Stage 1
Advertising Agency Fact Sheet

Agency Name:

Website:

Names and Titles of Principals:

A. Agency History and Ownership

1. Founding Date. What year was your agency founded?

2. Mergers and Acquisitions. List any subsequent mergers, acquisitions or name change.

3. Current Ownership. Who are the current owners of your agency?

4. Parent Company/Affiliation. If applicable, indicate your parent company and the five largest companies/agencies based on media billings that are owned or affiliated with your parent company.

B. Current Agency Size and Clients

1. Current Agency Size. Summarize the total billings for calendar years (CY) 2014, 2015 and 2016, number of accounts, and number of full-time employees (FTE) currently being handled directly by your California office(s).

Calendar Year	Total Billings Per Year	Number of Accounts	Number of FTEs
2014			
2015			
2016			

2. Client History. Complete the chart below ranked by size of the agency's clients – indicating brands and/or product/services if not agency of record for client – serviced primarily by your California-based office(s) from January 1, 2013, to date. Include a maximum of 25 clients with the following information:

   a) Client name with the start and end date for all accounts.
   b) Indicate the approximate size of each account in terms of annual billings. Accounts of $1 million or more should be rounded to the closest $1 million. Accounts less than $1 million should be rounded to the closest $100,000. **If there are Non-Disclosure Agreement (NDA) limitations, please provide a range.** Indicate accounts that resulted in purchases of California media.

c) Indicate the status of each account as open or closed. For closed accounts, indicate the reason for discontinuation.
d) Indicate the number of full-time employees assigned to each account.
e) Indicate any accounts that have a clear and specific focus on:

AA	African American	**H/L**	Hispanic/Latino
API	Asian/Pacific Islander	**LGBT**	Lesbian/Gay/Bisexual/Transgender
C	Cause or philanthropic	**LOW**	Low Income or Low Education
H	Health-related	**M**	Millennial

Client Name **(Start-End Date)**	**Current Year Annual Billings Estimate and Media Placement**	**Account Status**	**Number of FTE's**	**Special Focus**
( )	☐ California Placement	☐ Open ☐ Closed, Reason:		
( )	☐ California Placement	☐ Open ☐ Closed, Reason:		
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( )	☐ California Placement	☐ Open ☐ Closed, Reason:		

C. Current Media Distribution

1. Spending by Media. Chart your agency's current spending by media. Provide rough figures and percentages by media using the grid below.

   Note for each medium whether media services were performed in-house or through a media buying service, with either an "**I**" for in-house or "**B**" for buying service to the right of the percentage.

PERCENTAGE BREAKDOWN BY MEDIA:

Television:	I/B	%	Digital:	I/B	%	Radio/Out-Of-Home/Print:	I/B	%
National		%	Video		%	Radio, include digital		%
Spot Broadcast		%	Banners, other		%	Outdoor		%
Spot Cable		%	Social		%	Experiential		%
Direct Response		%	Search		%	Print		%
Subtotal		%			%			%

Other: Please list any other media type and its spending percentage not found in the grid above.

Media Type	**I / B**	**%**
		%
		%
		%