

Key Information

Organization Name: _____

Acronym: _____

Website Address: _____

What Prompted the search for new management?

Proposal Deadline: _____

What is the budget amount for services? _____

Must your new management be headquartered in a certain location?

☐ Yes

☐ No

If yes, specify which country, region, state, or metro area:

Who are the current provider(s) of the services?

Type of organization:

☐ Trade Association

☐ Professional Society

☐ Foundation

☐ Other: _____

IRS Classification:

☐ 501(C)3

☐ 501C(c)6

☐ Other:

Services Requested

(Select all that apply)

- ☐ Advisory Services (consulting, leadership, Development, Strategic Planning, etc.)
- ☐ Financial Management
- ☐ Certification/Accreditation Management
- ☐ Conferences/Meeting Management
- ☐ Consulting Services (Management Consulting, Strategic Planning, Leadership Training, etc.)
- ☐ Government Relations
- ☐ International Expansion
- ☐ Marketing/Communications
- ☐ Membership/Database Services
- ☐ Order Fulfillment
- ☐ Public Relations
- ☐ Sponsorship Sales
- ☐ Survey Services (Needs Assessment, Salary Survey, etc.)
- ☐ Website Development and/or Management
- ☐ Other: _____

Do you require a specific industry expertise or experiences? ☐ Yes ☐ No

Please indicate if any special credentialing is expected of the AMC or its personnel:

Does the organization have a formalized search committee? ☐ Yes ☐ No

If yes, are you using a third party? _____

Contact Name: _____

Contact's position within the organization: _____

Contact's email address: _____

Mailing Address Line 1: _____

Mailing Address Line 2: _____

City, State, Zip: _____

Phone: _____

How did you hear about Pivot Management Professionals?

How would you like proposals to be delivered to you? ☐ Mail
☐ Email
☐ Both

If by mail, how many copies are required?

What is the date for initial screening proposals by the Search Committee?

What is the target date for completion of due diligence on short listed proposals?

What is the date for the selected proposal presentations?

What is the location for suspected proposal presentations?

What is the start of the transition process?

What is the formal start date?

Are any members of your organization's search committee employed by an AMC? * ☐ Yes ☐ No

If yes, explain:

What is the date for initial screening of proposals by the Search Committee? *

What is the target date for completion of due diligence on short listed proposals? *

What is the date for selected proposal presentation(s)? *

What is the location for selected proposal presentation(s)?

What is the start date for the transition process? *

What is the formal start date? *

More About the Organization

Year Established* _____

Type of Organization* _____

IRS Classification: _____

Geographic Scope of Organization* _____

Number of Chapters or Regional Groups* _____

Number of Board Members: _____

Does your organization have a strategic plan? ☐ Yes ☐ No

If yes, what year was the most recent plan developed? _____

Do you plan to include your strategic plan with the RFP? _____

Key Membership Benefits

- ☐ Education
- ☐ Networking
- ☐ Lobbying
- ☐ Other: _____

Do you plan to redevelop a strategic plan under new management? _____

Total number of individual members (all classes) _____

Total number of company members? _____

How many classes of membership are there? _____

What software does your company use for its membership database? _____

Conferences and Meetings

Number of in-person board/executive meetings per year: _____

Number of in-person committee/special interest group meetings per year: _____

Indicate all future conference and events (of any size) for the coming year. Include meeting name, location, hotel, registration fee and number attending:

Meeting 1

Meeting 2

Meeting 3

What was the total Gross Income from all sources for the most recent fiscal year? _____

Dues Billing Cycle

What is the total income from membership dues? _____

Equity at last fiscal year's end? _____

When does your fiscal year begin? _____

Accounting Method? _____

Are the financials routinely audited/reviewed by an independent CPA? ☐ Yes ☐ No

If yes, when was the most recent audit performed? _____

Describe your dues amounts (Include the amount, applicable member type, and the number of members in each type): _____

Dues Type 1:

Dues Type 2

Dues Type 3:
