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BULK MAIL REVENUE, PIECES AND WEIGHT SYSTEM (BRPW)

STATISTICAL SYSTEM DOCUMENTATION



## United States Postal Service

Bulk Revenue, Pieces and Weight System (BRPW)  
Statistical System Documentation

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## Preface

This is a Category 1 library reference. It updates the BRPW statistical system documentation previously provided in USPS-LR-I-26/R2000-1. The BRPW is the subject of the testimony of RPW System witness Hunter, USPS-T-4.



## United States Postal Service

### Bulk Mail Revenue, Pieces and Weight System (BRPW) Statistical System Documentation

#### 1. General

This document describes the methodology employed by the Postal Service under the Bulk Mail Revenue, Pieces and Weight System (BRPW) to develop and report estimates of revenue, pieces, and weight (RPW) totals for the mail classes and subclasses of bulk mail. The BRPW is a statistical sampling system that utilizes financial revenue accounts information and bulk mailing postage statement information obtained from a panel of post offices to report estimates of revenue and volume totals each postal quarter (PQ).

#### 2. Population Studied

The population measured under the BRPW consists of all bulk mail entering the postal mailstream throughout a fiscal year (FY) for the following mail classes or subclasses (and postage statement series): First-Class Mail (FCM) and permit imprint Priority Mail (Forms 3600), Periodicals mail (Forms 3541), Regular and Nonprofit Standard Mail (Forms 3602), and permit imprint Bound Printed Matter (BPM) and Parcel Post Standard Mail (Forms 3605). The measures of interest for each mail category and rate category within for which estimates are reported under the BRPW are the population revenue, volume, and weight totals. Copies of the types of postage statements captured under the BRPW are found in Appendix A of this document.<sup>1</sup>

#### 3. Survey Design

Under the BRPW survey design, the bulk mail population is grouped into primary sampling units consisting of individual finance numbers. In general, a finance number corresponds to a post office and it includes all stations, branches, and units reporting revenue under the parent post office's finance number.

The BRPW utilizes a panel of post offices comprised of an automated office segment from which postage statement information is captured under the PERMIT System, a bulk mail acceptance and financial reporting system maintained by the Postal Service's

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<sup>1</sup> Electronic copies of these postage statements are not provided.





Marketing group, and a non-automated office segment from which postage statement information is obtained from a probability-based sample of these offices.

An ongoing census is undertaken throughout the year of a panel office's bulk mail activity for one or more targeted mail categories. A targeted mail category is a unique mail class or subclass and indicia combination. Throughout the year, each panel office reports its revenue, volume and weight activity from postage statements on an AP basis. PQ BRPW estimates are then constructed and reported. The PQ estimates are then summed at the end of the year to obtain the FY based estimates reported in the Service's annual Cost and Revenue Analysis (CRA) report.

All automated offices are selected into the BRPW panel with certainty. A sample of post offices from the non-zero revenue, non-automated office population for each targeted mail category supplements the automated office segment. The non-automated office sample is selected using a single-stage, stratified random sample design. Estimates of revenue and volume totals are then constructed for the PQ using reciprocal sampling fractions and known revenue account totals obtained from the Postal Service's revenue accounts system.

The BRPW utilizes independent samples from the non-automated office population for each of the following targeted mail classes or subclasses and indicia combinations: permit imprint FCM & Priority Mail, Periodicals, permit imprint Regular and Nonprofit Standard Mail, and postage affixed FCM and Regular and Nonprofit Standard Mail.<sup>2</sup> For each targeted mail category, a frame is constructed listing the non-automated offices' non-zero targeted or auxiliary revenue measures obtained from a revenue account or census survey. Prior to selecting the sample, the offices listed on the frame are grouped among four to six strata. The strata boundaries are constructed from the targeted or auxiliary revenue size measure using the CUM  $\sqrt{f}$  Rule. (See W. Cochran, Sampling Techniques, 3rd ed., 1997, p. 129.) A stratified random sample of offices is then selected with minimum sample size of four units per stratum.

The selected BRPW panel participants report their targeted postage statement activity each AP to postal headquarters for subsequent data entry to electronic computer file. To manage the peak data entry workload, selected non-automated panel offices found to have a large number of postage statements become candidates for automation under the PERMIT System; however, these offices remain in their assigned strata for estimation purposes.

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<sup>2</sup> Estimates are also developed and reported under the BRPW for permit imprint BPM and Parcel Post. Because the automated office segment coverage for these subclasses is high relative to their known revenue totals reported in the trial balance accounts (over 90 percent for FY 2000), no supplemental sample of offices is used.



#### 4. Reporting and Data Verification

Rate category level revenue and volume data obtained from postage statements are reported by the panel offices on an AP basis. At the close of each AP, the automated office data are extracted from the PERMIT System and are written to a user file on the IBM mainframe located at the San Mateo Management Support Service Center (MSSC). A file listing the PERMIT System offices is also updated. At the same time, the non-automated panel offices also report their postage statement activity to postal headquarters. Their data are keyed to an ASCII file for upload to a mainframe file for subsequent input to the BRPW jobstream.

The postage statement data reported by the panel offices are received for input to the BRPW in Volume Information Profile (VIP) Code format. A VIP Code maps a postage computation line item on a postage statement to a rate category. The revenue and volume data reported by an office in a VIP Code record represent all activity for the rate category at the office for an AP. Upon input to the BRPW jobstream, the VIP Code data are passed through a series of data verification checks for completeness and consistency with rate category parameters. The automated office data also benefit from data verification checks made at the bulk mail acceptance unit at the time the postage statement revenue and volume data are entered into the PERMIT System. The data edit and verification process is described in the BRPW computer system documentation provided in USPS-LR-J-18/R2001-1.

#### 5. Estimation

Estimates of revenue and volume totals are constructed in the BRPW each PQ using reciprocal probabilities of selection and controls to known revenue account totals. Revenue Account Identifier Code (AIC) totals are obtained for the following mail class or subclass and indicia combinations: permit imprint FCM and Priority Mail from AIC 121 and AIC 237, respectively, Periodicals from AIC 135 and AIC 224, permit imprint Nonprofit and Regular Standard Mail from AIC 125 and AIC 130, respectively, and permit imprint BPM and Parcel Post Standard Mail from AIC 131 and AIC 223, respectively. Estimates of revenue and volume totals for these categories are constructed using a combined (strata) ratio estimator. For the postage affixed FCM and Regular and Nonprofit Standard Mail categories for which identifiable revenue accounts do not exist, a stratified random sample estimator is used to construct the estimates of totals. BRPW estimates for the fiscal year are obtained upon summing the independently constructed PQ based estimates.

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BRPW model design assumptions include non-overlapping sampling strata and equal probability selection of the sampled units within a stratum. Non-response and incomplete response are assumed random and independent of the characteristics of interest and are accounted for in the model through sample size adjustment. A separate computer program provides estimates of the sampling variance for the reported class and subclass point estimates of totals. This variance estimation job develops relative precision coefficient of variation (C.V) measures from which estimates of statistical reliability including confidence intervals can be constructed. The SAS programming code used to develop the estimates of revenue and volume totals is provided in Appendix A of the computer system documentation in USPS-LR-J-18. The programming code used to construct the estimates of sampling error is shown in Appendix A of the variance estimation program documentation provided in USPS-LR-J-20.

The following formulas are used in the BRPW to construct PQ based estimates of revenue and volume totals and related measures of precision:

Let,

- $i$  = post office finance number
- $h$  = sampling stratum
- $N_h$  = number of offices in targeted population stratum  $h$
- $n_h$  = number of sampled offices reporting in stratum  $h$
- $Y$  = population revenue, volume or weight total for characteristic of interest  $y$
- $y_{hi}$  = revenue, volume or weight for characteristic of interest for sampled office  $i$  in stratum  $h$
- $x_{hi}$  = domain (AIC) revenue for characteristic  $y$  for sampled office  $i$  in stratum  $h$

Then,

- (1) The stratified random sample estimate of  $Y$  is :

$$\hat{Y}_{st} = \sum_h \hat{Y}_h,$$

where  $\hat{Y}_h = (N_h / n_h) \sum_i y_{hi}$  is the estimate of the stratum  $h$  total  $Y_h$ .

- (2) The combined ratio estimate of  $Y$  is :

$$\hat{Y}_{rc} = X_B \cdot \hat{Y}_{st} / \hat{X}_{st},$$

where :  $X_B$  is the AIC book revenue for domain  $B$  for which  $y_i$  is an element, and

$\hat{X}_{st} = \sum_h (N_h / n_h) \sum_i x_{hi}$  is the stratified random sample estimate of  $X_B$ .

- (3) The variance estimator for the stratified random sample estimator  $\hat{Y}_{st}$  in (1) above is :

$$\hat{V}(\hat{Y}_{st}) = \sum_h [N_h(N_h - n_h) / n_h] \sum_i (y_{hi} - \bar{y}_h)^2 / (n_h - 1),$$

where  $\bar{y}_h = \sum_i y_{hi} / n_h$ .



### 5. Estimation (continued)

(4) The variance estimator for the combined ratio estimator  $\hat{Y}_{rc}$  in (2) above is :

$$\hat{V}(\hat{Y}_{rc}) = \sum_h [N_h^2(1-f_h)/n_h] \cdot (s_{y_h}^2 + \hat{R}^2 s_{x_h}^2 - 2\hat{R} \cdot s_{yx_h}) ,$$

where :  $f_h = n_h / N_h$  ,  
 $\hat{R} = \hat{Y}_{st} / \hat{X}_{st}$  ,  
 $s_{y_h}^2 = \sum_i (y_{hi} - \bar{y}_h)^2 / (n_h - 1)$  ,  
 $s_{x_h}^2 = \sum_i (x_{hi} - \bar{x}_h)^2 / (n_h - 1)$  for  $\bar{x}_h = \sum_i x_{hi} / n_h$  ,  
 $s_{yx_h} = \sum_i (y_{hi} - \bar{y}_h) \cdot (x_{hi} - \bar{x}_h) / (n_h - 1)$  .

In equation (4) above,  $f_h$  is the sampling frequency for stratum  $h$ ,  $\hat{R}$  is the estimate of the population ratio  $R = Y / X$ ,  $s_{y_h}^2$  and  $s_{x_h}^2$  are the estimated population variances  $S_{y_h}^2$  and  $S_{x_h}^2$  for the  $y_i$  and  $x_i$  within stratum  $h$ , respectively, and  $s_{yx_h}$  is the estimated population covariance  $S_{yx_h}$  between the  $y_i$  and  $x_i$  for stratum  $h$ .





USPS-LR-J-19

APPENDIX A

Postage Statement Forms

This appendix contains copies of the types of postage statements captured under the BRPW for the FY 2000 period. These postage statements are not included on the CD-ROM for this library reference.

The following postage statement series are captured under the BRPW:

<u>PS Form Series</u>	<u>Postage Statement Series</u>	<u>Page</u>
3600 .....	First-Class Mail and Priority Mail .....	1
3541 .....	Periodicals .....	3
3602 .....	Regular and Nonprofit Standard Mail .....	7
3605 .....	BPM and Parcel Post Standard Mail .....	15



United States Postal Service

Postage Statement — First-Class Mail  
Permit Imprint

Post Office Note Mail Arrival Time

Mailer Information	Permit Holder's Name and Address	Telephone	Name and Address of Mailing Agent (If other than permit holder)	Telephone	Name and Address of Individual or Organization for Which Mailing Is Prepared (If other than permit holder)	
	CAPS Cust. Ref. ID _____		Dun & Bradstreet No. _____		Dun & Bradstreet No. _____	
Mailing Information	Post Office of Mailing	Mailing Date	Federal Agency Cost Code	Statement Sequence No.	Receipt No.	
	Permit No.	Weight of a Single Piece 0 _____ pounds		Total Pieces	Total Weight	
Postage Computation (DMM P013)	Prepared Under DMM (Check all that apply)		Processing Category (DMM C050)		Number of Containers (Fill in all that apply)	
	<input type="checkbox"/> M130 (Letters, flats, parcels) <input type="checkbox"/> M130 (Upgradable letters) <input type="checkbox"/> M810 (Automation letters) <input type="checkbox"/> M820 (Auto. flats)		<input type="checkbox"/> Letters <input type="checkbox"/> Flats <input type="checkbox"/> Automation Flats (DMM C820) <input type="checkbox"/> Parcels		1' MM Trays _____ 2' MM Trays _____ 2' EMM Trays _____ Total Ltr. Trays _____ Flat Trays _____ Number of Sacks N/A Number of Pallets _____ Number of Other _____	
Certification	For Automation Letters			Total From Part A (On reverse)		
	For Automation Flats			Total From Part B (On reverse)		
	For Nonautomation Letters, Flats, and Parcels			Total From Part C (On reverse)		
	For Automation and Nonautomation Postcards			Total From Part D (On reverse)		
	For Special Services and Other Fees			Total From Attached Form 3540-S		
	Postmaster: Report total postage in AIC 121.			<b>Total Postage Due (Add lines above)</b> →		
USPS: Additional Postage Payment (State reason. Add amount to line above)				\$	→	
<p>The signature of a mailer certifies that it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the mailer, and that both the mailer and the agent will be liable for and agree to pay any deficiencies.)</p> <p>The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).</p> <p><input type="checkbox"/> For Updated Addresses (Presorted and automation rates only): I certify that the addresses appearing on the pieces described above have been updated within 180 days of the date of this mailing using a USPS-approved address update method.</p> <p><input type="checkbox"/> For Enclosed Reply Pieces (Automation rate only): I certify that any letter-size cards or envelopes enclosed in the pieces described above bear the correct facing identification mark (FIM) and barcode and meet automation compatibility standards in DMM C810.</p> <p><input type="checkbox"/> For ZIP Codes (Presorted rate only): I certify that the ZIP Codes appearing on the pieces described above have been verified and corrected where necessary within 12 months of the date of this mailing using a USPS-approved method.</p> <p>I hereby certify that all information furnished on this form is accurate and truthful, that this mailing meets all applicable CASS/MASS standards for address and barcode accuracy, that the material presented qualifies for the rates of postage claimed, and that this mailing does not contain any hazardous materials prohibited by postal regulations.</p>						
Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)					Telephone	
USPS Use Only	Weight of a Single Piece 0 _____ pounds		Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Total Pieces	Total Weight	If "Yes," Reason			
	Total Postage					
	Check One (If applicable)		Date Mailed	Contact	By (Initials)	
	<input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled					
	I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of required annual fee.					
Verifying Employee's Signature		Verifying Employee's Name		Time AM PM		
Round Stamp (Required)						

# First-Class Mail — Permit Imprint

Presort / Automation Discounts	Rate per Piece	Number of Pieces	Total	Presort / Automation Discounts	Rate per Piece	Number of Pieces	Total
<b>A</b> Automation Letters (DMM C810)				<b>B</b> Automation Flats (DMM C820)			
Carrier Route		x	pcs. = \$	3/5		x	pcs. = \$
5-Digit		x	pcs. = \$	Basic		x	pcs. = \$
3-Digit		x	pcs. = \$	Nonstandard Surcharge (If applicable)		.05 x	pcs. = \$
Basic		x	pcs. = \$				
↓				↓			
Total — Part A (Carry to front of form) \$				Total — Part B (Carry to front of form) \$			
<b>C</b> Nonautomation Letters, Flats, and Parcels (DMM C050)				<b>D</b> Postcards (DMM C100)			
Presorted		x	pcs. = \$	Automation*			
Single-Piece		x	pcs. = \$	Carrier Route	.141	x	pcs. = \$
Nonstandard Surcharge (If applicable)				5-Digit	.146	x	pcs. = \$
Presorted	.05	x	pcs. = \$	3-Digit	.159	x	pcs. = \$
Single-Piece	.11	x	pcs. = \$	Basic	.166	x	pcs. = \$
From Standard Mail (A)				Nonautomation			
Single-Piece		x	pcs. = \$	Presorted	.180	x	pcs. = \$
Nonstandard Surcharge (If applicable)				Single-Piece	.200	x	pcs. = \$
Single-Piece	.11	x	pcs. = \$				
↓				↓			
Total — Part C (Carry to front of form) \$				Total — Part D (Carry to front of form) \$			

United States Postal Service  
**Postage Statement — First-Class Mail**  
**stage Affixed**

Post Office Note Mail Arrival Time

<b>Mailer Information</b>	Permit Holder's Name and Address	Telephone	Name and Address of Mailing Agent (If other than permit holder)	Telephone	Name and Address of Individual or Organization for Which Mailing Is Prepared (If other than permit holder)	
	Dun & Bradstreet No.		Dun & Bradstreet No.		Dun & Bradstreet No.	
<b>Mailing Information</b>	Post Office of Mailing		Mailing Date		Statement Sequence No.	Receipt No.
	Permit No.	<input type="checkbox"/> Meter Postage <input type="checkbox"/> Precanceled Stamps	Weight of a Single Piece 0 pounds		Total Pieces	Total Weight
<b>Computation (DMM P013)</b>	Prepared Under DMM (Check all that apply) <input type="checkbox"/> M130 (Letters, flats, parcels) <input type="checkbox"/> M130 (Upgradable letters) <input type="checkbox"/> M810 (Automation letters) <input type="checkbox"/> M820 (Auto. flats)		Processing Category (DMM C050) <input type="checkbox"/> Letters <input type="checkbox"/> Flats <input type="checkbox"/> Automation Flats (DMM C820) <input type="checkbox"/> Parcels		Number of Containers (Fill in all that apply) 1' MM Trays _____ 2' MM Trays _____ 2' EMM Trays _____ Total Ltr. Trays _____ Flat Trays _____ Number of Sacks N/A Number of Pallets _____ Number of Other _____	
	For Automation Letters <span style="float:right">Total From Part A (On reverse)</span> For Automation Flats <span style="float:right">Total From Part B (On reverse)</span> For Nonautomation Letters, Flats, and Parcels <span style="float:right">Total From Part C (On reverse)</span> For Automation and Nonautomation Postcards <span style="float:right">Total From Part D (On reverse)</span> For Special Services and Other Fees <span style="float:right">Total From Attached Form 3540-S</span> <div style="text-align: right;"><b>Total Postage (Add lines above) →</b></div>					
<b>Pos.</b>	Rate at Which Postage Affixed (Check one) (DMM P100) <input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither		_____ pcs. x \$ _____ = <b>Postage Affixed</b> →			
	<b>Total Postage Due (Subtract postage affixed from total postage) →</b>					
<b>Certification</b>	USPS: Additional Postage Payment (State reason. Add amount to line above)					\$ →
	<p>The signature of a mailer certifies that it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the mailer, and that both the mailer and the agent will be liable for and agree to pay any deficiencies.) The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).</p> <p><input type="checkbox"/> <b>For Updated Addresses (Presorted and automation rates only):</b> I certify that the addresses appearing on the pieces described above have been updated within 180 days of the date of this mailing using a USPS-approved address update method.</p> <p><input type="checkbox"/> <b>For Enclosed Reply Pieces (Automation rate only):</b> I certify that any letter-size cards or envelopes enclosed in the pieces described above bear the correct facing identification mark (FIM) and barcode and meet automation compatibility standards in DMM C810.</p> <p><input type="checkbox"/> <b>For ZIP Codes (Presorted rate only):</b> I certify that the ZIP Codes appearing on the pieces described above have been verified and corrected where necessary within 12 months of the date of this mailing using a USPS-approved method.</p> <p>I hereby certify that all information furnished on this form is accurate and truthful, that this mailing meets all applicable CASS/MASS standards for address and barcode accuracy, that the material presented qualifies for the rates of postage claimed, and that this mailing does not contain any hazardous materials prohibited by postal regulations.</p>					
<b>Use Only</b>	Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)					Telephone
	Weight of a Single Piece 0 pounds Check One (If applicable) <input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of required annual fee.	Is figure at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," Reason			Round Stamp (Required)	
	Verifying Employee's Signature		Verifying Employee's Name		Time	AM PM

# First-Class Mail — Postage Affixed

Presort / Automation Discounts	Rate per Piece	Number of Pieces	Total	Presort / Automation Discounts	Rate per Piece	Number of Pieces	Total
<b>A Automation Letters (DMM C810)</b>				<b>B Automation Flats (DMM C820)</b>			
Carrier Route		x	pcs. = \$	3/5		x	pcs. = \$
5-Digit		x	pcs. = \$	Basic		x	pcs. = \$
3-Digit		x	pcs. = \$	Nonstandard Surcharge (If applicable)	.05	x	pcs. = \$
Basic		x	pcs. = \$				
↓				↓			
Total — Part A (Carry to front of form)			\$	Total — Part B (Carry to front of form)			\$
<b>C Nonautomation Letters, Flats, and Parcels (DMM C050)</b>				<b>D Postcards (DMM C100)</b>			
Presorted		x	pcs. = \$	Automation*			
Single-Piece		x	pcs. = \$	Carrier Route	.141	x	pcs. = \$
Nonstandard Surcharge (If applicable)				5-Digit	.146	x	pcs. = \$
Presorted	.05	x	pcs. = \$	3-Digit	.159	x	pcs. = \$
Single-Piece	.11	x	pcs. = \$	Basic	.166	x	pcs. = \$
From Standard Mail (A)				Nonautomation			
Single-Piece		x	pcs. = \$	Presorted	.180	x	pcs. = \$
Nonstandard Surcharge (If applicable)				Single-Piece	.200	x	pcs. = \$
Single-Piece	.11	x	pcs. = \$	* Automation-compatible cards only (DMM C810)			
↓				↓			
Total — Part C (Carry to front of form)			\$	Total — Part D (Carry to front of form)			\$

United States Postal Service

**Postage Statement — Priority Mail****Permit Imprint**

Post Office Note Mail Arrival Time

Mailer Information	Permit Holder's Name and Address	Telephone	Name and Address of Mailing Agent (If other than permit holder)	Telephone	Name and Address of Individual or Organization for Which Mailing Is Prepared (If other than permit holder)	
	CAPS Cust. Ref. ID _____		Dun & Bradstreet No. _____		Dun & Bradstreet No. _____	
Mailing Information	Post Office of Mailing	Mailing Date	Federal Agency Cost Code	Statement Sequence No.	Receipt No.	
	Permit No.	Weight of a Single Piece _____ pounds		Total Pieces	Total Weight	
	Processing Category (DMM C050)	<input type="checkbox"/> Letters <input type="checkbox"/> Outside Parcels <input type="checkbox"/> Flats <input type="checkbox"/> Parcels		Number of Containers (Fill in all that apply)		
		1' MM Trays _____	2' MM Trays _____	2' EMM Trays _____	Total Lbr. Trays _____	
Separation Method: All pieces must be separated by zone when presented for acceptance unless all the pieces are in a weight category for which the rate does not vary by zone (5 pounds or less) or the postage is reported under an MMS.						
Postage Calculation	Zone		Number of Pieces	x	Rate	Totals
	Unzoned (Up to 5 pounds)					
	Local, 1, 2, & 3					
	4					
	5					
	6					
	7					
	8					
	Pieces from Standard Mail (A)					
	Totals					
For Special Services and Other Fees				Total From Attached Form 3540-S		
Postmaster: Report total postage in AIC 237.				<b>Total Postage Due (Add two lines above) →</b>		
Certification	The signature of a mailer certifies that it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the mailer, and that both the mailer and the agent will be liable for and agree to pay any deficiencies.)					
	The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).					
	I hereby certify that all information furnished on this form is accurate and truthful, that the material presented qualifies for the rates of postage claimed, and that this mailing does not contain any hazardous materials prohibited by postal regulations.					
Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)					Telephone	
PS Use Only	Weight of a Single Piece _____ pounds		Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No		Round Stamp (Required)	
	Total Pieces	Total Weight	If "Yes," Reason			
	Total Postage					
	I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation; and (3) proper completion of postage statement.					
	Verifying Employee's Signature		Verifying Employee's Name	Time	AM PM	





United States Postal Service

## Postage Statement — Periodicals

## Regular and Science-of-Agriculture Rates

Post Office Note Mail Arrival Time

Periodicals mailings (except Foreign mailings) of different copy weights must be reported on separate statements.

Publication Title or News Agent's Name		Mailing Date		Entry Post Office Name, State, and ZIP+4	
CAPS Customer Ref. ID		Processing Category (DMM C050)		Number of Containers (Fill in all that apply)	
Publication No.	Edition Code/Key	Statement Sequence No.	<input type="checkbox"/> Letters <input type="checkbox"/> Flats <input type="checkbox"/> Auto. Flats (DMM C820) <input type="checkbox"/> Machinable Parcels <input type="checkbox"/> Irregular Parcels	1' MM Trays	2' MM Trays
Issue Date	Issue Frequency			2' EMM Trays	Total Ltr. Trays
			Flat Trays	Sacks	Pallets
				Other	

Complete only ONE of these two boxed sections:

If this statement is for ALL ISSUES in a calendar month (DMM P200.2)		If this statement is for ONE ISSUE or ONE EDITION	
Number of Issues This Month	Advertising Percentage in Total Month's Issues %	Weight per Copy for Issue (DMM P013—round off to 4 decimal places if necessary) lbs.	
Weight of One Sheet (DMM P200—round off to 6 decimal places if necessary) lbs.	Combined Weight of One Copy From Each Issue lbs.	Advertising Percentage in This Issue %	
For Domestic Mailings: All domestic Periodicals mailings pay a pound rate (on the total weight of the mailing) and a piece rate (on the number of addressed pieces in the mailing). For Foreign Mailings: Foreign Periodicals mailings pay only a piece rate (based on the weight of the piece).		Post Office Computed Weight per Copy (Round off to 4 decimal places if necessary) lbs.	

