The U.S. Department of Agriculture (USDA) and your (***insert USDA-endorsed Trade Show name***) USA Pavilion organizer kindly request your feedback. Individual trade data will be kept ***confidential****.* THANK YOU!

**COMPANY PROFILE**

Please answer ALL questions in this section including listing actual sales numbers in US$. Individual data is kept confidential. Combined results are used to evaluate future show endorsement and USDA/FAS programs.

 **First Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Last Name \_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Job Title** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Company Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Type of Products** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­

1. **What is your primary business activity? Please check one of the following:**

🔿 Manufacturer 🔿 Service

🔿 Exporter/Trading Company 🔿 Other:

🔿 Distribution/Wholesaler

1. When you participated in this show, **was your firm new to this** **MARKET**? 🔾 Yes 🔾 No

When you participated in this show, **was your firm new to** **EXPORT**? 🔾 Yes 🔾 No

1. **Please identify your company size, sales and ownership type:**

 **Sales Employees Ownership**

🔾 under $1 million 🔾 10-50 employees 🔾 Women-owned

🔾 $1-10 million 🔾 50-100 employees 🔾 Minority-owned

🔾 $10-50 million 🔾 100-250 employees 🔾 Veteran-owned

🔾 $50-250 million 🔾 250-500 employees 🔾 None of the above

🔾 over $250 million 🔾 over 500 employees

1. **How many products did you introduce or test market at this show?** \_\_\_\_\_\_\_
2. **Which product Type generated the most buyer Interest?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. **How many serious contacts did you make?** \_\_\_\_\_\_\_\_
4. **What were your on-site sales in US$ (contracts signed) at this show?**  US$\_\_\_\_\_\_\_\_\_\_\_
5. **What are your projected 12-month sales in US$ resulting from this show?** US$ \_\_\_\_\_\_\_\_\_\_\_

 ***Company Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

1. **Were the following show objectives met at the show?**

|  |  |  |  |
| --- | --- | --- | --- |
|  | YES NO N/A |  | YES NO N/A |
| Finding a sales representative  | 🔾 🔾 🔾 | Immediate sales during event  | 🔾 🔾 🔾 |
| Finding a licensee | 🔾 🔾 🔾 | Market exposure | 🔾 🔾 🔾 |
| Finding a joint venture partner  | 🔾 🔾 🔾 | Other | 🔾 🔾 🔾 |

**SHOW QUALITY**

1. **Rate show’s effectiveness in meeting your exhibiting goals**

 🔾 Excellent 🔾 Very Good 🔾 Satisfactory 🔾 Poor *Comment*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Rate show in general: atmosphere, events program, hospitality**

🔾 Excellent 🔾 Very Good 🔾 Satisfactory 🔾 Poor *Comment*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Rate show USA pavilion: location**

🔾 Excellent 🔾 Very Good 🔾 Satisfactory 🔾 Poor *Comment*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. a. **Rate THIS year’s Visitors at the show**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Excellent** | **Very Good** | **Average** | **Poor** | **N/A** | *Comments*   |
| **Quality**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |  |
| **Quantity**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |  |
| **Traffic Flow** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |  |

B. **FOR RETURNEES: rate this year’s Visitors compared to previous edition(s)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Excellent** | **Very Good** | **Average** | **Poor** | **N/A** |
| **Quality**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Quantity**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Traffic Flow** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |

1. **Would you participate in this show again?**

🔾 **yes** 🔾 in the USA Pavilion 🔾 outside of USA Pavilion 🔾 Already booked pre-show

🔾 larger booth \_\_\_ sqm 🔾 **no** because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🔾 same size \_\_\_ sqm 🔾 **undecided** because \_\_\_\_\_\_\_\_\_\_\_\_\_\_

🔾 downsize \_\_\_ sqm

1. **Would you participate other trade shows managed by (*insert USA Pavilion organizer name*)? \_\_\_\_\_**

**PAVILION SERVICES**

1. **Rate the Organizer‘s (*insert USA Pavilion organizer name*)** **communication, efficiency, helpfulness, quality:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Preshow** | **Excellent** | **Very Good** | **Average** | **Poor** | **N/A** | *Comments*   |
| E-bulletins, alerts  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |  |
| Shipping & Consolidation | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |  |
| Customer service  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |  |
| Exhibitor Manual/Catalogue  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |  |

 ***Company Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Onsite** | **Excellent** | **Very Good** | **Average** | **Poor** | **N/A** | *Comments* |
| Marketing Information  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |  |
| Sign-in process  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |  |
| Onsite ordering, assistance | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |  |
| Customer Service quality | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |  |
| **USA Pavilion Design & Services** |  |  |  |  |  |  |
| Pavilion Design | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |  |
| Additional Services (specify) | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |  |

1. **Please list** services that you would like to see in the future or services you don’t require:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**FAS-SPONSORED TRADE MISSIONS**

Receive up-to-date information on **FAS-sponsored international Agribusiness trade missions (ATMs)** and **Virtual trade events**!

🔾 **yes**, opt me in ❑ send opt-in also to colleague(s) Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 🔾 **no**, not interested Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TESTIMONIAL**

Provide a quote mentioning benefits and/or successes that you achieved at **Fine Food Australia 2019**. Quote may be used in future exhibitor and/or visitor marketing materials. Thanks! Your support is greatly appreciated!

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ***Your Signature Date***

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