## Disaster Recovery Guide for Business





You may be in business for yourself – but you don't have to be in business by yourself

Missourisbdc.org



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#### **Missouri SBDC Recovery Guide for Business**

Welcome to the Disaster Recovery Guide for Business.

It is designed as a working guide that will direct you through the steps as you consider how to proceed post-disaster.

It can also be used in conjunction with your local Missouri SBDC Counselor, who is ready to help you walk through all of the steps. Should you choose not to work with a counselor, it is set up so you can do the steps by yourself.

Too often, during difficult times, business owners don't always think about preparing for recovery, preparing financial and tax records for borrowing recovery funds, or making the difficult decision not to continue.

We wish you well through this process and we're here to help!

— The Staff of The Missouri Small Business Development Centers — missourisbdc.org

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#### First Assessment – Personal

Answer the following questions using the charts below. You can also create action steps with dates due and who is responsible if you would like.

#### **Safety**

Question	Yes	No	Action and/or Comments	By	By
				whom	when
Adequate clothing					
Adequate food					
_					
Adequate housing					
All employees accounted for					
(Use the worksheet provided					
to create a full employee list					
if you do not have one.)					
^					
All employees safe					

#### Registration - if required

You will know the level of registration required only after a disaster has taken place. The state may ask you to call a number and let them know that your business has been affected so they may continue to provide you with information.

If there is a federally declared disaster, instructions on what you need to do will be coming from the federal authorities.

Question	Yes	No	Action and/or Comments	By whom	By when
Registered with state					
Registered with federal					

#### **Business Insurance**

Insurance Agent Name:			Phone:			Email:		
Question	Yes	No	Action	and/or Comme	nts		By whom	By when
Contacted insurance agent								
Documented damage in a li	ist							
Took photos								
Call your counselor an  Missouri SBDC Contact na	-			next steps:		Email:		
Missouri SBDC Contact na	ime:		Phone:			Email:		
Appointment	1	C 11		1	11		1 6	
We strongly suggest that you steps.	u make a 1	TOHO	ow-up app	ointment when y	ou call	your coun	iselor for	next
Date:	Time:			Location:				
NOTES:								
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## Instructions on how to use the rest of the Missouri SBDC Disaster Recovery Guide for Business:

- We suggest that you get an gather all your information and paperwork in one place. You will be
  referring to this information on a daily basis, so it will need to be kept in an easily accessible
  container that can be carried with you, especially if your office or facility is inaccessible. Even if
  have access to your office, the information in this guide should be kept in an easily accessible
  place.
- 2. This guide is designed to help you gather information needed information, make assessments, answer questions, and make the best business decision for your company and yourself. It is designed as a series of steps. An overview flow chart of these steps is provided on page 7.
- 3. This guide is also designed as a worksheet with checklists and places to record actions that need to be taken.
- 4. Ample space is provided throughout the guide for notes. This keeps your planning thoughts and ideas in one place.
- 5. Items with a star  $\bigstar$  indicate additional worksheets and lists that make it easier to gather and organize the information you will need. These are located on pages 30-64.
- 6. We will help you maneuver through the assessments and action steps in this guide by keeping in touch with you in your preferred communication method (phone, email, in-person check-ins).

Take the time to answer the questions carefully and give yourself plenty of time and space to make your decisions.

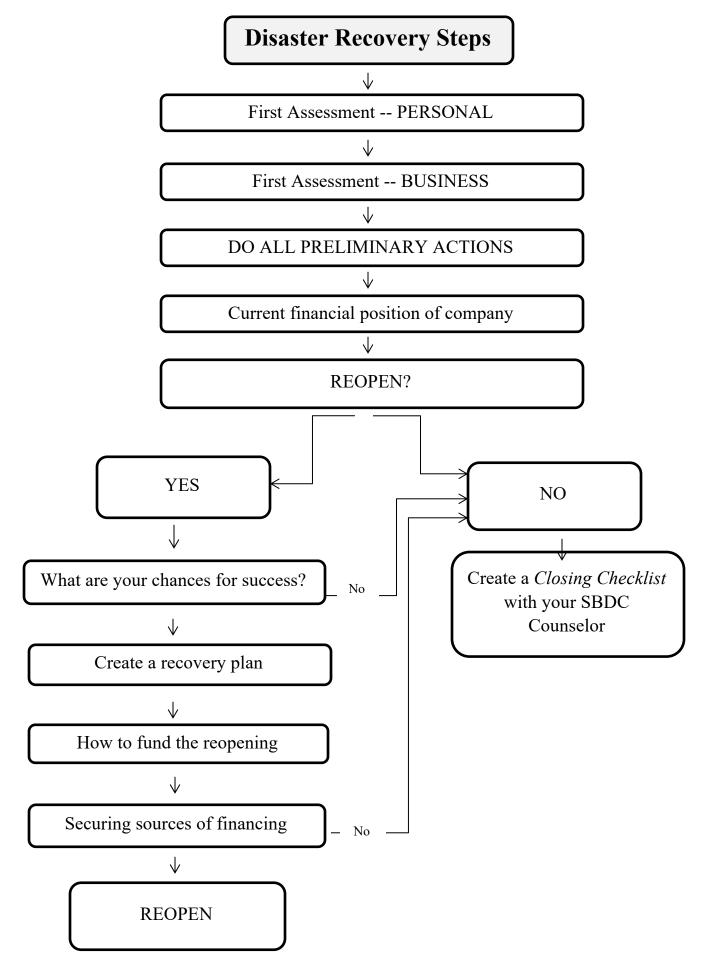
After a disaster the most typical reaction is to get back to normal as quickly as you can. Studies and data show us that the "old" normal is gone and a "new" normal needs to be put into place. Give yourself time to get acclimated.