## ■ Outside-County

Zone	Subscriber / Requester Copies	Nonsub./Nonreq. Copies*		Total Copies	Total Pounds	Advertising Pounds	Rate		Postage	Totals
		Within 10% Limit	Over 10%				Regular	Sci./Ag.		
1. Del. Unit							\$1.155	\$1.116		
2. SCF							.178	.133		
3. 1 & 2							.215	.161		
4. 3							.229			
5. 4							.263			
6. 5							.316			
7. 6							.371			
8. 7							.438			
9. 8							.495			
10. Subtotals										
* Noncommingled nonsubscriber copies over the 10% limit are not mailable at Periodicals rates.										
11. Nonadvertising Pounds (Total pounds minus advertising pounds)							x \$.161	=		
Total Pound Rate Postage (Line 10 plus line 11)										12.
Level	Sorted Under DMM <input type="checkbox"/> M200 <input type="checkbox"/> M810 <input type="checkbox"/> M820		Description (DMM E230 and E240 as applicable)		Number of Copies	No. Qualified Addressed Pcs	Rate	Postage		
13. Basic	Nonautomation						\$2.294			
14. Basic	Automation	Letters					.232			
15. Basic	Automation	Flats					.248			
16. 3-Digit	Nonautomation						.253			
17. 3-Digit	Automation	Letters					.206			
18. 3-Digit	Automation	Flats					.214			
19. 5-Digit	Nonautomation						.197			
20. 5-Digit	Automation	Letters					.162			
21. 5-Digit	Automation	Flats					.168			
22. Carrier Route	Basic Carrier Route						.122			
23. Carrier Route	High Density	Sequencing Date					.103			
24. Carrier Route	Saturation	Sequencing Date					.085			
25. Subtotals										
26. Nonadvertising Percentage (100 minus adv. %)							x \$.00059 x No. Qual. Pcs. (Line 25) =			
27. Number of Addressed Pieces (not copies) eligible for delivery unit rate							x \$.013 =			
28. Number of Addressed Pieces (not copies) eligible for SCF rate							x \$.007 =			
29. Total Piece Rate Discount (Add lines 26 through 28)										
Total Piece Rate Postage (Line 25 minus line 29)										30.
Postmaster: Report total postage in AIC 135.										
Total Outside County Postage (Line 12 plus line 30)										31.

# Periodicals — Regular and Science-of-Agriculture Rates

Line 32 is reserved.

## Foreign (IMM 242.2) (Round off weights to 4 decimal places if necessary)

33. Weight per Copy: Include All Wrappings (Canada) _____ lbs.		34. Weight per Copy: Include All Wrappings (Mexico) _____ lbs.		35. Weight per Copy: Include All Wrappings (Other countries) _____ lbs.		
1,000 or more pieces to a single country? <input type="checkbox"/> No <input type="checkbox"/> Yes (If YES, also complete Form 3541-S)						
Rate Category	Total Pounds	Subscriber / Requester Copies	Nonsubscriber / Nonrequester Copies	Total Copies	Rate	Postage
36. Canada						
37. Mexico						
38. Other Countries						
39. Number of pounds (not copies) entered at the NJI and BMC _____ x \$0.25 = _____						
Postmaster: Report total postage in AIC 238. Total Foreign Postage (Add lines 36 through 38 and subtract line 39) →						40.

## In-County (DMM E270) To calculate postage, use weight from page 1. Periodicals mailings (except Foreign mailings) of different copy weights must be reported on separate statements.

Pound Rate	Entry	Subscriber Copies*	Nonsubscriber Copies*	Total Copies	Total Pounds	Rate	Postage	Totals
	41. Delivery Unit					\$ .107		
	42. All Other					.133		
* Requester and all commingled nonsubscriber copies over 10% limit are not eligible for In-County rates.								
Total In-County Pound Rate Postage (Add lines 41 and 42) →								43.
Piece Rate (In addition to pound rate)	Level	Description (DMM E230 and E240 as applicable)		Number of Copies	No. Qualified Addressed Pcs	Rate	Postage	Totals
	44. Basic	Nonautomation				\$.095		
		Automation	Letters			.046		
			Flats			.065		
	47. 3-Digit	Nonautomation				.088		
		Automation	Letters			.044		
			Flats			.062		
	50. 5-Digit	Nonautomation				.080		
		Automation	Letters			.041		
			Flats			.058		
	53. Carrier Route	Basic Carrier Route				.043		
		High Density	Sequencing Date			.029		
		Saturation	Sequencing Date			.025		
56. Subtotal (Add lines 44 through 55)								
57. Number of addressed pieces (not copies) eligible for delivery unit rate _____ x \$ .004 = _____								
Total In-County Piece Rate Postage (Line 56 minus line 57) →								58.
Postmaster: Report total postage in AIC 224. Total In-County Postage (Add Lines 43 and 58) →								59.
Postmaster: This total for mailer use only. Report AIC 135, AIC 238, and AIC 224 totals separately as instructed above.								
Mailer: Total Postage (Add Lines 31, 40, and 59)								

The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).

- ☐ For Automation Rates Only: I certify that any letter-size reply cards or envelopes enclosed in the pieces described above bear the correct facing identification mark (FIM) and barcode and meet automation compatibility standards in DMM C810.
- ☐ For Nonautomation Rates Only: I certify that the ZIP Codes appearing on the pieces described above have been verified and corrected where necessary within 12 months of the date of this mailing using a USPS-approved method (DMM E230).

I hereby certify that all information furnished on this form is accurate and truthful, that this mailing meets all applicable CASS/MASS standards for address and barcode accuracy, and that the material presented qualifies for the rates of postage claimed.

60a. Mailer's Printed Name and Signature	60b. Publisher's Printed Name and Telephone Number (If publisher not same as mailer)	61a. Verifying Employee's Signature	62. Round Stamp (Required)
		61b. Verifying Employee's Name	
		Time	
		AM	
		PM	
Dun & Bradstreet No.	Dun & Bradstreet No.		

United States Postal Service

**Postage Statement — Periodicals****Nonprofit Rates**

Post Office Note Mail Arrival Time

Periodicals mailings (except Foreign mailings) of different copy weights must be reported on separate statements.

Publication Title or News Agent's Name

Mailer's Name, Address, and Telephone Number

Entry Post Office Name, State, and ZIP+4

CAPS Customer Ref. ID

Publication No.

Edition Code/Key

Mailing Date

Processing Category (DMM C050)

Number of Containers (Fill in all that apply)

☐ Letters☐ Flats☐ Auto. Flats (DMM C820)☐ Machinable Parcels☐ Irregular Parcels

1' MM Trays \_\_\_\_\_ 2' MM Trays \_\_\_\_\_ 2' EMM Trays \_\_\_\_\_ Total Ltr. Trays \_\_\_\_\_

Issue Date

Issue Frequency

Statement Sequence No.

Flat Trays N/A Sacks \_\_\_\_\_ Pallets \_\_\_\_\_ Other \_\_\_\_\_

Complete only ONE of these two boxed sections:

If this statement is for ALL ISSUES in a calendar month (DMM P200.2)

Number of Issues This Month

Advertising Percentage in Total Month's Issues %

Weight of One Sheet (DMM P200—round off to 6 decimal places if necessary) lbs.

Combined Weight of One Copy From Each Issue lbs.

If this statement is for ONE ISSUE or ONE EDITION

Weight per Copy for Issue (DMM P013—round off to 4 decimal places if necessary) lbs.

Advertising Percentage in This Issue %

For Domestic Mailings: All domestic Periodicals mailings pay a pound rate (on the total weight of the mailing) and a piece rate (on the number of addressed pieces in the mailing). For Foreign Mailings: Foreign Periodicals mailings pay only a piece rate (based on the weight of the piece).

Post Office Computed Weight per Copy (Round off to 4 decimal places if necessary) lbs.

**Outside-County**

Zone	Subscriber Copies*	Nonsubscriber Copies*	Total Copies	Total Pounds	Advertising Pounds	Rate	Postage	Totals
1. Del. Unit						\$ .155		
2. SCF						.178		
3. 1 & 2						.215		
4. 3						.229		
5. 4						.263		
6. 5						.316		
7. 6						.371		
8. 7						.438		
9. 8						.495		
10. Subtotals								
* All commingled nonsubscriber copies over the 10% limit must pay regular rates and use Form 3541-R. Noncommingled nonsubscriber copies over the 10% limit are not mailable at Periodicals rates.								
11. Nonadvertising Pounds (Total pounds minus advertising pounds)						x \$.156	=	

Total Pound Rate Postage (Line 10 plus line 11) 12.

Level	Sorted Under DMM <input type="checkbox"/> M200 <input type="checkbox"/> M810 <input type="checkbox"/> M820	Description (DMM E130 and E240 as applicable)	Number of Copies	No. Qualified Addressed Pcs	Rate	Postage	Totals
13. Basic	Nonautomation				\$.251		
14. Basic	Automation	Letters			.189		
15. Basic	Automation	Flats			.205		
16. 3-Digit	Nonautomation				.208		
17. 3-Digit	Automation	Letters			.161		
18. 3-Digit	Automation	Flats			.184		
19. 5-Digit	Nonautomation				.183		
20. 5-Digit	Automation	Letters			.148		
21. 5-Digit	Automation	Flats			.162		
22. Carrier Route	Basic Carrier Route				.113		
23. Carrier Route	High Density	Sequencing Date			.094		
24. Carrier Route	Saturation	Sequencing Date			.076		
25. Subtotals							
26. Nonadvertising Percentage (100 minus adv. %)					x No. Qual. Pcs. (Line 25) x \$.00044	=	
27. Number of Addressed Pieces (not copies) eligible for delivery unit rate					x \$.007	=	
28. Number of Addressed Pieces (not copies) eligible for SCF rate					x \$.004	=	
29. Total Piece Rate Discount (Add lines 26 through 28)							
Total Piece Rate Postage (Line 25 minus line 29)							30.
Outside County Postage (Line 12 plus line 30) — Carry to side 2 (Line 31a)							31.

# Periodicals — Nonprofit Rates

Outside County Postage From Side 1 (Line 31) → 31a.

For Commingled Nonsubscriber Copies Over 10% Limit: Compute additional postage for such copies on page 1 of a Form 3541-R. Enter from that form the total postage (Line 31) onto Line 31b below; attach that form to this form. Sequenced statement number of attached form: \_\_\_\_\_

For Any Part of Mailing at Regular Rates

Total From Attached Form 3541-R (Line 31) 31b.

Postmaster: Report total postage in AIC 135.

Total Outside-County Postage (Add lines 31a and 31b) → 31c.

Line 32 is reserved.

## Foreign (IMM 242.2) (Round off weights to 4 decimal places if necessary)

33. Weight per Copy: Include All Wrappings (Canada) _____ lbs.	34. Weight per Copy: Include All Wrappings (Mexico) _____ lbs.	35. Weight per Copy: Include All Wrappings (Other countries) _____ lbs.
1,000 or more pieces to a single country? <input type="checkbox"/> No <input type="checkbox"/> Yes (If YES, also complete Form 3541-S)		

Rate Category	Total Pounds	Subscriber / Requester Copies	Nonsubscriber / Nonrequester Copies	Total Copies	Rate	Postage
36. Canada						
37. Mexico						
38. Other Countries						
39. Number of pounds (not copies) entered at the NJI and BMC _____ x \$0.25 = _____						
Postmaster: Report total postage in AIC 238. Total Foreign Postage (Add lines 36 through 38 and subtract line 39) → 40.						

## In-County (DMM E270) To calculate postage, use weight from page 1. Periodicals mailings (except Foreign mailings) of different copy weights must be reported on separate statements.

Pound Rate	Entry	Subscriber Copies*	Nonsubscriber Copies*	Total Copies	Total Pounds	Rate	Postage	Totals
41. Delivery Unit						\$.107		
42. All Other						.133		
* Requester and all commingled nonsubscriber copies over 10% limit are not eligible for In-County rates.								
Total In-County Pound Rate Postage (Add lines 41 and 42) → 43.								

Piece Rate (In addition to pound rate)	Level	Description (DMM E230 and E240 as applicable)	Number of Copies	No. Qualified Addressed Pcs	Rate	Postage
44. Basic	Nonautomation				\$.095	
45. Basic	Automation	Letters			.046	
46. Basic	Automation	Flats			.065	
47. 3-Digit	Nonautomation				.088	
48. 3-Digit	Automation	Letters			.044	
49. 3-Digit	Automation	Flats			.062	
50. 5-Digit	Nonautomation				.080	
51. 5-Digit	Automation	Letters			.041	
52. 5-Digit	Automation	Flats			.058	
53. Carrier Route	Basic Carrier Route				.043	
54. Carrier Route	High Density	Sequencing Date			.029	
55. Carrier Route	Saturation	Sequencing Date			.025	
56. Subtotal (Add lines 44 through 55)						
57. Number of addressed pieces (not copies) eligible for delivery unit rate _____ x \$.004 = _____						
Total In-County Piece Rate Postage (Line 56 minus line 57) → 58.						
Postmaster: Report total postage in AIC 224. Total In-County Postage (Add Lines 43 and 58) → 59.						

Postmaster: This total for mailer use only. Report AIC 135, AIC 238, and AIC 224 totals separately as instructed above.

Mailer: Total Postage (Add Lines 31c, 40, and 59)

The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).

☐ For Automation Rates Only: I certify that any letter-size reply cards or envelopes enclosed in the pieces described above bear the correct facing identification mark (FIM) and barcode and meet automation compatibility standards in DMM C810.

☐ For Nonautomation Rates Only: I certify that the ZIP Codes appearing on the pieces described above have been verified and corrected where necessary within 12 months of the date of this mailing using a USPS-approved method (DMM E230).

I hereby certify that all information furnished on this form is accurate and truthful, that this mailing meets all applicable CASS/MASS standards for address and barcode accuracy, and that the material presented qualifies for the rates of postage claimed.

60a. Mailer's Printed Name and Signature	60b. Publisher's Printed Name and Telephone Number (If publisher not same as mailer)	61a. Verifying Employee's Signature	62. Round Stamp (Required)
		61b. Verifying Employee's Name	
		Time	
		AM	
		PM	

Dun & Bradstreet No.

