



# Address Information System (AIS) Viewer Order Form

## Customer Information *(Please print)*

Customer Name \_\_\_\_\_

Company Name \_\_\_\_\_

Street Address, P.O. Box, Rural/Hwy Contract, or Route Number \_\_\_\_\_ Apt/Suite \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP + 4\* \_\_\_\_\_

Telephone Number (include area code) \_\_\_\_\_ Email Address \_\_\_\_\_

## Ordering Instructions

Products available for purchase are the City/State/Delivery Type, County Name Retrieval, Delivery Statistics Retrieval, and ZIP + 4 Retrieval. The Address Lookup function is free with the purchase of at least one of the four other products. The Address Lookup function is not available for individual sale.

1. Select the operating system the product will be installed on.

- Windows 2000   
  Windows NT   
  Windows XP   
  Other: \_\_\_\_\_

2. Enter the quantity of each product. Multiply the quantity and the cost then enter the results in the purchase amount.

Product Description	Product ID	Quantity		Cost	=	Purchase Amount
City/State Delivery Type	ACS215R	<input type="text"/>	X	\$ 50.00	=	<input type="text"/>
County Name Retrieval	ACN215R	<input type="text"/>	X	\$ 50.00	=	<input type="text"/>
Delivery Statistic Retrieval*	ADS215R	<input type="text"/>	X	\$ 75.00	=	<input type="text"/>
ZIP + 4 Retrieval*	AZ4215R	<input type="text"/>	X	\$ 50.00	=	<input type="text"/>

Address Lookup Free with the purchase of at least one of the other four products.

\* Cost reflects an annual subscription with monthly updates.

### Available on DVD media only.

3. Add purchase amounts and enter the total amount due

\_\_\_\_\_ → **Total Amount Due**

## Payment Options

Indicate the method of payment and mail this completed form and payment to the address below. Please allow 10 business days for processing and delivery. Customers needing assistance may contact the Customer Care Department at 800-238-3150. Prices subject to change without prior notice. Returned checks will incur a \$25.00 fee.

<p style="text-align: center;">Payment Method</p> <p style="text-align: center;">Make check or money order payable to "United States Postal Service"</p> <p> <input type="checkbox"/> Check            <input type="checkbox"/> Money Order            <input type="checkbox"/> Visa            <input type="checkbox"/> MasterCard  <input type="checkbox"/> Discover            <input type="checkbox"/> Diners Club            <input type="checkbox"/> American Express       </p> <p>Card # <input style="width: 100px;" type="text"/></p> <p>Card expiration date: _____ / _____ (MM/YY)</p> <p>Authorized Personnel (please print) _____</p> <p>Signature _____</p> <p>The signature above indicates that signee accepts total responsibility governing the use of this card and agrees to comply with the terms of the issuer.</p>	<p>Mail order form and payment to:</p> <p>           ACCOUNTS RECEIVABLE—AIS PRODUCTS            NATIONAL CUSTOMER SUPPORT CENTER            UNITED STATES POSTAL SERVICE            6060 PRIMACY PKWY STE 201            MEMPHIS TN 38188-0001            FAX: 901-681-4409         </p> <hr/> <p style="text-align: center;">USPS Use Only</p>
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