Businesses have told us that they felt the pressure of all the well-meaning people around them who want the same thing. This is your business and your life, however, and you need to make the best possible decision for yourself and for your family—and that takes time.

As hard as it will feel to complete this workbook, businesses that have worked through these steps with the Missouri SBDC tell us that it was well worth the effort and that their overall recovery was more successful.

We are here to help you.

Name:	Phone:	Email:
TES:		



NOTES:		

#### First Assessment Post-Disaster – Business

The most immediate task after addressing personal and safety issues is to do a quick evaluation of the situation at the business.

If you have a disaster recovery plan, access it and begin to implement. If not, use the questions below to inform your next steps.

Question	Yes	No	Action and/or Comments	By whom	By when
Facility operational?					
Reopen without significant repairs?					
Inventory damaged or recoverable or need to be replaced?					
Supplies damaged or recoverable or need to be replaced?					
Equipment damaged or recoverable or needs to be replaced?					
Does the building need to be secured against theft/vandalism?					
Does the business have a web site that is still active?  a. Should it be shut down?  b. Should a message be placed on it telling clients what has happened and to stay tuned?					
Losing money daily? How much? Use the Quick Cash Loss Calculation sheet.					
How much do you need to live on?  Use Personal Budget Sheet.					
Access to monies to pay personal bills? Note: If this is a federally declared disaster, as the owner you are also eligible for DUA (Disaster Unemployment Assistance). Ask your Missouri SBDC counselor for instructions.					

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## **Preliminary Actions**

This is the next series of to-do's that you need to consider and take care of. Each step of this process will build on the last.

Question	Yes	No	Action and/or Comments	By whom	By when
Preliminary damage assessment to insurance company.					
Insurance company has given you payment amount and date you can expect to receive it.					
List and contact your key stakeholders (include key customers, suppliers & lenders/investors).  Use Key Stakeholder sheet.					
Have contacted local, state and federal government agencies.					
Created an accounts payable list by date due – what bills do you owe and when are they due?  Use Aged AP sheet if you don't have one from QuickBooks or other accounting source.					
Contact vendors about payment schedules. (Ask for best deal.)					
Make decisions about staff in immediate future. Layoff? Refer to unemployment? DUA? Keep some? Use Employee Action List					
Postpone purchasing supplies/inventory?					
Cancel orders that you have made?  Use Vendor Orders to Cancel List					

Question	Yes	No	Action and/or Comments	By whom	By when
Customer orders? Can you					
fulfill them? Have they been					
lost?					
Use Customer Orders Action List					
Are there standard orders					
that you fulfill that you need					
to talk to specific clients					
about?					
Access to your computers?					
Working? Is data intact?					
If computer is not working,					
do you have back-up that					
you can download onto					
another machine?					
Check in on your website					
again and make sure that					
orders have been stopped if					
necessary.					
a. If you can still fulfill orders, make sure					
clients know the					
situation and that					
there may still be					
some delays.					
If you have computer					
access, consider posting on					
Facebook and other social					
media.					
a. If there are ways that					
your customers can					
help, this is a way to					
keep in touch with					
them.					

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#### **Current Business Financial Position**

This process is extremely important in helping you decide your next steps. If you need assistance with this section, it is vital that you get it. Your accountant is the most logical place to start. Your bankers will also be willing to help, as will your Missouri SBDC counselor.

Question	Yes	No	Action and/or Comments	By whom	By when
Have all the business financial records?					
Have your last 3 years of tax returns?					
No available financial information: <i>Use</i> Reconstruction Financial Data sheet.					
What is your insurance agent telling you about your poilcy and what will be covered and what won't be covered? Make a list.					
Determine available cash.  Use Aged Accounts  Receivable and Sales Chart for the next 30/60/90 days.					
Do you have a current balance sheet dated right before the disaster?					
If no balance sheet, contact your accountant.					
Use the financial information to create an accurate picture of the current health of the business. Do this with your Missouri SBDC counselor, your accountant, or any financial mentor.					