Dun & Bradstreet No.

United States Postal Service

**Postage Statement — Periodicals****Classroom Rates**

Post Office Note Mail Arrival Time

Periodicals mailings (except Foreign mailings) of different copy weights must be reported on separate statements.

Publication Title or News Agent's Name		Mailer's Name, Address, and Telephone Number		Entry Post Office Name, State, and ZIP+4	
CAPS Customer Ref. ID					
Publication No.	Edition Code/Key	Mailing Date	Processing Category (DMM C050)	Number of Containers (Fill in all that apply)	
Issue Date	Issue Frequency	Statement Sequence No.	<input type="checkbox"/> Letters <input type="checkbox"/> Flats <input type="checkbox"/> Auto. Flats (DMM C820) <input type="checkbox"/> Machinable Parcels <input type="checkbox"/> Irregular Parcels	1' MM Trays	2' MM Trays
				2' EMM Trays	Total Ltr. Trays
				Flat Trays	N/A
				Sacks	Pallets
				Other	

Complete only ONE of these two boxed sections:

If this statement is for ALL ISSUES in a calendar month (DMM P200.2)	
Number of Issues This Month	Advertising Percentage in Total Month's Issues %
Weight of One Sheet (DMM P200—round off to 6 decimal places if necessary) lbs.	Combined Weight of One Copy From Each Issue lbs.

If this statement is for ONE ISSUE or ONE EDITION	
Weight per Copy for Issue (DMM P013—round off to 4 decimal places if necessary) lbs.	
Advertising Percentage in This Issue %	
Post Office Computed Weight per Copy (Round off to 4 decimal places if necessary) lbs.	

For Domestic Mailings: All domestic Periodicals mailings pay a pound rate (on the total weight of the mailing) and a piece rate (on the number of addressed pieces in the mailing). For Foreign Mailings: Foreign Periodicals mailings pay only a piece rate (based on the weight of the piece).

**Outside-County**

Zone	Subscriber Copies*	Nonsubscriber Copies*	Total Copies	Total Pounds	Advertising Pounds	Rate	Postage	Totals
1. Del. Unit						\$ .155		
2. SCF						.178		
3. 1 & 2						.215		
4. 3						.229		
5. 4						.263		
6. 5						.316		
7. 6						.371		
8. 7						.438		
9. 8						.495		
10. Subtotals								
* All commingled nonsubscriber copies over the 10% limit must pay regular rates and use Form 3541-R. Noncommingled nonsubscriber copies over the 10% limit are not mailable at Periodicals rates.								
11. Nonadvertising Pounds (Total pounds minus advertising pounds)						x \$ .156	=	
Total Pound Rate Postage (Line 10 plus line 11)								12.
Level	Sorted Under DMM <input type="checkbox"/> M200 <input type="checkbox"/> M810 <input type="checkbox"/> M820	Description (DMM E230 and E240 as applicable)	Number of Copies	No. Qualified Addressed Pcs	Rate	Postage		
13. Basic	Nonautomation				\$ .251			
14. Basic	Automation	Letters			.189			
15. Basic	Automation	Flats			.205			
16. 3-Digit	Nonautomation				.208			
17. 3-Digit	Automation	Letters			.161			
18. 3-Digit	Automation	Flats			.184			
19. 5-Digit	Nonautomation				.183			
20. 5-Digit	Automation	Letters			.148			
21. 5-Digit	Automation	Flats			.162			
22. Carrier Route	Basic Carrier Route				.113			
23. Carrier Route	High Density	Sequencing Date			.094			
24. Carrier Route	Saturation	Sequencing Date			.076			
25. Subtotals								
26. Nonadvertising Percentage (100 minus adv. %) x No. Qual. Pcs. (Line 25) x \$.00044 =								
27. Number of Addressed Pieces (not copies) eligible for delivery unit rate x \$.007 =								
28. Number of Addressed Pieces (not copies) eligible for SCF rate x \$.004 =								
29. Total Piece Rate Discount (Add lines 26 through 28)								
Total Piece Rate Postage (Line 25 minus line 29)								30.
Outside County Postage (Line 12 plus line 30) — Carry to side 2 (Line 31a)								31.

# Periodicals — Classroom Rates

Outside County Postage From Side 1 (Line 31) → 31a.

For Commingled Nonsubscriber Copies Over 10% Limit: Compute additional postage for such copies on page 1 of a Form 3541-R. Enter from that form the total postage (Line 31) onto Line 31b below; attach that form to this form. Sequenced statement number of attached form: \_\_\_\_\_

For Any Part of Mailing at Regular Rates Total From Attached Form 3541-R (Line 31) → 31b.

Postmaster: Report total postage in AIC 135. Total Outside-County Postage (Add lines 31a and 31b) → 31c.

Line 32 is reserved.

## Foreign (IMM 242.2) (Round off weights to 4 decimal places if necessary)

33. Weight per Copy: Include All Wrappings (Canada) _____ lbs.	34. Weight per Copy: Include All Wrappings (Mexico) _____ lbs.	35. Weight per Copy: Include All Wrappings (Other countries) _____ lbs.				
1,000 or more pieces to a single country? <input type="checkbox"/> No <input type="checkbox"/> Yes (If YES, also complete Form 3541-S)						
Rate Category	Total Pounds	Subscriber / Requester Copies	Nonsubscriber / Nonrequester Copies	Total Copies	Rate	Postage
36. Canada						
37. Mexico						
38. Other Countries						
39. Number of pounds (not copies) entered at the NJI and BMC _____ x \$0.25 = _____						
Postmaster: Report total postage in AIC 238. Total Foreign Postage (Add lines 36 through 38 and subtract line 39) → 40.						

## In-County (DMM E270) To calculate postage, use weight from page 1. Periodicals mailings (except Foreign mailings) of different copy weights must be reported on separate statements.

Pound Rate	Entry	Subscriber Copies*	Nonsubscriber Copies*	Total Copies	Total Pounds	Rate	Postage	Totals
	41. Delivery Unit					\$.107		
	42. All Other					.133		
* Requester and all commingled nonsubscriber copies over 10% limit are not eligible for In-County rates.								
Total In-County Pound Rate Postage (Add lines 41 and 42) → 43.								
Piece Rate (In addition to pound rate)	Level	Description (DMM E230 and E240 as applicable)	Number of Copies	No. Qualified Addressed Pcs	Rate	Postage		
Basic	44.	Nonautomation			\$.095			
		Automation	Letters		.046			
	45.	Automation	Flats		.065			
			Nonautomation		.088			
	46.	Automation	Letters		.044			
			Flats		.062			
	47.	Automation	Letters		.041			
			Flats		.058			
	48.	Automation	Letters		.043			
			Flats		.029			
49.	Automation	Letters		.025				
		Flats						
50.	Automation	Letters						
		Flats						
51.	Automation	Letters						
		Flats						
52.	Automation	Letters						
		Flats						
53.	Automation	Letters						
		Flats						
54.	Automation	Letters						
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55.	Automation	Letters						
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56.	Automation	Letters						
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57.	Automation	Letters						
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58.	Automation	Letters						
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59.	Automation	Letters						
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60.	Automation	Letters						
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61.	Automation	Letters						
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62.	Automation	Letters						
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67.	Automation	Letters						
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68.	Automation	Letters						
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69.	Automation	Letters						
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70.	Automation	Letters						
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71.	Automation	Letters						
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73.	Automation	Letters						
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74.	Automation	Letters						
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75.	Automation	Letters						
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76.	Automation	Letters						
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81.	Automation	Letters						
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84.	Automation	Letters						
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88.	Automation	Letters						
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89.	Automation	Letters						
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90.	Automation	Letters						
		Flats						
91.	Automation	Letters						
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92.	Automation	Letters						
		Flats						
93.	Automation	Letters						
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94.	Automation	Letters						
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95.	Automation	Letters						
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96.	Automation	Letters						
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97.	Automation	Letters						
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98.	Automation	Letters						
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100.	Automation	Letters						
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101.	Automation	Letters						
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102.	Automation	Letters						
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103.	Automation	Letters						
		Flats						
104.	Automation	Letters						
		Flats						
105.	Automation	Letters						
		Flats						
106.	Automation	Letters						
		Flats						
107.	Automation	Letters						
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108.	Automation	Letters						
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109.	Automation	Letters						
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110.	Automation	Letters						
		Flats						
111.	Automation	Letters						
		Flats						
112.	Automation	Letters						
		Flats						
113.	Automation	Letters						
		Flats						
114.	Automation	Letters						
		Flats						
115.	Automation	Letters						
		Flats						
116.	Automation	Letters						
		Flats						
117.	Automation	Letters						
		Flats						
118.	Automation	Letters						
		Flats						
119.	Automation	Letters						
		Flats						
120.	Automation	Letters						
		Flats						
121.	Automation	Letters						
		Flats						
122.	Automation	Letters						
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123.	Automation	Letters						
		Flats						
124.	Automation	Letters						
		Flats						
125.	Automation	Letters						
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126.	Automation	Letters						
		Flats						
127.	Automation	Letters						
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128.	Automation	Letters						
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129.	Automation	Letters						
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130.	Automation	Letters						
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131.	Automation	Letters						
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132.	Automation	Letters						
		Flats						
133.	Automation	Letters						
		Flats						
134.	Automation	Letters						
		Flats						
135.	Automation	Letters						
		Flats						
136.	Automation	Letters						
		Flats						
137.	Automation	Letters						
		Flats						
138.	Automation	Letters						
		Flats						
139.	Automation	Letters						
		Flats						
140.	Automation	Letters						
		Flats						
141.	Automation	Letters						
		Flats						
142.	Automation	Letters						
		Flats						
143.	Automation	Letters						
		Flats						
144.	Automation	Letters						
		Flats						
145.	Automation	Letters						
		Flats						
146.	Automation	Letters						
		Flats						
147.	Automation	Letters						
		Flats						
148.	Automation	Letters						
		Flats						
149.	Automation	Letters						
		Flats						
150.	Automation	Letters						
		Flats						
151.	Automation	Letters						
		Flats						
152.	Automation	Letters						

United States Postal Service

## Postage Statement — Regular Standard Mail

Permit Imprint

Post Office Note Mail Arrival Time

Mailing Information	Permit Holder's Name and Address		Telephone		Name and Address of Mailing Agent (If other than permit holder)		Telephone		Name and Address of Organization for Which Mailing Is Prepared (If other than permit holder)			
	CAPS Customer Ref. ID _____		Dun & Bradstreet No. _____		Dun & Bradstreet No. _____		Dun & Bradstreet No. _____		Dun & Bradstreet No. _____			
Mailing Information	Post Office of Mailing				Mailing Date		Federal Agency Cost Code		Statement Sequence No.		Receipt No.	
	Permit No.				Weight of a Single Piece 0 _____ pounds				Total Pieces		Total Weight	
	Prepared Under DMM (Check all that apply)				Processing Category (DMM C050)				Number of Containers (Fill in all that apply)			
	<input type="checkbox"/> M610 (Letters, flats, parcels) <input type="checkbox"/> M610 (Upgradable letters) <input type="checkbox"/> M620 (ECR) <input type="checkbox"/> M810 (Automation letters) <input type="checkbox"/> M820 (Auto. flats)				<input type="checkbox"/> Letters <input type="checkbox"/> Flats <input type="checkbox"/> Automation Flats (DMM C820) <input type="checkbox"/> Machinable Parcels <input type="checkbox"/> Irregular Parcels				1' MM Trays _____ 2' MM Trays _____ 2' EMM Trays _____ Total Ltr. Trays _____ Flat Trays N/A Number of Sacks _____ Number of Pallets _____ Number of Other _____			
Postage Computation (DMM P013)	If Sacking, Based on <input type="checkbox"/> 125 Pcs. <input type="checkbox"/> 15 Lbs. <input type="checkbox"/> Both											
	For Automation Letters and Flats								Total From Part A (On reverse)			
	For Presorted Letters and Nonletters								Total From Part B (On reverse)			
	For Enhanced Carrier Route (ECR) Pieces				Sequencing Date		Total From Part C (On reverse)					
	For All Other Pieces								Total From Part D (On reverse)			
	For Residual Shape Surcharge								No. of Pieces		Fee per Pc. x \$ .10	
Certification	Postmaster: Report total postage in AIC 130.											
	Total Postage Due (Add lines above) →											
	USPS: Additional Postage Payment (State reason. Add amount to line above) \$ →											
Certification	The signature of a mailer certifies that it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the mailer, and that both the mailer and the agent will be liable for and agree to pay any deficiencies.) The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).											
	<input type="checkbox"/> For Enclosed Reply Pieces (Automation rates only): I certify that any letter-size cards or envelopes enclosed in the pieces described above bear the correct facing identification mark (FIM) and barcode and meet automation compatibility standards in DMM C810.											
	<input type="checkbox"/> For ZIP Codes (Presorted rates only): I certify that the ZIP Codes appearing on the pieces described above have been verified and corrected where necessary within 12 months of the date of this mailing using a USPS-approved method.											
	I hereby certify that all information furnished on this form is accurate and truthful, that this mailing meets all applicable CASS/MASS standards for address and barcode accuracy, that the material presented qualifies for the rates of postage claimed, and that this mailing does not contain any hazardous materials prohibited by postal regulations.											
PS Use Only	Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)								Telephone			
	Weight of a Single Piece 0 _____ pounds				Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No							
	Total Pieces		Total Weight		If "Yes," Reason							
	Total Postage				Round Stamp (Required)							
	Check One (If applicable) <input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled				Date Mailer Notified		Contact		By (Initials)			
	I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of required annual fee.											
Verifying Employee's Signature				Verifying Employee's Name				Time		AM PM		

