



Services **designed to enhance** your business!

When customers sign up for ACN's services, a child gets fed.
And when customers pay their **ACN Phone Service** bills each month, another child gets fed.



Are you a business owner? Yes No

How many employees do you have?

- Less than 3
- 3-50
- More than 50

How many locations?

- One
- 2-4
- 5 or more

PHONE SERVICES



Number of business phone lines? _____

Does your business have a fax line? Yes No

Does your business use Internet services? Yes No

Who is your provider? _____

Which of the following phone features are important to you?

- A service that allows me/employees to work remotely
- Traditional features, including Call Transfer
- Voice Mail Notification by Email
- State-of-the-art equipment
- Use of existing equipment

Current phone service provider _____

My monthly phone bill is approximately \$ _____

Months left on current contract _____

Primary phone number _____

ENERGY



Current energy provider? _____

Type of service? Electricity Natural Gas Both

My monthly bill is approximately \$ _____

Does your business use less than 185,000 therms per year?

- Yes No

Does your business use less than 3,000,000 kWh per year?

- Yes No

I am interested in the following:

- Natural Gas Electricity

PAYMENT PROCESSING



Do you accept credit cards?

- Yes No I plan to

Average ticket size \$ _____

I process over \$3,000 per month Yes No

SATELLITE TV



How many stories does your building have? ____

Is your building a multi-dwelling unit? Yes No

What type of business establishment do you own?
(i.e. restaurant, bank, medical office etc.) _____

Do you want extensive sports programming or international programming? _____

Current TV provider _____

My monthly bill is approximately \$ _____

Months left on current contract _____

Number of receivers _____

BUSINESS SECURITY & AUTOMATION



Current Security Provider _____

My monthly bill is approximately \$ _____

NOTES:

Total Monthly Amount \$ _____

Total Yearly Amount \$ _____

Name _____

Company Name _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone Number _____