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#### **Reopening Considerations**

A disaster can be horrible for your business and your financial situation. Other businesses that have gone through this process tell us that taking the time to pause and assess current state of mind, financial, and physical situations is well worth the effort. They felt that this process allowed for more informed decisions about the future.

Pause now and ask yourself (and your family) the following list of important questions:

Question	Yes	No	Comments/Qualifiers/Additional Info
Happy running the business before the disaster?			
Condition of the business pre-disaster?			
Making the profit you wanted?			
Exit plan before the disaster?  a. Age? b. Health? c. Anyone to leave the business to?			
Prefer being your own boss?  Good at/like managing staff?			
Considered other opportunities?			
Rather reopen a different business?			
Make changes to the existing business if you decide to reopen?			
Prepared for the potential extra demands that recovering your business will place on you, both personally and financially?			
Willing to take on more debt? Walk away if you could?			
If I didn't reopen, what would I do? Should I reopen?			
1			

The final, toughest question: Should I go back into business?

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#### **Chance for Success**

Sometimes there are factors that impact your decision that are out of your control. This is especially true a natural disaster has affected your area. Now is the time to analyze the potential demand for your product or services post-disaster by answering the following questions:

Question	Yes	No	Comments/Qualifiers/Additional Info
Is your business vital to the			
community (e.g., grocery			
store, gas station, drug store)?			
Is your business the type that			
everyone needs to recover			
their homes and businesses			
(e.g., home improvement store)?			
Key customers and/or			
suppliers been affected by the disaster?			
Have they found other			
sources so that you will have			
to "get them back"?			
Disaster led to other			
businesses in your area			
closing, and if so, have you			
determined how this may			
impact your business?			
Economic climate of the area:			
a. Pre-disaster?			
b. Post-disaster?			
Were you keeping up with the			
industry?			
Can your business change			
easily to react to outside			
forces?			
Can you reopen quickly?			
Will you be the first business			
to reopen in your area?			
Can you wait to reopen and			
still be viable when you do?			

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#### **Recovery Plan**

If you decide to reopen, there are still some additional questions that need to be answered before you proceed. You now need to make a recovery plan. This will be done in the following steps:

Question	Yes	No	Action and/or Comments	By whom	By when
Developed your recovery					
objectives? Use Recovery Goals					
Worksheet.					
Established a recovery team with					
clear responsibilities from the					
recovery plan?					
Can team members work off site?					
What are all the requirements to					
reopen your business? <i>Use</i>					
Recovery Plan Worksheet.					
Adequate resources (staff,					
finances, etc.) to bring the					
business up to normal operating					
levels?					
Cost to execute your recovery					
plan? Use Cost Estimations for					
Re-opening.					
Incorporated lessons from					
running your business prior to the					
disaster into your recovery plan?					
Incorporated your analysis of the					
market conditions post-disaster					
into your recovery plan?					
Financial goals you want to					
achieve (net profit margin, ROI,					
etc.)?					
Addition of new product lines or					
removal of existing product lines?					
Addition of new services or a					
reduction of services?					
Can you reduce operating costs?					
Can you adopt new technologies					
& processes?					
Should relocation be an option?					

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### **Reopening Funding Plan**

At this point, it is crucial that you consider and answer the following questions about funding the reopening of your business: (Financing options will be covered in the next section)

Question	Yes	No	Action and/or Comments	By whom	By when
Afford to reopen your				***************************************	***************************************
business?					
Completed cash flow and					
profit and loss forecasts?					
Use 3 Month Cash Flow					
Worksheet.					
Used these forecasts to run					
"what if" scenarios to					
measure how your cash flows					
will be impacted by					
unexpected events?					
How do you intend to fund					
the reopening of your					
business: from existing					
business sources, your own					
resources, other investors,					
banks, lenders, or a mix?					
(See next section.)					
Forecasts and your financial					
statements show whether the					
business can afford to use					
internal or external sources of					
financing to fund the					
reopening?					
If no to above, can you adjust					
your recovery plan so that it is					
affordable?					
Cannot afford your recovery					
plan; stop to consider exiting					
the business again at this					
point.					
Review all existing debt-					
financing arrangements to					
ensure that the finance facility and structure fits the new					
needs of the business.					
Make sure you have all					
updated info on the amount of					
your insurance coverage.					