# Regular Standard Mail — Permit Imprint

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>A</b>	<b>Automation Rates — Letters and Flats 3.3087 Oz. (.2068 Lb.) or Less</b>			
None	5-Digit Letter	.160 x	pcs. = \$	
	3-Digit Letter	.176 x	pcs. = \$	
	Basic Letter	.183 x	pcs. = \$	
	3/5 Flat	.203 x	pcs. = \$	
	Basic Flat	.245 x	pcs. = \$	
DBMC	5-Digit Letter	.144 x	pcs. = \$	
	3-Digit Letter	.160 x	pcs. = \$	
	Basic Letter	.167 x	pcs. = \$	
	3/5 Flat	.187 x	pcs. = \$	
	Basic Flat	.229 x	pcs. = \$	
DSCF	5-Digit Letter	.139 x	pcs. = \$	
	3-Digit Letter	.155 x	pcs. = \$	
	Basic Letter	.162 x	pcs. = \$	
	3/5 Flat	.182 x	pcs. = \$	
	Basic Flat	.224 x	pcs. = \$	

Total — Part A (Carry to front of form) \$

<b>C</b>	<b>ECR Pieces 3.3062 Oz. (.2066 Lb.) or Less</b>			
None	Saturation Letter	.130 x	pcs. = \$	
	Saturation Nonletter	.140 x	pcs. = \$	
	High Density Letter	.139 x	pcs. = \$	
	High Density Nonletter	.151 x	pcs. = \$	
	Basic Letter	.162 x	pcs. = \$	
	Basic Nonletter	.162 x	pcs. = \$	
	Basic Automation Letter*	.156 x	pcs. = \$	
DBMC	Saturation Letter	.114 x	pcs. = \$	
	Saturation Nonletter	.124 x	pcs. = \$	
	High Density Letter	.123 x	pcs. = \$	
	High Density Nonletter	.135 x	pcs. = \$	
	Basic Letter	.146 x	pcs. = \$	
	Basic Nonletter	.146 x	pcs. = \$	
	Basic Automation Letter*	.140 x	pcs. = \$	
DSCF	Saturation Letter	.109 x	pcs. = \$	
	Saturation Nonletter	.119 x	pcs. = \$	
	High Density Letter	.118 x	pcs. = \$	
	High Density Nonletter	.130 x	pcs. = \$	
	Basic Letter	.141 x	pcs. = \$	
	Basic Nonletter	.141 x	pcs. = \$	
	Basic Automation Letter*	.135 x	pcs. = \$	
DDU	Saturation Letter	.104 x	pcs. = \$	
	Saturation Nonletter	.114 x	pcs. = \$	
	High Density Letter	.113 x	pcs. = \$	
	High Density Nonletter	.125 x	pcs. = \$	
	Basic Letter	.136 x	pcs. = \$	
	Basic Nonletter	.136 x	pcs. = \$	
	Basic Automation Letter*	.130 x	pcs. = \$	

\*Automation-compatible letters (DMM E640.2)

Total — Part C (Carry to front of form) \$

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>B</b>	<b>Presorted Pieces 3.3087 Oz. (.2068 Lb.) or Less</b>			
None	3/5 Letter	.207 x	pcs. = \$	
	3/5 Nonletter	.240 x	pcs. = \$	
	Basic Letter	.235 x	pcs. = \$	
	Basic Nonletter	.304 x	pcs. = \$	
DBMC	3/5 Letter	.191 x	pcs. = \$	
	3/5 Nonletter	.224 x	pcs. = \$	
	Basic Letter	.219 x	pcs. = \$	
	Basic Nonletter	.288 x	pcs. = \$	
DSCF	3/5 Letter	.186 x	pcs. = \$	
	3/5 Nonletter	.219 x	pcs. = \$	
	Basic Letter	.214 x	pcs. = \$	
	Basic Nonletter	.283 x	pcs. = \$	

Total — Part B (Carry to front of form) \$

<b>D</b>	<input type="checkbox"/> Check <input type="checkbox"/> Pieces More Than 3.3087 Oz. (.2068 Lb.) <input type="checkbox"/> One: <input type="checkbox"/> ECR Pieces More Than 3.3062 Oz. (.2066 Lb.)			
None	Saturation ECR	.003 x	pcs. = \$	
	plus	.663 x	lbs. = \$	
	High Density ECR	.014 x	pcs. = \$	
	plus	.663 x	lbs. = \$	
	Basic ECR	.025 x	pcs. = \$	
	plus	.663 x	lbs. = \$	
	3/5 Automation*	.063 x	pcs. = \$	
	plus	.677 x	lbs. = \$	
	3/5 Presorted	.100 x	pcs. = \$	
	plus	.677 x	lbs. = \$	
	Basic Automation*	.105 x	pcs. = \$	
	plus	.677 x	lbs. = \$	
DBMC	Basic Presorted	.164 x	pcs. = \$	
	plus	.677 x	lbs. = \$	
	Saturation ECR	.003 x	pcs. = \$	
	plus	.584 x	lbs. = \$	
	High Density ECR	.014 x	pcs. = \$	
	plus	.584 x	lbs. = \$	
	Basic ECR	.025 x	pcs. = \$	
	plus	.584 x	lbs. = \$	
	3/5 Automation*	.063 x	pcs. = \$	
	plus	.598 x	lbs. = \$	
	3/5 Presorted	.100 x	pcs. = \$	
	plus	.598 x	lbs. = \$	
DSCF	Basic Automation*	.105 x	pcs. = \$	
	plus	.598 x	lbs. = \$	
	Basic Presorted	.164 x	pcs. = \$	
	plus	.598 x	lbs. = \$	
	Saturation ECR	.003 x	pcs. = \$	
	plus	.563 x	lbs. = \$	
	High Density ECR	.014 x	pcs. = \$	
	plus	.563 x	lbs. = \$	
	Basic ECR	.025 x	pcs. = \$	
	plus	.563 x	lbs. = \$	
	3/5 Automation*	.063 x	pcs. = \$	
	plus	.577 x	lbs. = \$	
DDU	3/5 Presorted	.100 x	pcs. = \$	
	plus	.577 x	lbs. = \$	
	Basic Automation*	.105 x	pcs. = \$	
	plus	.577 x	lbs. = \$	
	Basic Presorted	.164 x	pcs. = \$	
	plus	.577 x	lbs. = \$	
	Saturation ECR	.003 x	pcs. = \$	
	plus	.537 x	lbs. = \$	
	High Density ECR	.014 x	pcs. = \$	
	plus	.537 x	lbs. = \$	
	Basic ECR	.025 x	pcs. = \$	
	plus	.537 x	lbs. = \$	

\*Automation-compatible flats only (DMM CB20)

Total — Part D (Carry to front of form) \$



United States Postal Service

## Postage Statement — Regular Standard Mail

Postage Affixed

Post Office Note Mail Arrival Time

Mailer Information	Permit Holder's Name and Address		Telephone	Name and Address of Mailing Agent (If other than permit holder)		Telephone	Name and Address of Individual or Organization for Which Mailing Is Prepared (If other than permit holder)	
	Dun & Bradstreet No.			Dun & Bradstreet No.			Dun & Bradstreet No.	
Mailing Information	Post Office of Mailing		Mailing Date		Statement Sequence No.		Receipt No.	
	Permit No.	<input type="checkbox"/> Meter Postage <input type="checkbox"/> Precanceled Stamps	Weight of a Single Piece 0 pounds		Total Pieces		Total Weight	
Mailing Information	Prepared Under DMM (Check all that apply)		Processing Category (DMM C050)		Number of Containers (Fill in all that apply)			
	<input type="checkbox"/> M610 (Letters, flats, parcels) <input type="checkbox"/> M610 (Upgradable letters) <input type="checkbox"/> M620 (ECR) <input type="checkbox"/> M810 (Automation letters) <input type="checkbox"/> M820 (Auto. flats)		<input type="checkbox"/> Letters <input type="checkbox"/> Flats <input type="checkbox"/> Automation Flats (DMM C820) <input type="checkbox"/> Machinable Parcels <input type="checkbox"/> Irregular Parcels		1' MM Trays _____ 2' MM Trays _____ 2' EMM Trays _____ Total Ltr. Trays _____ Flat Trays N/A Number of Sacks _____ Number of Pallets _____ Number of Other _____			
Postage C.	If Sacking, Based on		<input type="checkbox"/> 125 Pcs. <input type="checkbox"/> 15 Lbs. <input type="checkbox"/> Both					
	For Automation Letters and Flats		Total From Part A (On reverse)					
Postage C.	For Presorted Letters and Nonletters		Total From Part B (On reverse)					
	For Enhanced Carrier Route (ECR) Pieces		Sequencing Date	Total From Part C (On reverse)				
Postage C.	For All Other Pieces		Total From Part D (On reverse)					
	For Residual Shape Surcharge		Number of Pieces		Fee per Piece			
Postage C.	is additional rate paid by permit imprint? (Form 3602-R required)		Total Postage (Add lines above) →					
	<input type="checkbox"/> Yes <input type="checkbox"/> No		Rate at Which Postage Affixed (Check one)					
Postage C.	<input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither (DMM P600)		_____ pcs. x \$ _____ = Postage Affixed →					
	Total Postage Due (Subtract postage affixed from total postage) →							
Postage C.	USPS: Additional Postage Payment (State reason. Add amount to line above)		\$ _____ →					
Certification	The signature of a mailer certifies that it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the mailer, and that both the mailer and the agent will be liable for and agree to pay any deficiencies.) The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).							
	<input type="checkbox"/> For Enclosed Reply Pieces (Automation rates only): I certify that any letter-size cards or envelopes enclosed in the pieces described above bear the correct facing identification mark (FIM) and barcode and meet automation compatibility standards in DMM C810. <input type="checkbox"/> For ZIP Codes (Nonautomation rates only): I certify that the ZIP Codes appearing on the pieces described above have been verified and corrected where necessary within 12 months of the date of this mailing using a USPS-approved method. I hereby certify that all information furnished on this form is accurate and truthful, that this mailing meets all applicable CASS/MASS standards for address and barcode accuracy, that the material presented qualifies for the rates of postage claimed, and that this mailing does not contain any hazardous materials prohibited by postal regulations.							
Certification	Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)						Telephone	
Use Only	Weight of a Single Piece		Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No					
	0 _____ pounds		If "Yes," Reason					
Use Only	Check One (If applicable)							
	<input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled							
Use Only	I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of required annual fee.		Date Mailer Notified		Contact		By (Initials)	
Use Only	Verifying Employee's Signature		Verifying Employee's Name		Time		AM PM	
Use Only							Round Stamp (Required)	

# Regular Standard Mail — Postage Affixed

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>A</b>	<b>Automation Rates — Letters and Flats 3.3087 Oz. (.2068 Lb.) or Less</b>			
None	5-Digit Letter	.160 x	pcs. = \$	
	3-Digit Letter	.176 x	pcs. = \$	
	Basic Letter	.183 x	pcs. = \$	
	3/5 Flat	.203 x	pcs. = \$	
	Basic Flat	.245 x	pcs. = \$	
DBMC	5-Digit Letter	.144 x	pcs. = \$	
	3-Digit Letter	.160 x	pcs. = \$	
	Basic Letter	.167 x	pcs. = \$	
	3/5 Flat	.187 x	pcs. = \$	
	Basic Flat	.229 x	pcs. = \$	
DSCF	5-Digit Letter	.139 x	pcs. = \$	
	3-Digit Letter	.155 x	pcs. = \$	
	Basic Letter	.162 x	pcs. = \$	
	3/5 Flat	.182 x	pcs. = \$	
	Basic Flat	.224 x	pcs. = \$	

Total — Part A (Carry to front of form) \$

<b>C</b>	<b>ECR Pieces 3.3062 Oz. (.2066 Lb.) or Less</b>			
None	Saturation Letter	.130 x	pcs. = \$	
	Saturation Nonletter	.140 x	pcs. = \$	
	High Density Letter	.139 x	pcs. = \$	
	High Density Nonletter	.151 x	pcs. = \$	
	Basic Letter	.162 x	pcs. = \$	
	Basic Nonletter	.162 x	pcs. = \$	
	Basic Automation Letter*	.156 x	pcs. = \$	
DBMC	Saturation Letter	.114 x	pcs. = \$	
	Saturation Nonletter	.124 x	pcs. = \$	
	High Density Letter	.123 x	pcs. = \$	
	High Density Nonletter	.135 x	pcs. = \$	
	Basic Letter	.146 x	pcs. = \$	
	Basic Nonletter	.146 x	pcs. = \$	
	Basic Automation Letter*	.140 x	pcs. = \$	
DSCF	Saturation Letter	.109 x	pcs. = \$	
	Saturation Nonletter	.119 x	pcs. = \$	
	High Density Letter	.118 x	pcs. = \$	
	High Density Nonletter	.130 x	pcs. = \$	
	Basic Letter	.141 x	pcs. = \$	
	Basic Nonletter	.141 x	pcs. = \$	
	Basic Automation Letter*	.135 x	pcs. = \$	
DDU	Saturation Letter	.104 x	pcs. = \$	
	Saturation Nonletter	.114 x	pcs. = \$	
	High Density Letter	.113 x	pcs. = \$	
	High Density Nonletter	.125 x	pcs. = \$	
	Basic Letter	.136 x	pcs. = \$	
	Basic Nonletter	.136 x	pcs. = \$	
	Basic Automation Letter*	.130 x	pcs. = \$	

\*Automation-compatible letters only (DMM E640.2)

Total — Part C (Carry to front of form) \$

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>B</b>	<b>Presorted Pieces 3.3087 Oz. (.2068 Lb.) or Less</b>			
None	3/5 Letter	.207 x	pcs. = \$	
	3/5 Nonletter	.240 x	pcs. = \$	
	Basic Letter	.235 x	pcs. = \$	
	Basic Nonletter	.304 x	pcs. = \$	
DBMC	3/5 Letter	.191 x	pcs. = \$	
	3/5 Nonletter	.224 x	pcs. = \$	
	Basic Letter	.219 x	pcs. = \$	
	Basic Nonletter	.288 x	pcs. = \$	
DSCF	3/5 Letter	.186 x	pcs. = \$	
	3/5 Nonletter	.219 x	pcs. = \$	
	Basic Letter	.214 x	pcs. = \$	
	Basic Nonletter	.283 x	pcs. = \$	

Total — Part B (Carry to front of form) \$

**D** Check ☐ Pieces More Than 3.3087 Oz. (.2068 Lb.)  
One: ☐ ECR Pieces More Than 3.3062 Oz. (.2066 Lb.)

As described in DMM E612, compute and enter the rate for each piece in the "Rate per Piece" column.

