**  
2025 COMMUNITY AWARDS NOMINATION FORM FOR**

**CHAMBER CUP AWARD**

For a business that has made significant contributions to the Chandler Chamber community

Note that a recipient cannot have received an award in the past 3 years.

*The Selection Committee reserves the right to consider any nominee in another category.*

#### *Please print*

**Name of Nominee:**

**Address:**

**City/State/Zip:**

**Tel. Number:**

\*Please include reasons why you are nominating this business or individual. List significant milestones, community and civic activities, degree of nominee participation, functions fulfilled, innovations, etc.

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 All nominations must include a letter of recommendation for the nomination to be considered.

*Nominated By: Please print - name and business name (if affiliated with a business)*

**Address /City/Zip:**

**Phone: E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**