NOTES:		

## **Financing Sources**

If you need money to reopen and cover operating expenses for a time, answer the following:

Question	Yes	No	Action	By whom	By when
Even if you can fund the reopening of the business from existing sources, have you analyzed whether it is better to use external sources of finance?  a. SBA Disaster Loan b. State Loan options  Are there monies available from local charities/business					
organizations/non-profit organizations?  a. Make a list of potential sources.  Use Grants and Alternative Funding Sources List.  b. Gather application forms if required. c. Once you are certain you are going to reopen, fill out and submit applications.					
Have you spoken to your bank about your recovery plan and your funding needs?					
Can existing lines of credit be accessed (and increased if necessary) to fund the reopening of the business?					
What collateral do you have available to offer?					

Question	Yes	No	Action	By whom	By when
If you are seeking debt financing, determine:  a. What you will be using the money for?  Use Sources and Use Worksheet.  b. What length of the loan term?  c. Total of what you need					
Can you financing the reopening of your business from your own resources?					
Can you access money from other sources?  a. Family b. Friends c. Other investors					

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### **Reopening Steps**

This section helps you to determine steps in the reopening process such as staffing, location, etc. Make a to-do list using the action column. Assign tasks to others, if necessary. Be sure to include due dates for tasks.

Question	Yes	No	Action and/or Comments	By whom	By when
Employees:				WHOIH	WHEH
Staffing needs? Take a look at the jobs					
that existed before and make sure your					
needs are the same. What should change?					
a. Make a list of jobs that need to be					
filled.					
Use Jobs Needed to Re-open					
Worksheet.					
Re-hire key employees?					
a. Match with jobs list above.					
Need to hire new employees?					
a. Write job descriptions.					
b. Begin hiring process.					
Location:					
a. Reopen existing location?					
b. Move temporarily?					
c. Move permanently?					
Any changes in the status of the location					
due to the disaster from the local or					
federal government that should be considered?					
a. For example, if it was a flood are you now in a newly designated					
flood plain?					
What is the status of other business and					
their plans?					
a. Will you be the first to reopen?					
(Is the whole area is going to be					
perceived as closed. Is it time to					
reopen?)					
Use Local Business Assessment List.					
Are your needs being met by the current					
location?					
a. Is it big enough?					
b. Too big?					
c. Layout correct?					
d. If there were renovations on your					
wish list, is now the time to do					
them?					

Question	Yes	No	Action and/or Comments	By whom	By when
Major Equipment:					
Make an assessment. Use the Equipment Assessment List.					
Equipment in working order?					
Given the new conditions (or any changes you are considering) should you replace equipment?					
Insurance covering equipment replacement needs?					
Consider which is best for equipment:     a. Purchase (and how to finance)?     b. Lease?					
Expertise readily available to install the equipment?					
Wait time for equipment replacement?  a. How will this affect reopening?					
Any new equipment needs?					
Inventory:					
What needs to be replaced?					
Insurance coverage?					
Before reordering, check past sales data: <ul><li>a. What was selling?</li><li>b. What was not?</li></ul>					
Will the post-disaster market change your customer's needs?					
a. New items to order.					
Marketing:					
Before creating reopening plan, assess marketing efforts before the disaster for their effectiveness.					
a. Type					
b. Message					
c. Cost					
d. Working: yes/no					
Apply this assessment to new media plan.					
Reopening ad plan: a. Traditional media					
b. Social media					
c. Online media					
Use the Media List for Re-					
opening.					
Price/Budget for media plan.					
a. Add cost to above list.					

Question	Yes	No	Action and/or Comments	By whom	By when
Reopening event?					
a. Work with local chamber of					
b. Appropriate press releases.					
b. Appropriate press releases.					
What changes need to be made to the					
website to reflect the reopening plan?					
Are there any promotions being done in					
your local area by government or others					
that you can take advantage of?					
Pricing:					
Have you undertaken a break-even					
analysis to determine whether the prices					
you charge are making the profit you want to achieve?					
Do this product by product with your					
SBDC counselor or accountant.					
Compared your pricing to your					
competitors?					
Business Licenses:					
Are all licenses up to date?					
Do you have copies?					
Replace all copies that were destroyed.					
Same applies to all permits.					
Accounting & record keeping:					
H 11 - f 10					
Has all of your accounting been restored?					
Was it efficient and effective pre-					
disaster?					
Meet with CPA and bookkeeper to					
discuss any changes that should be made					
before reopening.  Are you backing up off site?					
a. If not, set up.					
•					
Make sure that you are recording all					
expenses (including any out-of-pocket)					
for any disaster repair and reopening expenses.					
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Question	Yes	No	Action and/or Comments	By whom	By when
Legal Obligations:				W 22 5 22 2	***************************************
Has your ability to file and pay such					
returns/forms/obligations been delayed?					
Have your reconstructed financial					
records given you the necessary					
information and evidence to be able to					
complete such returns?					
Insurances:					
Review your insurance coverage to see					
whether it is adequate and whether there					
are any gaps in your coverage.					
Do a new assessment with your agent.					
Do you need any special (e.g., flood)					
insurance now?					
a. Cost?					
Thank-you:					
Keep track of everyone who has helped					
you.					
Use Thank You list.					
When there is time, send thank you notes.					

