

1. Can this make money?	GOOD 10 <input type="checkbox"/> 9 <input type="checkbox"/> 8 <input type="checkbox"/> 7 <input type="checkbox"/> 6 <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> BAD
2. Is there a need for this?	GOOD 10 <input type="checkbox"/> 9 <input type="checkbox"/> 8 <input type="checkbox"/> 7 <input type="checkbox"/> 6 <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> BAD
3. Clear definition of both the product and strategy?	GOOD 10 <input type="checkbox"/> 9 <input type="checkbox"/> 8 <input type="checkbox"/> 7 <input type="checkbox"/> 6 <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> BAD
4. Market size, growth rate, and understanding of the market?	GOOD 10 <input type="checkbox"/> 9 <input type="checkbox"/> 8 <input type="checkbox"/> 7 <input type="checkbox"/> 6 <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> BAD
5. Team, Experience, and Personal Character Evaluation?	GOOD 10 <input type="checkbox"/> 9 <input type="checkbox"/> 8 <input type="checkbox"/> 7 <input type="checkbox"/> 6 <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> BAD
6. Attention to detail, accuracy, truth, and security?	GOOD 10 <input type="checkbox"/> 9 <input type="checkbox"/> 8 <input type="checkbox"/> 7 <input type="checkbox"/> 6 <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> BAD
7. Customer knowledge, sales strategy and ability to sell?	GOOD 10 <input type="checkbox"/> 9 <input type="checkbox"/> 8 <input type="checkbox"/> 7 <input type="checkbox"/> 6 <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> BAD
8. Competitor knowledge, pricing, and competitive advantage?	GOOD 10 <input type="checkbox"/> 9 <input type="checkbox"/> 8 <input type="checkbox"/> 7 <input type="checkbox"/> 6 <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> BAD
9. Realistic numbers and Calculations, ability to meet deadlines, and exit strategy?	GOOD 10 <input type="checkbox"/> 9 <input type="checkbox"/> 8 <input type="checkbox"/> 7 <input type="checkbox"/> 6 <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> BAD
10. Positive impact on society?	GOOD 10 <input type="checkbox"/> 9 <input type="checkbox"/> 8 <input type="checkbox"/> 7 <input type="checkbox"/> 6 <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> BAD

TOTAL POINTS: _____

Comments:

Further Review? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you willing to invest? Yes <input type="checkbox"/> No <input type="checkbox"/>	Total Investment (USD \$):
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Investor Signature _____	Date _____
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CONFIDENTIAL