

Mailing List Information

Sales Rep _____ Company _____
 Job # _____ Contact _____
 Date _____ Phone # _____ Alt # _____
 Need By _____ Fax # _____
 Mail Date _____ Email _____
 Purpose of Mailing/Advertising _____

Requested Quantity: #1 _____ #2 _____ #3 _____

Geography

(Run count by zip codes, zip + carrier rt. or by radius. Only fill out 1 of 3 SECTIONS)

Zip Codes/City SECTION 1

Zip & Carrier Route SECTION 2

Zip	Carrier Route
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Radius SECTION 3

Step One: Select Miles or Quantity **Step Two:** Select one of the 4 options below *Option:* Do not cross state lines

Option 1:	Option 2:	Option 3:	Option 4:
<input type="checkbox"/> Zip	<input type="checkbox"/> Zip + Carrier Route	<input type="checkbox"/> Zip + 4	<input type="checkbox"/> Latitude/Longitude
Zip Code _____	Zip Code _____	Zip Code _____	Lat _____
Miles/Qty. _____	Carrier Rt. _____	Address _____	Long _____
	Or Address _____	City _____ St. _____ Zip _____	Address _____
	City _____ St. _____ Zip _____	Miles/Qty. _____	City _____ St. _____ Zip _____
	Miles/Qty. _____		Miles/Qty. _____

Consumer List Demographics (Only select required criteria.)

Age (2 yr. increments): Range _____ (eg. 18-21, 22-23, 24-25, etc.)	Income: <input type="checkbox"/> under 15k <input type="checkbox"/> 40k-50k <input type="checkbox"/> 70k-80k <input type="checkbox"/> 100k-125k <input type="checkbox"/> 15k-20k <input type="checkbox"/> 50k-60k <input type="checkbox"/> 80k-90k <input type="checkbox"/> 125k-150k <input type="checkbox"/> 20k-30k <input type="checkbox"/> 60k-70k <input type="checkbox"/> 90k-100k <input type="checkbox"/> 150k+ <input type="checkbox"/> 30k-40k
	Select: <input type="checkbox"/> Home Owner/Renter <input type="checkbox"/> Home Owner <input type="checkbox"/> Renter
Home Value (\$25K increments): Range _____ (eg. 25k-50k, 50k-74k, etc.)	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married
Address Type: <input type="checkbox"/> Single Family <input type="checkbox"/> Apt. with Unit # <input type="checkbox"/> Rural Route <input type="checkbox"/> Apt. without Unit # <input type="checkbox"/> P.O. Box	HH w/Child: <input type="checkbox"/> Present <input type="checkbox"/> None
	HH w/Senior: <input type="checkbox"/> Present
	Length of Residence: _____ (Increase by 1 year until 14. Then 14+)

TURN OVER TO FILL OUT "LIST PROVISION" SECTION

Additional Information/Requests: _____

