

**SmartNote:** Complete this form electronically by clicking the required fields.

## ARMA 2010 Attendee Lists

### Pre-show attendee list

**Order date:** September 24, 2010

**List availability date:** approx. October 1

Be sure that ARMA conference attendees stop by your booth during ARMA 2010 Expo. Mail a letter of invitation, postcard, or promotional piece to these important decision-makers inviting them to your booth to learn more about your products and services. The mailing list of pre-registered conference attendees (approximately 1,200 records, including physical mailing address only – no email, no phone) is available for your use. There is a **\$350** flat charge per list. **One-Time Use Only.**

Qty of lists \_\_\_ x \$350 per list = Total due \$\_\_\_\_\_

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### Post-show attendee list

**Order date:** Any time

**List availability date:** approx. November 15

Be prepared. Order your post event list today. Begin planning your ARMA follow up prior to the expo and close that sale earlier this year! Approx 3,500+ records, including physical mailing address only – no email, no phone. Breakdown of Attendees available after the event. **One Time Use Only.**

Qty of lists \_\_\_ x \$500 per list \_\_\_\_\_ = Total due of \$\_\_\_\_\_

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Your list will arrive as an email attachment Excel file. List includes name, company name (where available), address, city, state, zip/mc, country. **Phone and e-mail are NOT available for purchase.** List is licensed for use by purchasing company only and cannot be resold to a third party. E-mail your pdf design to [elizabeth.zlitni@armaintl.org](mailto:elizabeth.zlitni@armaintl.org). List must be paid for in advance and be accompanied by a sample of your design for review and approval by ARMA International. ARMA reserves the right to grant list use based upon the sample provided.

**Questions?** [Elizabeth.zlitni@armaintl.org](mailto:Elizabeth.zlitni@armaintl.org) or 888.279.7378

### Payment details:

Visa       MC       Amex       Discover

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Company \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/MC \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_