



NCOA^{Link}® PROCESSING ACKNOWLEDGEMENT FORM

The collection of information on this Processing Acknowledgment Form (PAF) is required by the Privacy Act of 1974. The United States Postal Service (USPS) requires that each NCOA^{Link} Licensee have a complete NCOA^{Link} PAF for each of their NCOA^{Link} customers prior to providing the NCOA^{Link} service. The Licensee is also required by the USPS to retain a copy of the completed form for each of its customers and to obtain an updated PAF from each of its customers at minimum once per year. Any signature upon this PAF shall be considered valid for all purposes and have the same effect whether it is an ink-signed hardcopy document or equivalent alternative.

LIST OWNER

I, the undersigned, an authorized representative of:

Company Name

Address

City State ZIP+4

Telephone Number NAICS USPS Mailer ID (optional) E-mail Address (optional)

Parent Company Name

Marketing or "DBA" Company Name or Primary Affiliate Company Name Company Website (optional)

Name (Please print) Title

Signature Date

do hereby acknowledge that I have received and reviewed the NCOA^{Link} Information Package supplied to me by BCC Software, Inc. an NCOA^{Link} Service Provider. I also understand that the sole purpose of the NCOA^{Link} service is to provide a mailing list correction service for lists that will be used for preparation of mailings. Furthermore, I understand that NCOA^{Link} may not be used to create or maintain new movers' lists.

LICENSEE

Business Name (Please print)

Name (Please print) Title

Signature Date

Telephone Number Fax Number

BROKER/AGENT **LIST ADMINISTRATOR** (Check applicable box)

Business Name (Please print)

Address City/State/ZIP+4

Name (Please print) Title

Signature Date

Telephone Number NAICS Company Website (optional)

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