



Penalty Mail Printed Stamped Envelope Order

(Complete, make a photocopy, and distribute as indicated below.)

Enter your agency's three-digit code. Enter a cost code if your agency requires you to do so. Contact your agency's mail manager to obtain these codes.

1. Agency Code			2. Agency Cost Code			

Enter the date of order and ZIP + 4®.
NOTE: The ZIP + 4 must be identical to the ZIP + 4 printed in the return address.

3. Date of Order						4. Return ZIP + 4					
Month		Date		Year							

5. Ordering Information

Name	Agency/Department Name
Title	Street Address
Signature	City, State, and ZIP + 4
	Telephone No. (Include area code)

6. Order

<p>NOTE: Envelopes are available ONLY in boxes of 500.</p> <p>Multiply the prices in Column f by the quantities in Column "e" and enter the results in Column g.</p> <p>Add the amounts in column g to obtain the total of your order.</p>	a.	b.	c.	d.	e.	f.		g.
	Style	Size No.	Denom-ination	Item No.	No. of Boxes	Price per Box of 500		Cost
	Regular	10	\$.42	213290		X	\$235.00	= \$
								= \$
								= \$
	Shipping and Handling Charges (\$8.60 for one box, \$12.60 for two or more boxes)							=
Total								\$

7. Printing Information

TYPE or PRINT the return address EXACTLY as you want it to appear on the envelope. Include ZIP + 4.

- NOTE:**
- (1) The return address must not exceed seven lines;
 - (2) No line can exceed 47 characters in length (including spaces);
 - (3) You may attach a sample or facsimile address.

8. Shipping Address

Complete this section ONLY if envelopes are to be shipped to an address other than that listed in Item 7.

The shipping address must not exceed four lines.

NOTE: Keep Copy 2, Customer Copy, as your record of order. Send Copy 1 to:

STAMP FULFILLMENT SERVICES
UNITED STATES POSTAL SERVICE
PO BOX 219178
KANSAS CITY MO 64121-9178