|  |  |
| --- | --- |
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# Manufacturers Staff In-service Form

## COMPANY IN-SERVICE INFORMATION

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Company Name:  |  |  | Date:  |  |
| City:  |  |  | Authorized In-Service  |  |

## IN-SERVICE TYPE

|  |
| --- |
| [ ]  Product Training[ ]  Sales Training |

## MANUFACTURERS PRODUCTS IN-SERVICED

|  |  |  |
| --- | --- | --- |
| [ ]  Golden Technologies  [ ]  Lift Chairs [ ]  Heat & Massage [ ]  Fabrics  [ ]  Flagship Display [ ]  Scooters [ ]  Power Wheelchairs [ ]  Linx Diagnostic Bluetooth [ ]  Marketing Programs [ ]  Sales Training (MSFC)[ ]  CAIRE Medical [ ]  Stationary Concentrators [ ]  Portable Concentrators  [ ]  Liquid Concentrators  [ ]  Maintenance Program [ ]  Certified Technician School  | [ ]  3B Medical  [ ]  CPAP/AUTO/BIPAP [ ]  Interfaces [ ]  Lumin / Accessories[ ]  Responsive Respiratory [ ]  Conserving Devices [ ]  Regulators  [ ]  Cylinders / Carts / Storage  [ ]  Compliance Signage  [ ]  Ez-Access  [ ]  Threshold / Portable Ramps [ ]  Modular Ramps [ ]  Modular Ramps Rental Program [ ]  Vehicle Lifts [ ]  Automatic Door Openers [ ]  VPL Lifts  | [ ]  Disc Disease Solutions (DDS) [ ]  L0631 & L0648 Back Brace  [ ]  L0637 & L0650 Back Brace [ ]  K0902 OA Knee Brace [ ]  Rose Healthcare [ ]  Mobility (Non-Powered) [ ]  Bath Safety  [ ]  Bariatric Products [ ]  Aids to Daily Living  [ ]  Orthopedic Soft goods[ ]  Compass Health  [ ]  Inventory Solutions [ ]  Cash Flow / Terms  [ ]  Bundle Ordering Discounts  [ ]  Online Ordering Platforms |

## STAFF PROCEDURES - OPTIONAL

|  |  |  |
| --- | --- | --- |
| [ ]  Review general sales procedures[ ]  Review follow-up procedures [ ]  Consumer Financing Programs[ ]  Online Ordering Platforms[ ]  Showroom Design & Development[ ]  Consultation Services | GENERAL SALES PROCEDURES* Demonstrate Products
* Ask Questions
* Up Care Customers
* Professional Customer Service
* Professional Company Image
 | FOLLOW-UP PROCEDURES* Follow up with Customers
* Send Thank you Cards for business
* Monthly Specials
* Ask for Referrals
* Provide Company Brochure
 |

## EMPLOYEE SIGNATURE:

|  |
| --- |
| 1. 7.2. 8.3. 9.4. 10.5. 11.6. 12. |

## AUTHORIZED SIGNATURE OF REGIONAL SALES MANAGER