GFOA membership currently numbers more than **18,000** public finance professionals from all levels of government and the private sector. *Labels including member names and addresses are available on a restricted basis at the rate of $250 per thousand names, with a $500 minimum order.* Orders are not available in electronic format unless submitted directly to a mail house. Labels are provided only in 3-up pressure-sensitive peel-and-stick labels which measure 3-1/2” x 15/16”. Phone numbers, fax numbers, or e-mail addresses are not available for purchase. The GFOA’s policies and procedures regarding such purchase(s) are as follows:

- Mailing label requests must be made in writing using the appropriate form, and should include a **sample of the proposed mailing piece**.

- The use of the membership mailing list is limited to the purpose indicated on the written request for **one-time use only**. There are no multi-use discounts.

- Reproduction of labels is expressly prohibited. Allow **1 – 2 weeks** from the GFOA’s **receipt of pre-payment** for the shipment of labels.

- A GFOA staff member will contact you with the status of your request and if approved, the total number of mailing labels included in your order. At that time, you also will be informed of the total amount due on your order.

- Mailing label orders **must be pre-paid before shipment**. Payment may be made via check, AMEX, Discover, MasterCard, or Visa. A **faxed copy of a check will not be accepted as pre-payment**.

- Shipping: Labels are shipped UPS Ground.

For additional information, please contact GFOA toll free at 1-800-829-GFOA (4362).

**Kara Petrancosta**, Administrative Associate  
kpetrancosta@gfoa.org  
or at (312) 977-9700, ext. 4415

**Dan Zielinski**, Senior Manager  
dzielinski@gfoa.org  
or at (312) 977-9700, ext. 4410

Annual Conference pre-show mailing labels will be available after February 17, 2015.
LABEL SORT: Labels can be sorted by member type and/or by state/province. Membership is divided into two main categories:

1. Active Members – practicing public finance professionals from a government unit (approximately 16,000)
   a. City Government (approximately 7,000)
   b. County Government (approximately 3,000)
   c. State Government (approximately 500)
   d. Retirement System (approximately 500)
   e. Special District (approximately 4,000)

2. Associate Members – interested in public finance, but not employed in the public sector (approximately 2,000)

Member type:
- Full-time membership list (Active and Associate) OR
- All Active OR
  - City
  - County
  - State
  - Retirement
  - Special District
- OR
  - All Associate

Geographic region:
- U.S. and Canada
- U.S. only
- Canada only (approximately 400)
- Specific states/provinces as listed:

_____________________________________________________________________________________________________
_____________________________________________________________________________________________________

The undersigned understands and complies that labels are for one-time use and will be used only for stated intent. Any copying or duplication of the list will be considered an infraction of the sales agreement.

Authorized Signature: ___________________________  Company / Agency: ___________________________  Date: ___________________________

SHIP TO:
Name: ___________________________________________  Title: ___________________________________________
Company: ____________________________________________________________________________________
Telephone (Mandatory): ___________________________  Fax: ___________________________  E-mail: ___________________________
Address: ______________________________________________________________________________________
City/State/Zip: __________________________________________________________________________________

Date needed by (allow 1 – 2 weeks after receipt of payment for processing): _______________________________________

Method of payment: (All orders must be prepaid – please check all that apply.)
Fees must be paid in U.S. dollars by check, or credit card. Please do not submit duplicate copies.
- Payment by check: Payable to "Government Finance Officers Association" – mail to: GFOA, 3076 Eagle Way, Chicago, IL 60678-1030
- Payment by credit card, fax: (312) 977-4806 – send to: GFOA, 203 North LaSalle Street, Suite 2700, Chicago, IL 60601-1210
  - Amex
  - Discover
  - MasterCard
  - VISA

Name on Card: ___________________________________________  Expiration Date (Mandatory): ________ / ________

Signature (Mandatory): ___________________________________________