Membership Mailing Labels Policies and Procedures

GFOA membership currently numbers more than **18,300** 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).

Kate Southard, Administrative Associate  
ksouthard@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 January 28, 2016.
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
   - Full Associate

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

The undersigned understands and comoplies 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, 203 North LaSalle Street, Chicago, IL 60601-1210
- Payment by credit card: fax (312) 977-4806, scan and e-mail conference.gfoa.org, or 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): ___________________________________________