



PERSONAL ACQUISITION CRITERIA

ALL INFORMATION PROVIDED WILL REMAIN CONFIDENTIAL

(Please complete both forms and fax to JPMongrain at 416.981.7205)

Personal Information:

Name:	
Address:	
Phone (Home):	Phone (Work):
Phone (Mobile):	Fax:
Email:	

Professional Information: (Please provide resume if available)

Present Employer:
Address:
Position:
Job Description:
Experience:
Education:

Investment Information:

What is your investment range? \$ _____ to \$ _____
How much cash is available to invest? \$ _____
How much equity is available to invest? \$ _____

SIGNING THIS FORM DOES NOT IMPLY THE CREATION OF AN AGENCY RELATIONSHIP BETWEEN JPMONGRAIN AND YOU. YOU HEREBY AGREE THAT JPMONGRAIN'S ONLY ROLE HEREIN IS TO PROVIDE YOU WITH INFORMATION ON POTENTIAL BUSINESS OPPORTUNITIES THAT MAY MEET YOUR REQUIREMENTS.

Signature: _____ Date: _____

Acquisition Experience:

How long have you been looking for an acquisition?
What is your preferred geographic location(s)?
Have you purchased a business before? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you sold a business before? <input type="checkbox"/> Yes <input type="checkbox"/> No
What types of companies have you owned?
What general business interests do you have?

Personal Skills & Aptitudes: (Please check where appropriate)

Sales	<input type="checkbox"/>	Distribution	<input type="checkbox"/>	Finance	<input type="checkbox"/>	Other
Marketing	<input type="checkbox"/>	IT	<input type="checkbox"/>	Accounting	<input type="checkbox"/>	
Production	<input type="checkbox"/>	Engineering	<input type="checkbox"/>	HR	<input type="checkbox"/>	

Identify Industry Experience/Interest: (Please check where appropriate)

Manufacturing:	Interest	Experience	Transport/Communication:	Interest	Experience
Food	<input type="checkbox"/>	<input type="checkbox"/>	Taxi, Bus, Shuttles	<input type="checkbox"/>	<input type="checkbox"/>
Textile	<input type="checkbox"/>	<input type="checkbox"/>	Moving, Storage	<input type="checkbox"/>	<input type="checkbox"/>
Apparel	<input type="checkbox"/>	<input type="checkbox"/>	Transportation Services	<input type="checkbox"/>	<input type="checkbox"/>
Lumber & Wood Products	<input type="checkbox"/>	<input type="checkbox"/>	Communication	<input type="checkbox"/>	<input type="checkbox"/>
Furniture	<input type="checkbox"/>	<input type="checkbox"/>	Utility Services	<input type="checkbox"/>	<input type="checkbox"/>
Paper	<input type="checkbox"/>	<input type="checkbox"/>	Retail:		
Printing & Publishing	<input type="checkbox"/>	<input type="checkbox"/>	Building, Garden & Hardware	<input type="checkbox"/>	<input type="checkbox"/>
Chemicals	<input type="checkbox"/>	<input type="checkbox"/>	General Merchandise	<input type="checkbox"/>	<input type="checkbox"/>
Rubber & Plastic	<input type="checkbox"/>	<input type="checkbox"/>	Food Stores	<input type="checkbox"/>	<input type="checkbox"/>
Stone, Glass, Concrete	<input type="checkbox"/>	<input type="checkbox"/>	Automotive Dealers	<input type="checkbox"/>	<input type="checkbox"/>
Leather	<input type="checkbox"/>	<input type="checkbox"/>	Apparel	<input type="checkbox"/>	<input type="checkbox"/>
Primary Metal Industries	<input type="checkbox"/>	<input type="checkbox"/>	Furniture	<input type="checkbox"/>	<input type="checkbox"/>
Fabricated Metal	<input type="checkbox"/>	<input type="checkbox"/>	Service:		
Machinery	<input type="checkbox"/>	<input type="checkbox"/>	Trade Contractors	<input type="checkbox"/>	<input type="checkbox"/>
Electronic	<input type="checkbox"/>	<input type="checkbox"/>	Building Construction	<input type="checkbox"/>	<input type="checkbox"/>
Transportation Equipment	<input type="checkbox"/>	<input type="checkbox"/>	Finance, Insurance, Real Estate	<input type="checkbox"/>	<input type="checkbox"/>
Instruments	<input type="checkbox"/>	<input type="checkbox"/>	Personnel	<input type="checkbox"/>	<input type="checkbox"/>
Wholesale:			Business Services		
Durable Goods	<input type="checkbox"/>	<input type="checkbox"/>	Automobile Repair	<input type="checkbox"/>	<input type="checkbox"/>
Non-Durable Goods	<input type="checkbox"/>	<input type="checkbox"/>	Amusement, Recreation	<input type="checkbox"/>	<input type="checkbox"/>
Hospitality:			Health		
Restaurant	<input type="checkbox"/>	<input type="checkbox"/>	Professional Services	<input type="checkbox"/>	<input type="checkbox"/>
Hotel, Motel, Inn, Tourist Resort	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>