

* Required Fields

Company Information* **Company Name*** **Street Address**
(No., street, ste. no.)* **City, *State, ZIP + 4®****Company Contact Information****Salutation** Mr. Ms.* **First Name*** **Last Name****Contact Title*** **Phone Number**
(Include area code)

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E-mail Address**Your Information*****First Name*****Last Name*****Title*** **Phone Number**
(Include area code)

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Fax Number
(Include area code)

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Office Name
(e.g., Dublin Post Office)**ZIP + 4®****E-mail Address**
(Internal or external)**How would you like to
be contacted about the
outcome of your lead?** E-mail Hardcopy
via Mail Fax**Postal Service™ Products the Customer May Be Interested in Using** Direct Mail Packages Online Services
 International Other (Please specify in "Lead Comments")**Competitors Used (If known)** UPS FedEx Airborne
 Other (Please specify in "Lead Comments")

Lead Potential
(e.g., 10000 – do not use dollar signs or commas)

Volume
(e.g., 50 pkgs. daily or 100 First-Class Mail[®] service letters a day)

Lead Comments

* **Area**
(e.g., Southwest, Eastern Area)

Headquarters/Area Representative

Name

Street Address

City, State, ZIP + 4[®]

Please see the list of "Submit a Lead" representatives.

Find your area or Headquarters contact person, complete the necessary information on this form, and mail it to the representative's address.