None	Saturation ECR	\$ x	pcs. = \$	
	High Density ECR	\$ x	pcs. = \$	
	Basic ECR	\$ x	pcs. = \$	
	3/5 Automation*	\$ x	pcs. = \$	
	3/5 Presorted	\$ x	pcs. = \$	
	Basic Automation*	\$ x	pcs. = \$	
	Basic Presorted	\$ x	pcs. = \$	
DBMC	Saturation ECR	\$ x	pcs. = \$	
	High Density ECR	\$ x	pcs. = \$	
	Basic ECR	\$ x	pcs. = \$	
	3/5 Automation*	\$ x	pcs. = \$	
	3/5 Presorted	\$ x	pcs. = \$	
	Basic Automation*	\$ x	pcs. = \$	
	Basic Presorted	\$ x	pcs. = \$	
DSCF	Saturation ECR	\$ x	pcs. = \$	
	High Density ECR	\$ x	pcs. = \$	
	Basic ECR	\$ x	pcs. = \$	
	3/5 Automation*	\$ x	pcs. = \$	
	3/5 Presorted	\$ x	pcs. = \$	
	Basic Automation*	\$ x	pcs. = \$	
	Basic Presorted	\$ x	pcs. = \$	
DDU	Saturation ECR	\$ x	pcs. = \$	
	High Density ECR	\$ x	pcs. = \$	
	Basic ECR	\$ x	pcs. = \$	

\*Automation-compatible flats only (DMM C820)

Total — Part D (Carry to front of form) \$

United States Postal Service

**Consolidated Postage Statement — Regular Standard Mail****Permit Imprint****Post Office Note Mail Arrival Time**

<b>Mailer Info</b>	Permit Holder's Name and Address		Telephone Number		Name and Address of Mailing Agent (If other than permit holder)		Telephone Number		Name and Address of Individual or Organization for Which Mailing Is Prepared (If other than permit holder)			
	CAPS Customer Ref. ID		Dun & Bradstreet No.		Dun & Bradstreet No.		Dun & Bradstreet No.					
<b>Mailing Info</b>	Origin Post Office		Mailing Date		Permit Number		Federal Agency Cost Code		Mailing Cycle or Job Number and Description			
	Prepared Under DMM (Check all that apply)				Processing Category (DMM C050)				Container Quantities (Fill in all that apply)			
	<input type="checkbox"/> M610 (Letters, flats, parcels) <input type="checkbox"/> M610 (Upgradable letters) <input type="checkbox"/> M620 (ECR) <input type="checkbox"/> M810 (Automation letters) <input type="checkbox"/> M820 (Auto. flats)				<input type="checkbox"/> Letters <input type="checkbox"/> Flats <input type="checkbox"/> Automation-Compatible Flats (DMM C820) <input type="checkbox"/> Machinable Parcels <input type="checkbox"/> Irregular Parcels				1" MM Trays _____    2" MM Trays _____    2" EMM Trays _____    Total Ltr. Trays _____ Flat Trays <u>N/A</u> Number of Sacks _____    Number of Pallets _____    Number of Other _____			
	If Sacking, Based on: <input type="checkbox"/> 125 Pcs. <input type="checkbox"/> 15 Lbs. <input type="checkbox"/> Both								Sequencing Date (ECR only)			
Enter the following information for each mailing represented in this consolidation. If more than three mailings are represented or more space is needed, attach a printout containing the same information in the same format. Enter presort and entry discount codes from reverse.												
<b>Postage Computation (DMM P013)</b>	Postage Stmt. Sequence No.	PO & ZIP of Entry	Piece Weight	Entry Disc.	Presort Level	Rate	Number of Pieces/Lbs.	\$ Charge	Number of Containers	Number of Pieces	Total Weight	Postage
The total of all pieces in each rate category must be entered on the reverse side.		Total No. Statements		For Attached Printouts or Postage Statements				Total From Attachments				
For Residual Shape Surcharge								Number of Pieces		Fee per Piece		
										x \$ .10 =		
Postmaster: Report total postage in AIC 130.								<b>Total Postage Due (Add lines above) →</b>				
USPS: Additional Postage Payment (State reason. Add amount to line above)								\$		→		
<b>Certification</b>	The signature of a mailer certifies that it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the mailer, and that both the mailer and the agent will be liable for and agree to pay any deficiencies.)											
	The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).											
	<input type="checkbox"/> For Enclosed Reply Pieces (Automation rates only): I certify that any letter-size cards or envelopes enclosed in the pieces described above bear the correct facing identification mark (FIM) and barcode and meet automation compatibility standards in DMM C810.											
	<input type="checkbox"/> For ZIP Codes (Presorted rates only): I certify that the ZIP Codes appearing on the pieces described above have been verified and corrected where necessary within 12 months of the date of this mailing using a USPS-approved method.											
I hereby certify that all information furnished on this form is accurate and truthful, that this mailing meets all applicable CASS/MASS standards for address and barcode accuracy, that the material presented qualifies for the rates of postage claimed, and that this mailing does not contain any hazardous materials prohibited by postal regulations.												
Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)										Telephone		
<b>Use Only</b>	Weight of a Single Piece		Total Postage		Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No							
	0 _____ lbs.				If "Yes," Reason							
	Total Pieces		Total Weight									
	Check One (If applicable)		Date Mailing Notified		Contact		By (Initials)		Round Stamp (Required)			
	<input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled											
<b>USP</b>	I CERTIFY that these mailings have been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of required annual fee.											
	Verifying Employee's Signature				Verifying Employee's Name				Time		AM PM	

# Regular Standard Mail — Permit Imprint

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>A</b> Automation Rates — Letters and Flats 3.3087 Oz. (.2068 Lb.) or Less				
None	A1 5-Digit Letter	.160 x	pcs. = \$	
	A2 3-Digit Letter	.176 x	pcs. = \$	
	A3 Basic Letter	.183 x	pcs. = \$	
	A4 3/5 Flat	.203 x	pcs. = \$	
	A5 Basic Flat	.245 x	pcs. = \$	
DBMC	A6 5-Digit Letter	.144 x	pcs. = \$	
	A7 3-Digit Letter	.160 x	pcs. = \$	
	A8 Basic Letter	.167 x	pcs. = \$	
	A9 3/5 Flat	.187 x	pcs. = \$	
	A10 Basic Flat	.229 x	pcs. = \$	
DSCF	A11 5-Digit Letter	.139 x	pcs. = \$	
	A12 3-Digit Letter	.155 x	pcs. = \$	
	A13 Basic Letter	.162 x	pcs. = \$	
	A14 3/5 Flat	.182 x	pcs. = \$	
	A15 Basic Flat	.224 x	pcs. = \$	

Total — Part A (Carry to front of form) \$

<b>C</b> ECR Pieces 3.3062 Oz. (.2066 Lb.) or Less				
None	C1 Saturation Letter	.130 x	pcs. = \$	
	C2 Saturation Nonletter	.140 x	pcs. = \$	
	C3 High Density Letter	.139 x	pcs. = \$	
	C4 High Density Nonletter	.151 x	pcs. = \$	
	C5 Basic Letter	.162 x	pcs. = \$	
	C6 Basic Nonletter	.162 x	pcs. = \$	
	C7 Basic Automation Letter*	.156 x	pcs. = \$	
DBMC	C8 Saturation Letter	.114 x	pcs. = \$	
	C9 Saturation Nonletter	.124 x	pcs. = \$	
	C10 High Density Letter	.123 x	pcs. = \$	
	C11 High Density Nonletter	.135 x	pcs. = \$	
	C12 Basic Letter	.146 x	pcs. = \$	
	C13 Basic Nonletter	.146 x	pcs. = \$	
	C14 Basic Automation Letter*	.140 x	pcs. = \$	
DSCF	C15 Saturation Letter	.109 x	pcs. = \$	
	C16 Saturation Nonletter	.119 x	pcs. = \$	
	C17 High Density Letter	.118 x	pcs. = \$	
	C18 High Density Nonletter	.130 x	pcs. = \$	
	C19 Basic Letter	.141 x	pcs. = \$	
	C20 Basic Nonletter	.141 x	pcs. = \$	
	C21 Basic Automation Letter*	.135 x	pcs. = \$	
DDU	C22 Saturation Letter	.104 x	pcs. = \$	
	C23 Saturation Nonletter	.114 x	pcs. = \$	
	C24 High Density Letter	.113 x	pcs. = \$	
	C25 High Density Nonletter	.125 x	pcs. = \$	
	C26 Basic Letter	.136 x	pcs. = \$	
	C27 Basic Nonletter	.136 x	pcs. = \$	
	C28 Basic Automation Letter*	.130 x	pcs. = \$	

\*Automation-compatible letters (DMM E640.2)

Total — Part C (Carry to front of form) \$

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>B</b> Presorted Pieces 3.3087 Oz. (.2068 Lb.) or Less				
None	B1 3/5 Letter	.207 x	pcs. = \$	
	B2 3/5 Nonletter	.240 x	pcs. = \$	
	B3 Basic Letter	.235 x	pcs. = \$	
	B4 Basic Nonletter	.304 x	pcs. = \$	
DBMC	B5 3/5 Letter	.191 x	pcs. = \$	
	B6 3/5 Nonletter	.224 x	pcs. = \$	
	B7 Basic Letter	.219 x	pcs. = \$	
	B8 Basic Nonletter	.288 x	pcs. = \$	
DSCF	B9 3/5 Letter	.186 x	pcs. = \$	
	B10 3/5 Nonletter	.219 x	pcs. = \$	
	B11 Basic Letter	.214 x	pcs. = \$	
	B12 Basic Nonletter	.283 x	pcs. = \$	

Total — Part B (Carry to front of form) \$

<b>D</b> Check <input type="checkbox"/> Pieces More Than 3.3087 Oz. (.2068 Lb.) One: <input type="checkbox"/> ECR Pieces More Than 3.3062 Oz. (.2066 Lb.)				
None	D1 Saturation ECR plus	.003 x .663 x	pcs. = \$ lbs. = \$	
	D2 High Density ECR plus	.014 x .663 x	pcs. = \$ lbs. = \$	
	D3 Basic ECR plus	.025 x .663 x	pcs. = \$ lbs. = \$	
	D4 3/5 Automation* plus	.063 x .677 x	pcs. = \$ lbs. = \$	
	D5 3/5 Presorted plus	.100 x .677 x	pcs. = \$ lbs. = \$	
	D6 Basic Automation* plus	.105 x .677 x	pcs. = \$ lbs. = \$	
	D7 Basic Presorted plus	.164 x .677 x	pcs. = \$ lbs. = \$	
DBMC	D8 Saturation ECR plus	.003 x .584 x	pcs. = \$ lbs. = \$	
	D9 High Density ECR plus	.014 x .584 x	pcs. = \$ lbs. = \$	
	D10 Basic ECR plus	.025 x .584 x	pcs. = \$ lbs. = \$	
	D11 3/5 Automation* plus	.063 x .598 x	pcs. = \$ lbs. = \$	
	D12 3/5 Presorted plus	.100 x .598 x	pcs. = \$ lbs. = \$	
	D13 Basic Automation* plus	.105 x .598 x	pcs. = \$ lbs. = \$	
	D14 Basic Presorted plus	.164 x .598 x	pcs. = \$ lbs. = \$	
DSCF	D15 Saturation ECR plus	.003 x .563 x	pcs. = \$ lbs. = \$	
	D16 High Density ECR plus	.014 x .563 x	pcs. = \$ lbs. = \$	
	D17 Basic ECR plus	.025 x .563 x	pcs. = \$ lbs. = \$	
	D18 3/5 Automation* plus	.063 x .577 x	pcs. = \$ lbs. = \$	
	D19 3/5 Presorted plus	.100 x .577 x	pcs. = \$ lbs. = \$	
	D20 Basic Automation* plus	.105 x .577 x	pcs. = \$ lbs. = \$	
	D21 Basic Presorted plus	.164 x .577 x	pcs. = \$ lbs. = \$	
DDU	D22 Saturation ECR plus	.003 x .537 x	pcs. = \$ lbs. = \$	
	D23 High Density ECR plus	.014 x .537 x	pcs. = \$ lbs. = \$	
	D24 Basic ECR plus	.025 x .537 x	pcs. = \$ lbs. = \$	

