

**Bay County Chamber of Commerce  
Small Business of the Month Award**

The purpose is to recognize and promote small businesses for their successful growth, stability, and community involvement.

Winners are recognized at the Chamber's First Friday meeting where a plaque is presented, recognition in the Bay Biz with an article and photo and will also be eligible for Small Business of the Year.

In order to be considered for the award, the Company must be a business with fewer than 35 employees, in business for a minimum of two years, and a member in good standing of the Bay County Chamber of Commerce for at least two years.

Please provide the information requested below:

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Web-Site Address: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Number of Employees: \_\_\_\_\_ Number of Years in Business in Bay County? \_\_\_\_\_

In what industry is your business? \_\_\_\_\_

What are your company's core values, goals and overall mission? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What are your principal products and/or services? \_\_\_\_\_

\_\_\_\_\_

Please give a brief history of your business (e.g. how it started, major changes, developments).

\_\_\_\_\_

\_\_\_\_\_

What was your company's **percentage** of increase in annual sales in 2008 and 2009?

2008: \_\_\_\_\_ 2009: \_\_\_\_\_

Describe how your business gives back to the community. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What are some of the greatest obstacles or challenges that your business has faced?

\_\_\_\_\_

\_\_\_\_\_

How have you overcome them? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please return your completed application to:  
Bay County Chamber of Commerce  
Elizabeth Smith  
PO Box 1850  
Panama City, FL 32402  
Phone: 850.215.3761 Fax: 850.763.6229