



Application for Listing and/or Prohibitory Order

Information About You (Use the name and address by which you customarily receive mail)

Printed Name

Address (Number, street, apt. or ste. no., p.o. box no., city, state, ZIP+4)

[Redacted Name]

[Redacted Address]

Application for Prohibitory Order (Submit the mailpiece with your application)

1.

The attached mailpiece, from the mailer identified below, offers for sale matter that I believe to be erotically arousing or sexually provocative and therefore is a pandering advertisement. Under the provisions of 39 USC 3008, I request that a Prohibitory Order be issued against the mailer and the mailer's agents or assigns.

Please check only one as appropriate:

- a. I am the addressee of the attached mailpiece, and, if I have listed below an eligible child or children, I request that such child or children (as well as I, myself) be protected by the Prohibitory Order.
- b. I am the parent of _____, the minor addressee of the attached mailpiece, acting for such addressee to obtain a Prohibitory Order to protect just him or her. If a child or children of mine is/are listed below, it is just in connection with the application under 39 USC 3010 that I am making by initialing box 2.
- c. I am the person entitled to receive mail to _____, the deceased addressee of the attached mailpiece. Please issue the Prohibitory Order on behalf of the deceased addressee.

If you initialed box 1, you **MUST**:

- Attach the entire, opened mailpiece, and
- Provide the following mailer information.

Mailer's Name

Coast Capital Group

Mailer's Address (Number, street, apt. or ste. no., p.o. box no.)

2811 Wilshire Blvd, suite 420

Mailer's City, State, and ZIP+4

Santa Monica, CA 90403

Application for Listing (Mailpiece is not required for this option at this time)

2.

I do not wish to have **sexually oriented advertisements** mailed to me or my children under 19 years old who are listed below. Please add me/us to the list you maintain, under 39 USC 3010, of persons not wishing to receive such advertisements.

Information About Your Children (Age 18 and Under)

Children's Names			Date of Birth		
Last	First	Middle Initial	Month	Day	Year

Authorization

Signature of Adult Completing Form

[Redacted Signature]

Date

11/19/04

Initial box 1, box 2, or both