\*Automation-compatible flats only (DMM C820)

Total — Part D (Carry to front of form) \$

United States Postal Service

**Consolidated Postage Statement — Regular Standard Mail**  
**Postage Affixed**

Post Office Note Mail Arrival Time

<b>Mailer Info</b>	Permit Holder's Name and Address		Telephone Number		Name and Address of Mailing Agent (If other than permit holder)		Telephone Number		Name and Address of Individual or Organization for Which Mailing Is Prepared (If other than permit holder)			
	Dun & Bradstreet No.				Dun & Bradstreet No.				Dun & Bradstreet No.			
<b>Mailing Info</b>	Origin Post Office				Mailing Date		Permit Number <input type="checkbox"/> Meter <input type="checkbox"/> Stamps		Mailing Cycle or Job Number and Description			
	Prepared Under DMM (Check All that apply)				Processing Category (DMM C050)				Number of Containers (Fill in all that apply)			
	<input type="checkbox"/> M610 (Ltrs., flats, parcels) <input type="checkbox"/> M610 (Upgr. ltrs.) <input type="checkbox"/> M620 (ECR) <input type="checkbox"/> M820 (Auto. flats) <input type="checkbox"/> M810 (Auto. letters)				<input type="checkbox"/> Letters <input type="checkbox"/> Flats <input type="checkbox"/> Automation-Compatible Flats (DMM C820) <input type="checkbox"/> Machinable Parcels <input type="checkbox"/> Irregular Parcels				1' MM Trays _____ 2' MM Trays _____ 2' EMM Trays _____ Total Lr. Trays _____ Flat Trays <u>N/A</u> Number of Sacks _____ Number of Pallets _____ Number of Other _____			
	If Sacking, Based on: <input type="checkbox"/> 125 Pcs. <input type="checkbox"/> 15 Lbs. <input type="checkbox"/> Both								Sequencing Date (ECR only)			
<b>Postage Imputation (DMM P013)</b>	Enter the following information for each mailing represented in this consolidation. If more than three mailings are represented or more space is needed, attach a printout containing the same information in the same format. Enter presort and entry discount codes from reverse.											
	Postage Stmt. Sequence No.	PO & ZIP of Entry	Piece Weight	Entry Disc.	Presort Level	Rate	Number of Pieces/Lbs.	\$ Charge	Number of Containers	Number of Pieces	Total Weight	Postage
Totals of all rate categories must be entered on the reverse side.		Total No. Statements		For Attached Printouts or Postage Statements				Total From Attachments				
For Residual Shape Surcharge								No. of Pcs. x \$ .10				
Rate at Which Postage Affixed (Check one) (DMM P100)								Total Postage (Add lines above) →				
<input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither								_____ pcs. x \$ _____ = Postage Affixed →				
Total Postage Due (Subtract postage affixed from total postage) →												
USPS: Additional Postage Payment (State reason. Add amount to line above)								\$ _____ →				
<b>Certification</b>	The signature of a mailer certifies that it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the mailer, and that both the mailer and the agent will be liable for and agree to pay any deficiencies.)  The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).											
	<input type="checkbox"/> For Enclosed Reply Pieces (Automation rates only): I certify that any letter-size cards or envelopes enclosed in the pieces described above bear the correct facing identification mark (FIM) and barcode and meet automation compatibility standards in DMM C810.											
	<input type="checkbox"/> For ZIP Codes (Presorted rates only): I certify that the ZIP Codes appearing on the pieces described above have been verified and corrected where necessary within 12 months of the date of this mailing using a USPS-approved method.											
	I hereby certify that all information furnished on this form is accurate and truthful, that this mailing meets all applicable CASS/MASS standards for address and barcode accuracy, that the material presented qualifies for the rates of postage claimed, and that this mailing does not contain any hazardous materials prohibited by postal regulations.											
Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)								Telephone				
<b>Use Only</b>	Single-Piece Weight				Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No							
	0 _____ lbs.				If "Yes," Reason							
	Check One (If applicable)				Round Stamp (Required)							
	<input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled											
	I CERTIFY that these mailings have been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of required annual fee.				Date Mailing Notified		Contact		By (Initials)			
Verifying Employee's Signature				Verifying Employee's Name				Time		AM PM		

# Regular Standard Mail — Postage Affixed

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>A</b>	<b>Automation Rates — Letters and Flats 3.3087 Oz. (.2068 Lb.) or Less</b>			
None	A1 5-Digit Letter	.160 x	pcs. = \$	
	A2 3-Digit Letter	.176 x	pcs. = \$	
	A3 Basic Letter	.183 x	pcs. = \$	
	A4 3/5 Flat	.203 x	pcs. = \$	
	A5 Basic Flat	.245 x	pcs. = \$	
DBMC	A6 5-Digit Letter	.144 x	pcs. = \$	
	A7 3-Digit Letter	.160 x	pcs. = \$	
	A8 Basic Letter	.167 x	pcs. = \$	
	A9 3/5 Flat	.187 x	pcs. = \$	
	A10 Basic Flat	.229 x	pcs. = \$	
DSCF	A11 5-Digit Letter	.139 x	pcs. = \$	
	A12 3-Digit Letter	.155 x	pcs. = \$	
	A13 Basic Letter	.162 x	pcs. = \$	
	A14 3/5 Flat	.182 x	pcs. = \$	
	A15 Basic Flat	.224 x	pcs. = \$	

Total — Part A (Carry to front of form) \$

<b>C</b>	<b>ECR Pieces 3.3062 Oz. (.2066 Lb.) or Less</b>			
None	C1 Saturation Letter	.130 x	pcs. = \$	
	C2 Saturation Nonletter	.140 x	pcs. = \$	
	C3 High Density Letter	.139 x	pcs. = \$	
	C4 High Density Nonletter	.151 x	pcs. = \$	
	C5 Basic Letter	.162 x	pcs. = \$	
	C6 Basic Nonletter	.162 x	pcs. = \$	
	C7 Basic Automation Letter*	.156 x	pcs. = \$	
DBMC	C8 Saturation Letter	.114 x	pcs. = \$	
	C9 Saturation Nonletter	.124 x	pcs. = \$	
	C10 High Density Letter	.123 x	pcs. = \$	
	C11 High Density Nonletter	.135 x	pcs. = \$	
	C12 Basic Letter	.146 x	pcs. = \$	
	C13 Basic Nonletter	.146 x	pcs. = \$	
	C14 Basic Automation Letter*	.140 x	pcs. = \$	
DSCF	C15 Saturation Letter	.109 x	pcs. = \$	
	C16 Saturation Nonletter	.119 x	pcs. = \$	
	C17 High Density Letter	.118 x	pcs. = \$	
	C18 High Density Nonletter	.130 x	pcs. = \$	
	C19 Basic Letter	.141 x	pcs. = \$	
	C20 Basic Nonletter	.141 x	pcs. = \$	
	C21 Basic Automation Letter*	.135 x	pcs. = \$	
DDU	C22 Saturation Letter	.104 x	pcs. = \$	
	C23 Saturation Nonletter	.114 x	pcs. = \$	
	C24 High Density Letter	.113 x	pcs. = \$	
	C25 High Density Nonletter	.125 x	pcs. = \$	
	C26 Basic Letter	.136 x	pcs. = \$	
	C27 Basic Nonletter	.136 x	pcs. = \$	
	C28 Basic Automation Letter*	.130 x	pcs. = \$	

\*Automation-compatible letters (DMM E640.2)

Total — Part C (Carry to front of form) \$

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>B</b>	<b>Nonautomation Pieces 3.3087 Oz. (.2068 Lb.) or Less</b>			
None	B1 3/5 Letter	.207 x	pcs. = \$	
	B2 3/5 Nonletter	.240 x	pcs. = \$	
	B3 Basic Letter	.235 x	pcs. = \$	
	B4 Basic Nonletter	.304 x	pcs. = \$	
DBMC	B5 3/5 Letter	.191 x	pcs. = \$	
	B6 3/5 Nonletter	.224 x	pcs. = \$	
	B7 Basic Letter	.219 x	pcs. = \$	
	B8 Basic Nonletter	.288 x	pcs. = \$	
DSCF	B9 3/5 Letter	.186 x	pcs. = \$	
	B10 3/5 Nonletter	.219 x	pcs. = \$	
	B11 Basic Letter	.214 x	pcs. = \$	
	B12 Basic Nonletter	.283 x	pcs. = \$	

Total — Part B (Carry to front of form) \$

**D** Check ☐ Pieces More Than 3.3087 Oz. (.2068 Lb.)  
One: ☐ ECR Pieces More Than 3.3062 Oz. (.2066 Lb.)

As described in DMM E612, compute and enter the rate for each piece in the "Rate per Piece" column.

None	D1 Saturation ECR	\$ x	pcs. = \$	
	D2 High Density ECR	\$ x	pcs. = \$	
	D3 Basic ECR	\$ x	pcs. = \$	
	D4 3/5 Automation*	\$ x	pcs. = \$	
	D5 3/5 Presorted	\$ x	pcs. = \$	
	D6 Basic Automation*	\$ x	pcs. = \$	
	D7 Basic Presorted	\$ x	pcs. = \$	
DBMC	D8 Saturation ECR	\$ x	pcs. = \$	
	D9 High Density ECR	\$ x	pcs. = \$	
	D10 Basic ECR	\$ x	pcs. = \$	
	D11 3/5 Automation*	\$ x	pcs. = \$	
	D12 3/5 Presorted	\$ x	pcs. = \$	
	D13 Basic Automation*	\$ x	pcs. = \$	
	D14 Basic Presorted	\$ x	pcs. = \$	
DSCF	D15 Saturation ECR	\$ x	pcs. = \$	
	D16 High Density ECR	\$ x	pcs. = \$	
	D17 Basic ECR	\$ x	pcs. = \$	
	D18 3/5 Automation*	\$ x	pcs. = \$	
	D19 3/5 Presorted	\$ x	pcs. = \$	
	D20 Basic Automation*	\$ x	pcs. = \$	
	D21 Basic Presorted	\$ x	pcs. = \$	
DDU	D22 Saturation ECR	\$ x	pcs. = \$	
	D23 High Density ECR	\$ x	pcs. = \$	
	D24 Basic ECR	\$ x	pcs. = \$	

\*Automation-compatible flats only (DMM C820)

Total — Part D (Carry to front of form) \$

United States Postal Service

## Postage Statement — Nonprofit Standard Mail

## Permit Imprint

Post Office Note Mail Arrival Time

Mailer Information	Permit Holder's Name and Address	Telephone	Name and Address of Mailing Agent (If other than permit holder)	Telephone	Name and Address of Organization for Which Mailing Is Prepared (If other than permit holder)
	CAPS Customer Ref. ID _____				
Mailing Information	Dun & Bradstreet No.	Dun & Bradstreet No.		Dun & Bradstreet No.	
	Post Office of Mailing	Mailing Date	Federal Agency Cost Code	Statement Sequence No.	Receipt No.
	Permit No.	Weight of a Single Piece 0 _____ pounds		Total Pieces	Total Weight
	Prepared Under DMM (Check all that apply)	Processing Category (DMM C050)		Number of Containers (Fill in all that apply)	
	<input type="checkbox"/> M610 (Letters, flats, parcels)	<input type="checkbox"/> Letters	<input type="checkbox"/> Flats	1' MM Trays _____	2' MM Trays _____
	<input type="checkbox"/> M610 (Upgradable letters)	<input type="checkbox"/> Automation Flats (DMM C820)		2' EMM Trays _____	Total Ltr. Trays _____
	<input type="checkbox"/> M810 (Automation letters)	<input type="checkbox"/> M820 (Auto. flats)	<input type="checkbox"/> Machinable Parcels	<input type="checkbox"/> Irregular Parcels	Flat Trays N/A
	If Sacking, Based on <input type="checkbox"/> 125 Pcs. <input type="checkbox"/> 15 Lbs. <input type="checkbox"/> Both				
Large Computation (P013)	For Automation Letters and Flats			Total From Part A (On reverse)	
	For Presorted Letters and Nonletters			Total From Part B (On reverse)	
	For Enhanced Carrier Route (ECR) Pieces	Sequencing Date	Total From Part C (On reverse)		
	For All Other Pieces			Total From Part D (On reverse)	
	For Residual Shape Surcharge			Number of Pieces	Fee per Piece
				X \$ .10	
Certification	Postmaster: Report total postage in AIC 125.				
	Total Postage Due (Add lines above) →				
	USPS: Additional Postage Payment (State reason. Add amount to line above) \$ →				
Certification	<p>The signature of a mailer certifies that: (1) the mailing does not violate DMM E670; (2) the income derived from the sale of any products or services advertised in the mailing is not subject to the Unrelated Business Income Tax (UBIT) and any products and services advertised are substantially related to the nonprofit organization's authorized purpose within the meaning of 39 U.S.C. § 3626(j)(1)(D)(ii)(I) and 26 U.S.C. § 513(A); (3) only the mailer's matter is being mailed; (4) this is not a cooperative mailing with other persons or organizations that are not authorized to mail at Nonprofit Standard Mail rates at this office; (5) this mailing has not been undertaken by the mailer on behalf of or produced for another person or organization not authorized to mail at Nonprofit Standard Mail rates at this office; (6) the mailing, if made by a voting registration official, is required or authorized by the National Voter Registration Act of 1993; and (7) it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing, whether due to a finding that the mailing is cooperative or for other reasons. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the nonprofit mailer, and that both the nonprofit mailer and the agent will be liable for and agree to pay any deficiencies.)</p> <p>I hereby certify that all information furnished on this form is accurate, truthful, and complete; that this mailing meets any applicable CASS/MASS standards for address and barcode accuracy; that the material presented qualifies for the rates of postage claimed; and that this mailing does not contain any hazardous materials prohibited by postal regulations.</p> <p>I understand that anyone who furnishes false or misleading information on this form or who omits material information requested on the form may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties).</p>				
	<p><input type="checkbox"/> For Enclosed Reply Pieces (Automation rates only): I certify that any letter-size cards or envelopes enclosed in the pieces described above bear the correct facing identification mark (FIM) and barcode and meet automation compatibility standards in DMM C810.</p> <p><input type="checkbox"/> For ZIP Codes (Presorted rates only): I certify that the ZIP Codes appearing on the pieces described above have been verified and corrected where necessary within 12 months of the date of this mailing using a USPS-approved method.</p>				
PS Use Only	Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)				Telephone
	Weight of a Single Piece 0 _____ pounds	Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Total Pieces	Total Weight	If "Yes," Reason		
	Total Postage		Round Stamp (Required)		
	Check One (If applicable)		Date Mailed Notified	Contact	By (Initials)
	<input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled				
I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of required annual fee.					
Verifying Employee's Signature		Verifying Employee's Name		Time	AM PM

