



NYS State Trade & Export Promotion (STEP) Grant Program

PROGRAM IMPACT REPORT:	
Company Name:	Report Date:
Address (include Street, City, State, Zip Code):	
Contact Person:	Title:
Telephone #:	E-Mail:
STEP Trade Event or Trade Promotion Activity and Date:	
Country Traveled:	
Is this a new export market for your business? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Please indicate if the following export-related results occurred as a result of assistance granted to your company for participation in the above-named event:	
a. Established overseas market contacts/potential representatives, etc..? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please indicate number (#):	
b. Signed agent or distributor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
c. New/increased business from existing representative or customer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
d. Received orders at the event? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please indicate approximate sales value (\$):	
e. Signed license or joint venture agreement? <input type="checkbox"/> Yes <input type="checkbox"/> No	
f. Other (identify):	
g. Added or plan to add new permanent jobs? <input type="checkbox"/> Yes <input type="checkbox"/> No	
To date, how much actual export sales have increased as a result of your participation in the NYS STEP Grant Program?	
If sales have not yet been realized, do you anticipate such an increase in the future? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please indicate how much do you anticipate export sales to increase over the coming year? (\$): Over the coming 18 months?:	
Signature of Authorized Company Official	Date:
Print Name:	Print Title:

Email the completed STEP Program Participation Report to globalny@esd.ny.gov or mail the original signed report to:

Global NY
Empire State Development
633 Third Avenue, 36 Floor
New York, NY 10017
Attn: NYS STEP Grant Program