The Alabama League of Municipalities offers mailing lists on pressure sensitive labels or in an electronic format. These may be ordered by printing a copy of the following form, completing it and returning it by mail to the League with a check for proper payment or faxed to the number below if paying by credit card. There will be a $50.00 processing fee per order plus a charge as indicated below for each portion of the mailing list desired. The numbers in parenthesis indicate the number of names and addresses on the list.

Please complete the order form, include check or credit card information as payment, attach a sample mailing and mail or fax to the address on page 2 of this form. Labels will not be provided without payment and a sample mailing.

Lists Available (Check all the lists you would like to order)

- Municipal Attorneys (287) $30.00
- Councilmember (2264) $225.00
- Municipal Judges (207) $25.00
- Municipal Clerks (450) $50.00
- Mayors (441) $50.00
- All of the Above (3649) $360.00

Sort Orders Available (Select one choice for sort order)

- Alphabetical by Last Name
- Alphabetical by City or Town
- Zip Code

Formats Available (Select one format in which to receive the requested information)

- Pressure Sensitive Labels
- Electronic Format ($100.00 additional charge)

Billing Information

Date ___________________ Municipality/Company _______________________________________________________
Name ________________________________________________________________ Title __________________________
Daytime Phone # ____________________________________ Email Address ___________________________________
Mailing Address _________________________________________ City, State ____________________ Zip __________

Shipping Information

Mail Labels to: ☐ Same as above (Billing Information)
Municipality/Company ________________________________________________________________
Name __________________________________________ Title _______________________ Department ________________
Daytime Phone # ____________________________________ Email Address ___________________________________
Mailing Address _________________________________________ City, State ____________________ Zip __________
Alabama League of Municipalities Mailing List
ORDER FORM (continued)

Payment Information

Please remit proper payment with your order:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Processing Fee</td>
<td>$50.00</td>
</tr>
<tr>
<td>Electronic Format Fee</td>
<td>$100.00 (if applicable)</td>
</tr>
<tr>
<td>Costs of Labels Ordered</td>
<td>$__________</td>
</tr>
<tr>
<td>Postage &amp; Handling (If mailed*)</td>
<td>$5.00 (Fee waived if picked up at League Office)</td>
</tr>
<tr>
<td>Rush Service</td>
<td>$25.00</td>
</tr>
</tbody>
</table>

**TOTAL AMOUNT** $__________

Payment Options

Payment by Check: Please complete the order form, include check and a sample mailing, and mail to the following address:
Alabama League of Municipalities
ATTN: Mailing List Order
P.O. Box 1270
Montgomery, AL 36102

Payment by Credit Card: Please complete the order form, include credit card info below and fax to 334-386-5180.

Credit Card Information:

<table>
<thead>
<tr>
<th>Credit Card</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Visa</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Master Card</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AMEX</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Account Number ____________________________________________________________
Expiration Date ___________________________ CVV (3 or 4 digits on back of credit card) _________
Cardholder Name (Print) _______________________________________________________
Signature _________________________________________________________________

Amount Paid $ (total from Payment Information above) ____________________________

If you have any questions, please contact Krystle Bell at 334-262-2566 or krystleb@alalm.org.

NOTE: E-mail submission of this form with credit card information will not be accepted. Print and fax to 334-386-5180 or mail via USPS.

ALM USE ONLY: Date: ______________ Check # ______________ Order # ______________