



2009 GENERAL DATA FORM

Company/Organization Name: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

Years in Operation: _____

Number of employees/Volunteers: _____

Owner/President Name _____

Give a brief description of your business, organization, or company.

What is the mission of your firm/organization?

THE INFORMATION ON THIS ENTRY FORM WAS COMPILED BY:

Name _____

Title _____

Signature _____ Date _____

ATTACH A COPY OF THIS FORM TO THE BACK OF EACH CATEGORY ENTERED!

Return by August 14, 2009:

Aberdeen Area Chamber of Commerce
P.O. Box 1179
Aberdeen, SD 57402-1179

The 2009 ABBY Awards Program is brought to you by the Aberdeen Area Chamber of Commerce, the Aberdeen Development Corporation, and Absolutely! Aberdeen.