



# Mailing Label/List Order Form

You may purchase mailing labels or a list containing information on city officials in Minnesota compiled by the League of Minnesota Cities. This service is limited to the information included in the *Directory of Minnesota City Officials*—this information is constantly updated in our database. Please complete all the information below and allow at least five working days for your request. Rush orders (same day turnaround) will be charged an additional 20%.

*All prices effective as of June 2015; prices are subject to change and will be charged at the current rate at the time order is placed.*

Select a format.  Printed mailing labels (basic city information only)  Electronic list

30¢ per record: Select fields desired below.

**Basic city information:**

- Name of city official
- Title of city official
- City/company
- Mailing address
- City, state, zip code
- Affiliated city (individual works with, but may not be employed by, this city)

**Additional Information**

- General city telephone number
- General city email
- City website
- Population
- County
- Election year and month
- City hall business hours
- Council meeting schedule

Select criteria.

**Who do you want to reach?** select function(s):

- Mayor
- Chief Appointed Official  
(City Manager, Administrator, Asst. Admin, Clerk, Dep. Clerk)
- Attorney
- Engineer
- Fire Chief
- Public Works
- Other City Officials (specific function/title):  
\_\_\_\_\_

**Data filters:** select filter(s) if needed:

- Population (size of city, range of population, etc.):  
\_\_\_\_\_
- Legislative district(s): \_\_\_\_\_
- All MN Cities
- Metro cities only (7-county metro area)
- Greater Minnesota cities only
- LMC member cities only
- County(ies) \_\_\_\_\_

Include notes to help us complete your request: \_\_\_\_\_

The League of Minnesota Cities does its best to ensure accuracy of this service. We accept no responsibility or liability for incomplete or inaccurate information. Mailing labels and/or electronic files provided are **intended for one-time use only**.

I agree to the terms above. Signature: \_\_\_\_\_

**You will be notified of the charges when your order is completed. You may mail a check (payable to League of Minnesota Cities), or pay at the time of pick up. There is a \$20 minimum charge.**

Name \_\_\_\_\_ Organization \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**How would you like your order delivered?**  Pick up  Send via U.S. mail  Send via email

**Return completed order form to:** Mailing Label/List Request, Kimberly Ciarrocchi, League of Minnesota Cities, 145 University Avenue West, St. Paul, MN 55103-2044 • Phone: (651) 281-1200 • Fax: (651) 281-1299 • Email: [directory@lmc.org](mailto:directory@lmc.org)