

Postal Bulletin Subscription Order Form

| A. Customer Information | on | | | | | | | (Please print or type) | |
|--|-----------------|--------------|----------|---------------------|--|------------------------------|--------------|---------------------------------------|--|
| Please specify if this is a: | | | | Is th | Is this a gift subscription to the Postal Bulletin? | | | | |
| ☐ New Order or ☐ C | hange of Addre | ess | | | | | | | |
| Name | | | | Nam | Name of gift recipient | | | | |
| Mailing address (Number, street, suite number) | | | | Mail | Mailing address of gift recipient (Number, street, suite number) | | | | |
| | | | | | | | | | |
| City | | | | City | City | | | | |
| State | ZIP+4® | | | State | State | | | ZIP+4 | |
| aytime telephone number E-mail address | | | | | | | | | |
| B. Subscription Inform | ation | | | | | | | | |
| Annual Subscriptions (26 issues/year plus special issues): | | | | s): | | Quantity | | Amount Due | |
| \$163.00 Domestic annual Postal Bulletin subscription | | | | | | | | \$ | |
| \$228.00 International annual Postal Bulletin subscription | | | | | | | | \$ | |
| | | | | | | | TOTAL AMO | UNT DUE \$ | |
| C. Order Form Process | ing | | | | | | | | |
| Please enclose a check send to: | or money or | der payable | e to the | United States | s Post | al Service [®] to c | cover the ar | mount of your order and | |
| Stomp | Eulfillmont C | omicoo | | | | | | | |
| Stamp Fulfillment Services United States Postal Service | | | | | | | | | |
| PO Box 7247 | | | | | | | | | |
| Philadelphia, PA 19101-7101 | | | | | | | | | |
| For your convenience, w telephone your credit ca | | | | | | | | ove. If you prefer, you may 545-1212. | |
| Please indicate the card | that you wa | nt to charge | e this o | rder to: | | | | | |
| ☐ Discove | er/Novus | □ Visa | | Master Card | | American Expr | ress 🗆 | Diners Club | |
| Credit card number: | | | | | | | | Exp. date: | |
| Signature: | | | | | | | | - | |
| Name (Please print name as | it appears on c | redit card): | | | | | | | |
| | | | | | | | | | |
| Billing address: | | | (Please | print address exact | ly as it a _l | opears on credit card s | statement) | | |

Privacy Act Statement: Your information will be used to provide you requested products, services, or information. Collection is authorized by 39 USC 401, 403, and 404. Providing the information is voluntary, but if not provided, we may not process your transaction. We do not disclose your information to third parties without your consent, except to facilitate the transaction, to act on your behalf or request, or as legally required. This includes the following limited circumstances: to a congressional office on your behalf; to financial entities regarding financial transaction issues; to a USPS® auditor; to entities, including law enforcement, as required by law or in legal proceedings; and to contractors and other entities aiding us to fulfill the service (service providers). For more information regarding our privacy policy visit us at *usps.com*®.