

Purchase of Mailing Labels



Prepared address mailing labels of the FPTA membership can be ordered at the following prices:

Members: .25 cents per label

Non-Members: .50 cents per label

A minimum purchase of \$20.00 is required on all orders.

Format: Peel and stick labels. Mailing labels purchased through the FPTA Chapter office may be used for one mailing only and may not be duplicated without the written permission of the FPTA. FPTA reserves the right to refuse any future request for use of the FPTA Mailing list from any organization or individual who has violated the FPTA mailing policy.

Labels may be sorted in the following manner:

1. By member type (PT, PTA or Student)
2. Location (City, County or District)

Mailing labels may be purchased by sending the form below.

The form can be faxed **(850) 224-5281** or e-mailed (info@fpta.org). If you have any questions please call **(850) 222-1243**. Shipping and tax are not included in pricing. For overnight shipping, please include your FedEx or UPS account number.

Payment of labels will be accepted in any of the following forms:

- Visa
- MasterCard
- American Express
- Check (please mail payment to 800 N Calhoun St #1A, Tallahassee, FL 32303)

If you are purchasing labels at the member discount price, please be sure to include your membership number. An FPTA district map that designates the counties within each district is available should you need assistance when choosing a list of labels.

We must receive an example of what will be mailed out using the labels so the purchase can be approved.

Thank you for your order. Please be sure to use your member discount where it is applicable

800 N Calhoun St #1A
Tallahassee, FL 32303

www.fpta.org

O 850.222.1243
F 850.224.5281

LABEL ORDER FORM

DATE: _____

Phone: _____ Fax: _____

COMPANY / NAME OF PERSON ORDERING LABELS: _____

Email Address: _____

MAILING ADDRESS: _____

CITY / STATE/ ZIP: _____

APTA/FPTA member number (if applicable) _____

Mailing Label Type Requested: ____PT ____PTA ____Student

District Requested: _____

East Central: Counties in the District are as follows – Brevard, Indian River, Lake, Martin, Okeechobee, Orange, Osceola, Seminole, St. Lucie, Sumter and Volusia

Northern: Counties in the District are as follows – Alachua, Baker, Clay, Columbia, Dixie, Duval, Flager, Gilchrist, Hamilton, Jefferson, Lafayette, Leon, Levy, Madison, Marion, Nassau, Putnam, St. Johns, Suwannee, Taylor, Union and Wakulla

Northwest: Counties in the District are as follows – Bay, Calhoun, Escambia, Franklin, Gadsden, Gulf, Holmes, Jackson, Liberty, Okaloosa, Santa Rosa, Walton, and Washington

Southeast: Counties in the District are as follows – Broward, Dade, Monroe, Palm Beach

Southwest: Counties in the District are as follows – Charlotte, Collier, Glades, Hendry, and Lee

West Central: Counties in the District are as follows – Desoto, Sarasota, Highlands, Hardee, Polk, Manatee, Hillsborough, Pasco, Pinellas, Hernando and Citrus

*****DO NOT WRITE BELOW THIS LINE, OFFICIAL USE ONLY*****

PT _____ PTA _____ Student _____

FPTA REPORT = Total Number of Members per Order _____

Member Rate \$0.25/label = \$ _____

Non-Member Rate \$0.50/label = \$ _____

Minimum Purchase of \$20.00

SUB TOTAL = \$ _____

SALES TAX (7.5%) = \$ _____

SHIPPING = \$ _____

TOTAL = \$ _____

*****PURCHASE ORDERS CANNOT BE ACCEPTED FOR PAYMENT*****

Note: If paying by credit card please fax form with card information to our secure fax line at 850-224-5281

Visa/MasterCard/American Express/Discover

Card # _____ **Expiration Date** _____ **CVV #** _____

Name on Credit Card (please print clearly) _____

Billing Address Street: _____

Billing Address City & Zip: _____

Signature: _____