NOTES:		

#### **Conclusion**

You made it! Congratulations.

Whether you have moved on to a new chapter in your career, or you've decided to reopen your business, we wish you well.

If you have decided to reopen your existing business or you are going to open a new business in the future, remember that the Missouri SBDC offers one-on-one, confidential, no-cost business advising. It's easy to schedule an appointment on our website, MissouriSBDC.org, by clicking the "Request for Counseling" button. Our mission is to have a continuous relationship with you throughout all your business endeavors. We are here to help!

We strongly suggest that you keep this workbook and all materials related to your disaster recovery process. In working with previous disaster recovery clients, we have referred to their recovery plan materials many times as the basis for new opportunities.

When you've reopened or established a new venture, it is important to create a disaster prevention plan right away. Missouri SBDC has other materials on disaster prevention located on MissouriSBDC.org, or by contacting your counselor.

Best wishes and good luck.

-Missouri SBDC

## **WORKSHEET SECTION**

# **Quick Cash Loss Calculation**

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Typical Daily Sales/Revenues	X	# of Days Closed	X	Total Estimated Revenue Lost
	X		=	

#### OR

#### Monthly:

Monthly Sales Revenue	X	# of Days Closed	X	Total Estimated Revenue Lost
	x		=	

NOTES:			

#### FAMILY/PERSONAL BUDGET

Expense	Monthly Amount
Auto Fuel	\$
Auto Insurance	\$
Auto Payment	\$
Auto Repair & Maintenance (tires, oil changes, etc.)	\$
Cable TV	\$
Charity	\$
Child Care	\$
Clothing	\$
Credit Card Payments	\$
Dues & Subscriptions	\$
Electricity	\$
Entertainment	\$
Gifts	\$
Groceries	\$
Health Insurance	\$
Heat (gas, oil, etc.)	\$
Home Repair	\$
Household Expenses	\$
Internet	\$
Laundry & Dry Cleaning	\$
Life Insurance	\$
Medical & Dental	\$
Miscellaneous	\$
Mortgage Payment	\$
Personal Care (hair, etc.)	\$
Property Taxes	\$
Other Debt	\$
Rent	\$
Retirement	\$
Savings	\$
School Expenses	\$
Telephone & Cell	\$
Tuition	\$
Vacations	\$
Vet/Pet	\$
Water & Sewer	\$
Other:	\$
Other:	\$
Total	\$
Subtract: Other Family Members' Contributions	\$
Your Needed Contribution	\$

## **Key Stakeholders**

N7	In the state of th
Name:	Relationship:
Control H.	
Contact #:	email:
Contacted: Yes No	
Actions/Notes:	
Name:	Relationship:
Contact #:	email:
Contacted: Yes No	
Actions/Notes:	
Name:	Relationship:
Contact #:	email:
Contacted: Yes No	L
Actions/Notes:	
Name:	Relationship:
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Contact #:	email:
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## **Key Stakeholders**

	_
Name:	Relationship:
Contact #:	email:
Contacted: Yes No	
Actions/Notes:	
Name:	Relationship:
Contact #:	email:
Contacted: Yes No	
Actions/Notes:	
Name:	Relationship:
Contact #:	email:
Contacted: Yes No	
Actions/Notes:	
Name:	Relationship:
Contact #:	email:
Contacted: Yes No	Cinaii.
Actions/Notes:	

### **Aged Accounts Payable**

#### **Amount Due**

Vendor	0-30	31-60	61-90	90+	Total
CUDTOTAL (nogo 1)					
SUBTOTAL (page 1)					

### **Aged Accounts Payable**

#### **Amount Due**

Vendor	0-30	31-60	61-90	90+	Total
SUBTOTAL (page 1)					

## **Employee Action List**

Name:						
Job Title/Fu						
Contact #:	———			email:		
	Lay Off:	Plan to Rehire: Referred to Unemployment: to DUA:				
Keep: Actions/Not	*	- rian to Kenne.	- Keit	erred to Onemployment.	io DUA.	
Actions/No	ies:					
Name:						
Job Title/Fu	nction:					
Contact #:				email:		
Keep:	Lay Off:	Plan to Rehire:	Refe	erred to Unemployment:	to DUA:	
Actions/Not	•					
110010115/1 (0)						
Name:						
Job Title/Fu	inction:					
Contact #:				email:		
Keep:	Lay Off:	Plan to Rehire:	Refe	erred to Unemployment:	to DUA:	
Actions/Not	tes:					
Name:						
Job Title/Fu	inction:					
Contact #:				email:		
Keep:	Lay Off:	Plan to Rehire:	Refe	erred to Unemployment:	to DUA:	
Actions/Not	tes:					
Name:						
Job Title/Fu	ınction:					
Contact #:				email:		
Keep:	Lay Off:	Plan to Rehire:	Refe	erred to Unemployment:	to DUA:	
Actions/Not	tes:					

