

Capital Raising Form

Please complete this form so we can assess your company's capital raising potential prior to our first meeting. This will enable us to prepare a DRAFT Capital Raising Scenario for your business.

Name, or proposed name, of your enterprise:

What is your company structure?

- Company yet to be formed
- Pty Ltd
- Pty Ltd but trades as a Trust
- Unlisted Limited company
- Listed Limited company

What does your business do? If you were to tell the story of your business, your business project or your investment opportunity what would you say?

How does your company make money?

Why would you like to raise capital?

What will the money be used for?

| Purpose | \$ |
|-------------------|----|
| R&D | |
| Marketing | |
| Production | |
| Other (list type) | |
| | |
| | |
| | |
| | |
| | |
| | |

Who runs your business?

Please list the folk that are on the Board:

| Role | Name & Qualification |
|------------------------|----------------------|
| MD/CEO | |
| Executive Director | |
| Non-Executive Director | |
| Company Secretary | |
| Other (list role) | |
| | |
| | |

Please list the folk that are on your management team:

| Role | Name |
|------|------|
| | |
| | |
| | |
| | |
| | |
| | |

Do you work in the business full time?

- Yes No

Capital Raising Form continued...

Who owns the business? Please indicate the approximate percentage of ownership considered to be currently held by each "founder":

| Current Owner(s) | % Considered held |
|------------------|-------------------|
| | |
| | |
| | |
| | |

Business History

| Milestone | Year |
|------------------|------|
| Founded | |
| Commence trading | |
| Go into revenue | |
| Go into profit | |

Approximate amount of capital required in the next 12 months.

\$ _____

Approximate amount of capital required in the next 3 years.

\$ _____

Percentage (%) of ownership of the enterprise you are prepared to issue to new investors in order to obtain the required funds?

| | | | |
|--------|--|--------|--|
| 5-10% | | 30-40% | |
| 10-20% | | >40% | |
| 20-30% | | | |

What is your budget for raising capital and promotion?

| | | | |
|----------|--|----------|--|
| \$5-10k | | \$20-30k | |
| \$10-20k | | \$30k+ | |

At what stage is your business?

Please tick the most suitable answer.

- Looking to exit via IPO / RTO
- Looking for mergers and acquisitions
- Growth / expansion
- First profit
- Sales but no profit
- First sale
- Working prototype
- Proof of principal
- Idea / research

When your business achieves the goals you want it to, how do you expect your investors will get their money back?

Please tick the box that is the most suitable exit strategy:

- Financial trade sale
- Strategic Trade Sale
- List on a stock exchange (IPO or RTO)
- Management buy out
- Not sure at this stage

Please tell us about your financials:

| | Revenue (\$K) | EBIT (\$K) |
|-----------------|---------------|------------|
| Previous Year | | |
| Current Year | | |
| Forecast Year 1 | | |
| Forecast Year 2 | | |
| Forecast Year 3 | | |

How much does the Company own?

Please review your balance sheet for this information.

| | (\$K) |
|------------|-------|
| Net Assets | |

What assets does the Company own?

| "Hard Assets" eg. "bricks and mortar assets" | Description |
|---|-------------|
| | |
| | |
| | |
| | |

What assets does the Company own?

| "Soft Assets" eg. "intellectual property" | Description |
|--|-------------|
| | |
| | |
| | |
| | |

How many employees do you have?

When do you expect to start your capital raise?

Month: _____

Capital Raising Form continued...

Please complete your contact details so we can get your DRAFT Capital Raising Scenario back to you as soon as possible:

| | |
|---|--|
| Company Address: Number / Street | |
| Company Address: Suburb / State | |
| Company Website: | |
| Contact Name: | |
| Contact Position: | |
| Contact Mobile: | |
| Contact Landline: | |
| Contact Email: | |
| Industry: | |
| Who referred you this form? | |

What else do you need help with?

What challenges does your business face in the coming three months?

Please save this form with your company name as the file name before sending it to Funding Strategies.
Please return the completed form, together with any additional information you have (for example Business Plan, Information Memorandum, your confidentiality agreement if you require us to sign one, etc), to:

Email: brisbane@fundingstrategies.com.au

Telephone: +61 7 3160 2840

**Funding Strategies Pty Ltd
ACN 161 423 123**

What happens next:

- We review the completed Capital Raising form and any other information you sent us.
- As appropriate, we will contact you to arrange an initial, complimentary, obligation free call or meeting to discuss how we can be of assistance.

We look forward to hearing from you!

