

COMPLETE A SEPARATE MARKETING PLAN FOR EACH COUNTRY IN WHICH FUNDS ARE BEING REQUESTED

This section to be completed for marketing activities which take place in another country.

All sections are required.

**COUNTRY:** 

I. ELIGIBLE ACTIVITIES	
Please select the activities you plan to conduct and add any additional details.  Please note that all marketing activities must promote the U.S. origin of your products.	
rease note that an marketing detivities mast promote the ols, origin or your products.	
Description	Selected
Trade shows (Please list: name of show, dates, and location city)	
Coach airfare (US or EU carrier) and federal per diem rate for hotel & meal allowance for max. 2 people	
Product demonstrations or contractors for promotion (provide details including role of contractors)	
Point of sale materials, store promotions, or temporary displays (please provide detail)	
Freight for sample shipments (to customer, for distributor, for eligible trade show)	
E-marketing, social media, or foreign country website development (provide details)	
Promotional giveaways (provide details)	
Package/label modifications (list specific products, type of revision, reason for modification)	
Advertising (list types of advertising planned)	



List Specific Products	s to be Promote	ed in this C	<u>ountry</u>		
Brand/Private Label Name to be Promoted		Is produ to mai "X" if	ket?		
III. FUNDING REQUES			uros in this moul	roti	
Please estimate your to <b>Total</b>	= <b>A</b>	e expenditu +		tei: +	C
Total Budget for MAP marketing activities in this country	MAP Funds Red (50% of Bud		Applicant F (Remaining Exp Reimburs	ense Not	Foreign Third Party Funds (if applicable)



COUNTRY:					
IV. ACTIVITY GOALS  Please explain why you selected this country including your <u>primary objective</u> in this market, and any <u>measurable goals</u> for the upcoming year. Be specific!					
For purposes of the Market Access Program, do you hold exclusive representation rights in this country for which funding is being requested?					
Plan to make your first sale in this country?	Yes Yes		No 🗖		
Does your company have an importer in place for this market?  (If yes, please complete "Foreign Third Party Contacts" section or		page. If	no, please explain).		



COUNTRY:						
V. COUNTRY SPECIFIC PRODUCT SALES						
YEAR	EXPORT SALES VALUE For <b>ALL PRODUCTS to this</b> market	EXPORT SALES VALUE Only For Products Promoted WITH MAP Funds in this market				
2022 (actual)						
2023 (actual)						
2024 (projected)						
2025 (projected)						
VI. FOREIGN THIRD PART	TY CONTACTS					
Please list all your Foreign are required.	Third Parties (Importers, Distributors, A	Agents) in this market. All fields				
Company:						
Prefix:	_ First Name:	Last Name:				
Suffix:	Title:					
Email:						
Website:						
Telephone:	Fax:					
Address 1:						
Address 2:						
	Locale:					
Country:						

If additional room is needed for multiple contacts, please make copies of this page.