## **Employee Action List**

Name:							
Job Title/Fu	inction:						
Contact #:				email:			
Keep:	Lay Off:	Plan to Rehire:	Plan to Rehire: Referred to Unemployment: to DUA:				
Actions/No	tes:						
Name:							
Job Title/Fu	ınction:			Τ			
Contact #:				email:			
Keep:	Lay Off:	Plan to Rehire:	Ref	erred to Unemployment:	to DUA:		
Actions/No	tes:						
		_					
Name:							
Job Title/Fu							
	inction:			'1			
Contact #:	1 0.00	D1 / D 1	D (	email:	, DIII		
Keep:	Lay Off:	Plan to Rehire: Referred to Unemployment: to DUA:			to DUA:		
Actions/No	tes:						
Name:							
Job Title/Fu							
Contact #:	metion.			email:			
Keep:	Lay Off:	Plan to Rehire:	Dof	erred to Unemployment:	to DUA:		
Actions/No	<u> </u>	Tian to Renne.	Kei	erred to Onemployment.	to DUA.		
Actions/No	ies.						
Name:		_					
Job Title/Fu	inction:						
Contact #:				email:			
Keep:	Lay Off:	Plan to Rehire:	Ref	Terred to Unemployment:	to DUA:		
Actions/No		Train to Remire.	101	erred to enemproyment.	to Berr.		
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## **Vendor Orders to Cancel**

Vendor:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
Vendor:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
Vendor:	
Description of Order:	T
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
Txx 4	
Vendor:	
Description of Order:	T
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
T 1	
Vendor:	
Description of Order:	T
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	

#### **Vendor Orders to Cancel**

Vendor:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
X7 1	
Vendor:	
Description of Order:	T ::
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
Vendor:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
Vendor:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
Vendor:	
Description of Order:	
	omeil:
Contact #: Canceled: Yes No	email:
Actions/Notes:	
Actions/Notes:	

# **Custom and/or Standing Customer Orders to Cancel**

Customer:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
Customer:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
Customer:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
Customer:	
Description of Order:	- I
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
Customan	
Customer:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	

# **Custom and/or Standing Customer Orders to Cancel**

Customer:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	-
Actions/Notes:	
Customer:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
Customer:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
Customer:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	
Customer:	
Description of Order:	
Contact #:	email:
Canceled: Yes No	
Actions/Notes:	

#### Reconstructing Your Financial Records (This material is adapted from IRS.gov.)

#### **Business Records**

- Inventories Get copies of invoices from suppliers. Whenever possible, the invoices should date back at least one calendar year.
- Income Get copies of bank statements. The deposits should closely reflect what the sales were for any given time period.
  - Obtain copies of last year's federal, state, and local tax returns including sales tax reports, payroll tax returns and business licenses (from city or county). These will reflect gross sales for a given time period.
- Furniture and fixtures Sketch an outline of the inside and outside of the business location. Then start to fill in the details of the sketches. (Inside the building What equipment was where? If a store, where were the products/inventory located? Outside the building shrubs, parking, signs, awnings, etc.)
- Building If you purchased an existing business, go back to the broker for a copy of the purchase agreement. This should detail what was acquired.
  - o If the building was constructed for you, contact the contractor for building plans or the county/city planning commissions for copies of any plans.
- Tax records Immediately after the casualty, file Form 4506, Request for Copy of Tax Return, to request copies of
  the previous four years of income tax returns. To obtain copies of the previous four years of transcripts you may file
  a Form 4506-T, Request for Transcripts of a Tax Return. Write the appropriate disaster designation (such as
  "HURRICANE KATRINA") in red letters across the top of the forms to expedite processing and to waive the
  normal user fee.
- Insurance Policy Most policies list the value of the building to establish a base figure for replacement-value insurance.
  - o If you are unsure how to reach your insurance company, check with your state insurance department. <a href="http://www.naic.org/state">http://www.naic.org/state</a> web map.htm
- Vehicles Kelley's Blue Book, NADA and Edmunds are available on line and at most libraries. They are good sources for the current fair market value of most vehicles on the road.
  - o Call the dealer and ask for a copy of the contract. If not available, give the dealer all the facts and details and ask for a comparable price figure.
  - o If you're still making payments, check with your lien holder.

