



VEGRE Sales Representative Questionnaire

Company Name:

Legal form of Company:

Street Address:

City/State/Province:

Postal Code:

Country:

Telephone Number:

Fax Number:

Company Website:

Contact Person:

Title:

Nationality:

E-mail:

Mobile Number:

Do you speak English fluently? YES NO

Is your company a division or subsidiary of another company?

NO YES

When was your company established:

Indicate the number of years in food-related business:

Do you plan to operate as a marketing agent (commission) or distributor (buy and sell)?

Marketing Agent Distributor

Number of employees in your company:

Number of sales people:

Number of Branch Offices/Warehouses/Retail Markets:

VEGRE Sales Representative Questionnaire

What is your company turnover? \$

What is your present annual sales? \$

What is your experience in sales?

What region/countries do you presently cover?

Have you worked with Greek companies before?

NO

YES

What would be your plans to advertise, exhibit, and/or promote our products?

VEGRE Sales Representative Questionnaire

- You use daily:
- Car
 - Smart Phone
 - iPad or Tablet
 - Laptop
 - Brochures

Are you familiar with social media promotion?

NO YES

What are the projected sales of our products for the next fiscal year (U.S. Dollars)?

Thank you for your time to complete the form. After typing the information, please save, print, sign, scan and return the form via email to info@vegre.gr
We will respond within 10 working days.

Signature:

Name:

Date: