ANNTHEO  Virtual Services

Client Assessment

Contact person details:

Contact name: Click here to enter name and surname.

Telephone: Click here to enter telephone number

Facsimile: Click here to enter facsimile number

Email: Click here to enter email address.

Cellular: Click here to enter cellular phone number

Billing Address:

Company: Click here to enter the company name.

Telephone: Click here to enter the telephone number.

Facsimile: Click here to enter the facsimile number.

Email: Click here to enter the email address

Cellular: Click here to enter cellular phone number.

Postal Address: Click here to enter the postal address

Physical Address: Click here to enter physical address of the company

Type of business: Click here to enter type of business

Services:

Briefly describe the service/ what tasks you need done?

Click here to briefly describe.

Click here to briefly describe.

Click here to briefly describe

Any other service/ tasks you need help with?

Click here to enter text.

Click here to enter text.

If the service you need is not listed on our services list, please describe the service or contact us, we are sure to be able to assist you in any way we can:

Click here to enter text.

Do you have any comments or questions we need to address in your consultation?

Click here to enter text.

Any other information you feel might be helpful in helping us to provide you with the service(s) that you need?

Click here to enter text.

Please return this form via fax ( 086 248 3492) or email. If

you have any additional queries, please do not hesitate to

contact me at [anntheovas@yahoo.com](mailto:anntheovas@yahoo.com) anntheovas@telkomsa.net

Marga-Ann