#### For assistance and additional information, use these resources:

- IRS Disaster Assistance Hotline at 1-866-562-5227 (Monday through Friday, from 7 a.m. to 10 p.m. local time)
- IRS Publication 2194, Disaster Resource Guide for Individuals and Businesses
- IRS Publication 584, Casualty, Disaster, and Theft Loss Workbook This can help individuals make a list of stolen or damaged personal-use property and figure the loss. It has a room-by-room listing to help recreate an inventory and figure the loss on one's home and its contents and one's motor vehicles.
- IRS Publication 584-B, Business Casualty, Disaster, and Theft Loss Workbook This is available to help businesses list stolen or damaged business or income-producing property and to figure the loss.
- Your tax professional

# **Aged Sales Forecast and Accounts Receivable Chart**

Sales	0-30	31-60	61-90	90+	Total
Total Sales					

Accounts Receivable	0-30	31-60	61-90	90+	Total
SubTotal Accounts Receivable					

# **Aged Sales Forecast and Accounts Receivable Chart**

Accounts Receivable	0-30	31-60	61-90	90+	Total
SubTotal Accounts  Page ivable (page 2)					
Receivable (page 2)					
SubTotal Accounts Receivable (page 1)					
SubTotal Sales					
TOTAL SALES & AR					

## **Recovery Goals Worksheet**

Business Goal	To Do	By When	By Whom
e.g., re-evaluate product lines	create sales by product list	XX/XX	Sales Manager
			7*1017001951

## **Recovery Goals Worksheet**

Business Goal	To Do	By When	By Whom
e.g., re-evaluate product línes	create sales by product list	xx/xx	Sales Manager

## **Recovery Plan Worksheet**

Business Activity	Recovery Action	To Do	By When	By Whom
			,	
e.g., close for 1 month	temp layoff	notífy employees	xx/xx	me

## **Recovery Plan Worksheet**

Business Activity	Recovery Action	To Do	By When	By Whom		
e.g., close for 1 month	temp layoff	notify employees	xx/xx	me		

## **Cost Estimations for Reopening**

Expense	\$ Explanation
Cleanup	All costs related to cleanup (make separate list if necessary)
Advertising	Promotion for reopening the business
Inventory Replacement	The amount of inventory needed to be replaced
Building Construction	The amount per contractor bid and other
Furniture and Fixtures	Use actual bid on all F & F
Equipment	Use actual bid on all equipment
Installing Fixtures and Equipment	Use actual bids and other
Lease/Rent Payment	Amount to be paid before reopening in new location
Licenses and Permits	Check with city or state offices
Miscellaneous	All other
Professional Fees	Include CPA, attorney, engineer, etc.
Remodeling/Decorating	The amount per contractor bid and other
Services	Cleaning, etc.
Signs	The amount per contractor bid and other
Supplies	Office, cleaning, etc. supplies
Unanticipated Expenses	Include an amount for the unexpected
Other	
Other	
Other	
TOTAL START-UP DOLLARS	Total amount of costs before reopening

## **Quick 3 Month Cash Flow**

Quick Cash Needs Assessment - 90 days

	Month 1	Month 2	Month 3	TOTAL
Total Income				
Total Cost of Goods Sold (COGS)				
Gross Profit				
Expense				
Advertising & Marketing Credit Card Processing Fees				
Dues and Subscriptions				
Liability Insurance				
Loan # 1				
Loan # 2 (Bank)				
Loan # 3				
Office Expenses				
Payroll				
Payroll Taxes				
Owners Draw				
Accounting				
Legal Fees				
Rent				
Repairs and Maintenance				
Taxes				
Telephone				
Utilities				
Total Expense				
Profit/Loss				
Cash on Hand				
P/L Month #1				
P/L Month #1				
P/L Month #1				
Total Cash Flow Projected				

## **Grants and Alternative Funding Sources List**

3.7		
Name of Source:		
Contact #:		email:
Address:		
Applied Required?: Yes	No	Completed & Sent:
Application Requirements/No	tes:	
Received \$	Date:	
Name of Source:		T
Contact #:		email:
Address:		
11 12 1 10 11	3.7	
Applied Required?: Yes	No	Completed & Sent:
Application Requirements/No	tes:	
D	Data	
Received \$	Date:	
Name of Source:		
Contact #:		email:
Address:		eman.
Address:		
Applied Degrined 2. Veg	No	Completed & Cont.
Applied Required?: Yes		Completed & Sent:
Application Requirements/No	ites:	
Received \$	Date:	
Received \$	Date.	
Name of Source:		
Contact #:		email:
Address:		· · · · · · · · · · · · · · · · · · ·
rudiess.		
Applied Required?: Yes	No	Completed & Sent:
Application Requirements/No		
1 -pp. 100 110 110 110 110 110 110 110 110 11		
Received \$	Date:	

