My Pitch

|  |  |  |
| --- | --- | --- |
| Industry: | | Letter |
| Number of employees: | Location: | |
| Business name: | | |
| How will your business make money? | | |



|  |  |
| --- | --- |
| A | B |
| C | D |
| E | F |
| G | H |
| I | J |
| K | L |
| M | N |