## **Grants and Alternative Funding Sources List**

Name of Source:		
Contact #:		email:
Address:		
Applied Required?: Yes	No	Completed & Sent:
Application Requirements/No	otes:	
Received \$	Date:	
ποσείνου ψ	Dutc.	
Name of Source:		
Contact #:		email:
Address:		
Applied Required?: Yes	No	Completed & Sent:
Application Requirements/No	otes:	
Received \$	Date:	
ποσείνου ψ	Bute.	
Name of Source:		
Contact #:		email:
Address:		•
Applied Required?: Yes	No	Completed & Sent:
Application Requirements/No	otes:	
Received \$	Date:	
Τισσείνου ψ		
Name of Source:		
Contact #:		email:
Address:		
Applied Required?: Yes	No	Completed & Sent:
Application Requirements/No	otes:	
Received \$	Date:	

## **Sources and Use Worksheet**

Sources of Financing	\$
Investment of Cash by Owner #1	
Investment of Cash by Owner #2	
Bank Loans to Business (short-term)	
Bank Loans to Business (long-term)	
Bank Loans (personal)	
SBA Disaster Loan	
Grant #1	
Grant #2	
Grant #3	
Donations	
Other	
Other	
Total Sources of Financing	

Uses of Financing	\$
Land	
Buildings	
Equipment	
Remodeling	
Inventory	
Cleanup	
Working Capital	
Other	
Total Uses of Financing	

## Jobs Needed to Reopen Worksheet

Job Title/Description	Current Employee	Returning Employee	New Employee	# of hours	Salary/Hourly Wage	Confirmed

## Jobs Needed to Reopen Worksheet

Job Title/Description	Current Employee	Returning Employee	New Employee	# of hours	Salary/Hourly Wage	Confirmed
1110/2001/2001	e unioni zmprojec	The state of the s		#		

#### **Local Business Assessment**

Business	Open	Closed	Date Reopening

#### **Local Business Assessment**

Business	Open	Closed	<b>Date Reopening</b>

## **Equipment Assessment List**

Equipment Name	Working	Destroyed	Needs Repair	Necessary to Reopen	Repair	Cost \$	Insurance Coverage Y/N	Date Available for Use	Replace	Cost \$	Insurance Coverage Y/N	Buy	Lease	Date Available for Use

## **Equipment Assessment List**

Equipment Name				ben			age Y/N	or Use			age Y/N			or Use
	Working	Destroyed	Needs Repair	Necessary to Reopen	Repair	Cost \$	Insurance Coverage Y/N	Date Available for Use	Replace	Cost \$	Insurance Coverage Y/N	Buy	Lease	Date Available for Use
		I	I	Z	F		I	I	F		I	I	I	I
														_

## **Media List for Reopening**

Type of Media/Placement/Location										
	/ritten	igned	r ent	_						ost
	Copy Written	Ad Designed	Cost per Placement	Date # 1	Date #2	Date #3	Date #4	Date #5	Date #6	Total Cost
e.g., Facebook Posting: Reopening soon			0	XX/X X	XX/X X	XX/X X	xx/x x	XX/X X	XX/X X	0
e.g., Newspaper Ad: Daily Times	Х	Х	\$250	xx/x x		xx/x x		xx/x x		\$750
Tatal Cont										
Total Cost										

## **Media List for Reopening**

Type of Media/Placement/Location										
	/ritten	igned	r ent	1						ost
	Copy Written	Ad Designed	Cost per Placement	Date # 1	Date #2	Date #3	Date #4	Date #5	Date #6	Total Cost
e.g., Facebook Posting: Reopening soon			0	XX/X X	XX/X X	xx/x x	XX/X X	xx/x x	xx/x x	0
e.g., Newspaper Ad: Daily Times	Х	Х	\$250	xx/x x		xx/x x		xx/x x		\$750
T. d. 1.G. d										
Total Cost										

## Thank You List

	Reason to Thank	Type of Thank You	By Whom	Done
Name				
Street Address				
City/State/Zip				
email				
Name				
Street Address				
City/State/Zip				
email				
			l .	
Name				
Street Address				
City/State/Zip				
email				
Name				
Street Address				
City/State/Zip				
email				
			1	T
Name				
Street Address				
City/State/Zip				
email				
			<u> </u>	T
Name				
Street Address				
City/State/Zip				
email				

## Thank You List

	Reason to Thank	Type of Thank You	By Whom	Done
Name				
Street Address				
City/State/Zip				
email				
Name				
Street Address				
City/State/Zip				
email				
Name				
Street Address				
City/State/Zip				
email				
Name				
Street Address				
City/State/Zip				
email				
Name				
Street Address				
City/State/Zip				
email				
	I			
Name				
Street Address				
City/State/Zip				
email				