# Nonprofit Standard Mail — Permit Imprint

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total	Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>A</b> Automation Rates — Letters and Flats 3.2873 Oz. (.2055 Lb.) or Less					<b>B</b> Presorted Pieces 3.2873 Oz. (.2055 Lb.) or Less				
None	5-Digit Letter	.093 x	_____ pcs. = \$		None	3/5 Letter	.142 x	_____ pcs. = \$	
	3-Digit Letter	.114 x	_____ pcs. = \$			3/5 Nonletter	.165 x	_____ pcs. = \$	
	Basic Letter	.119 x	_____ pcs. = \$			Basic Letter	.169 x	_____ pcs. = \$	
	3/5 Flat	.144 x	_____ pcs. = \$			Basic Nonletter	.233 x	_____ pcs. = \$	
	Basic Flat	.182 x	_____ pcs. = \$						
DBMC	5-Digit Letter	.077 x	_____ pcs. = \$		DBMC	3/5 Letter	.126 x	_____ pcs. = \$	
	3-Digit Letter	.098 x	_____ pcs. = \$			3/5 Nonletter	.149 x	_____ pcs. = \$	
	Basic Letter	.103 x	_____ pcs. = \$			Basic Letter	.153 x	_____ pcs. = \$	
	3/5 Flat	.128 x	_____ pcs. = \$			Basic Nonletter	.217 x	_____ pcs. = \$	
	Basic Flat	.166 x	_____ pcs. = \$						
DSCF	5-Digit Letter	.072 x	_____ pcs. = \$		DSCF	3/5 Letter	.121 x	_____ pcs. = \$	
	3-Digit Letter	.093 x	_____ pcs. = \$			3/5 Nonletter	.144 x	_____ pcs. = \$	
	Basic Letter	.098 x	_____ pcs. = \$			Basic Letter	.148 x	_____ pcs. = \$	
	3/5 Flat	.123 x	_____ pcs. = \$			Basic Nonletter	.212 x	_____ pcs. = \$	
	Basic Flat	.161 x	_____ pcs. = \$						
<b>Total — Part A (Carry to front of form)</b> \$ _____					<b>Total — Part B (Carry to front of form)</b> \$ _____				
<b>C</b> ECR Pieces 3.3103 Oz. (.2069 Lb.) or Less					<b>D</b> Check <input type="checkbox"/> Pieces More Than 3.2873 Oz. (.2055 Lb.) One: <input type="checkbox"/> ECR Pieces More Than 3.3103 Oz. (.2069 Lb.)				
None	Saturation Letter	.072 x	_____ pcs. = \$		None	Saturation ECR	.024 x	_____ pcs. = \$	
	Saturation Nonletter	.084 x	_____ pcs. = \$			plus	.290 x	_____ lbs. = \$	
	High Density Letter	.078 x	_____ pcs. = \$			High Density ECR	.032 x	_____ pcs. = \$	
	High Density Nonletter	.092 x	_____ pcs. = \$			plus	.290 x	_____ lbs. = \$	
	Basic Letter	.099 x	_____ pcs. = \$			Basic ECR	.039 x	_____ pcs. = \$	
	Basic Nonletter	.099 x	_____ pcs. = \$			plus	.290 x	_____ lbs. = \$	
	Basic Automation Letter*	.092 x	_____ pcs. = \$			3/5 Automation*	.031 x	_____ pcs. = \$	
DBMC	Saturation Letter	.056 x	_____ pcs. = \$		DBMC	plus	.550 x	_____ lbs. = \$	
	Saturation Nonletter	.068 x	_____ pcs. = \$			3/5 Presorted	.052 x	_____ pcs. = \$	
	High Density Letter	.062 x	_____ pcs. = \$			plus	.550 x	_____ lbs. = \$	
	High Density Nonletter	.076 x	_____ pcs. = \$			Basic Automation*	.069 x	_____ pcs. = \$	
	Basic Letter	.083 x	_____ pcs. = \$			plus	.550 x	_____ lbs. = \$	
	Basic Nonletter	.083 x	_____ pcs. = \$			Basic Presorted	.120 x	_____ pcs. = \$	
	Basic Automation Letter*	.076 x	_____ pcs. = \$			plus	.550 x	_____ lbs. = \$	
DSCF	Saturation Letter	.051 x	_____ pcs. = \$		DSCF	Saturation ECR	.024 x	_____ pcs. = \$	
	Saturation Nonletter	.063 x	_____ pcs. = \$			plus	.211 x	_____ lbs. = \$	
	High Density Letter	.057 x	_____ pcs. = \$			High Density ECR	.032 x	_____ pcs. = \$	
	High Density Nonletter	.071 x	_____ pcs. = \$			plus	.211 x	_____ lbs. = \$	
	Basic Letter	.078 x	_____ pcs. = \$			Basic ECR	.039 x	_____ pcs. = \$	
	Basic Nonletter	.078 x	_____ pcs. = \$			plus	.211 x	_____ lbs. = \$	
	Basic Automation Letter*	.071 x	_____ pcs. = \$			3/5 Automation*	.031 x	_____ pcs. = \$	
DDU	Saturation Letter	.046 x	_____ pcs. = \$		DDU	plus	.471 x	_____ lbs. = \$	
	Saturation Nonletter	.058 x	_____ pcs. = \$			3/5 Presorted	.052 x	_____ pcs. = \$	
	High Density Letter	.052 x	_____ pcs. = \$			plus	.471 x	_____ lbs. = \$	
	High Density Nonletter	.066 x	_____ pcs. = \$			Basic Automation*	.069 x	_____ pcs. = \$	
	Basic Letter	.073 x	_____ pcs. = \$			plus	.471 x	_____ lbs. = \$	
	Basic Nonletter	.073 x	_____ pcs. = \$			Basic Presorted	.120 x	_____ pcs. = \$	
	Basic Automation Letter*	.066 x	_____ pcs. = \$			plus	.471 x	_____ lbs. = \$	
*Automation-compatible letters (DMM E640.2)					*Automation-compatible flats only (DMM C820)				
<b>Total — Part C (Carry to front of form)</b> \$ _____					<b>Total — Part D (Carry to front of form)</b> \$ _____				



United States Postal Service

## Postage Statement — Nonprofit Standard Mail

Postage Affixed

Post Office Note Mail Arrival Time

Mailer Information	Permit Holder's Name and Address	Telephone	Name and Address of Mailing Agent (If other than permit holder)	Telephone	Name and Address of Organization for Which Mailing is Prepared (If other than permit holder)
	Dun & Bradstreet No.		Dun & Bradstreet No.		Dun & Bradstreet No.
Mailing Information	Post Office of Mailing	Mailing Date		Statement Sequence No.	Receipt No.
	Permit No.	<input type="checkbox"/> Meter Postage <input type="checkbox"/> Precanceled Stamps	Weight of a Single Piece 0 pounds	Total Pieces	Total Weight
	Prepared Under DMM (Check all that apply)		Processing Category (DMM C050)	Number of Containers (Fill in all that apply)	
	<input type="checkbox"/> M810 (Letters, flats, parcels) <input type="checkbox"/> M610 (Upgradable letters) <input type="checkbox"/> M620 (ECR) <input type="checkbox"/> M810 (Automation letters) <input type="checkbox"/> M820 (Auto. flats)		<input type="checkbox"/> Letters <input type="checkbox"/> Flats <input type="checkbox"/> Automation Flats (DMM C820) <input type="checkbox"/> Machinable Parcels <input type="checkbox"/> Irregular Parcels	1' MM Trays _____ 2' MM Trays _____ 2' EMM Trays _____ Total Ltr. Trays _____ Flat Trays <u>N/A</u> Number of Sacks _____ Number of Pallets _____ Number of Other _____	
Postage Imputation (DMM P013)	If Sacking, Based on <input type="checkbox"/> 125 Pcs. <input type="checkbox"/> 15 Lbs. <input type="checkbox"/> Both				
	For Automation Letters and Flats			Total From Part A (On reverse)	
	For Presorted Letters and Nonletters			Total From Part B (On reverse)	
	For Enhanced Carrier Route (ECR) Pieces		Sequencing Date	Total From Part C (On reverse)	
	For All Other Pieces			Total From Part D (On reverse)	
	For Residual Shape Surcharge			Number of Pieces Fee per Piece X \$ .10	
	Is additional rate paid by permit imprint? (Form 3602-N required) <input type="checkbox"/> Yes <input type="checkbox"/> No				
	Total Postage (Add lines above) →				
	Rate at Which Postage Affixed (Check one) <input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither (DMM P800)			_____ pcs. x \$ _____ = Postage Affixed →	
	Total Postage Due (Subtract postage affixed from total postage) →				
Certification	USPS: Additional Postage Payment (State reason. Add amount to line above)			\$ _____ →	
	<p>The signature of a mailer certifies that: (1) the mailing does not violate DMM E670; (2) the income derived from the sale of any products or services advertised in the mailing is not subject to the Unrelated Business Income Tax (UBIT) and any products and services advertised are substantially related to the nonprofit organization's authorized purpose within the meaning of 39 U.S.C. § 3626(j)(1)(D)(ii)(I) and 26 U.S.C. § 513(A); (3) only the mailer's matter is being mailed; (4) this is not a cooperative mailing with other persons or organizations that are not authorized to mail at Nonprofit Standard Mail rates at this office; (5) this mailing has not been undertaken by the mailer on behalf of or produced for another person or organization not authorized to mail at Nonprofit Standard Mail rates at this office; (6) the mailing, if made by a voting registration official, is required or authorized by the National Voter Registration Act of 1993; and (7) it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing, whether due to a finding that the mailing is cooperative or for other reasons. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the nonprofit mailer, and that both the nonprofit mailer and the agent will be liable for and agree to pay any deficiencies.)</p> <p>I hereby certify that all information furnished on this form is accurate, truthful, and complete; that this mailing meets any applicable CASS/MASS standards for address and barcode accuracy; that the material presented qualifies for the rates of postage claimed; and that this mailing does not contain any hazardous materials prohibited by postal regulations.</p> <p>I understand that anyone who furnishes false or misleading information on this form or who omits material information requested on the form may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties).</p>				
	Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)			Telephone	
	<p>Weight of a Single Piece 0 pounds</p> <p>Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If "Yes," Reason</p>				
Use Only	<p>Check One (If applicable)  <input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled</p> <p>I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of required annual fee.</p>				
	Date Mailing Notified		Contact	By (Initials)	
	Verifying Employee's Signature		Verifying Employee's Name	Time	AM PM
	Round Stamp (Required)				

# Nonprofit Standard Mail — Postage Affixed

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>A</b>	Automation Rates — Letters and Flats 3.2873 Oz. (.2055 Lb.) or Less			
None	5-Digit Letter	.093 x	_____ pcs. = \$	
	3-Digit Letter	.114 x	_____ pcs. = \$	
	Basic Letter	.119 x	_____ pcs. = \$	
	3/5 Flat	.144 x	_____ pcs. = \$	
	Basic Flat	.182 x	_____ pcs. = \$	
DBMC	5-Digit Letter	.077 x	_____ pcs. = \$	
	3-Digit Letter	.098 x	_____ pcs. = \$	
	Basic Letter	.103 x	_____ pcs. = \$	
	3/5 Flat	.128 x	_____ pcs. = \$	
	Basic Flat	.166 x	_____ pcs. = \$	
DSCF	5-Digit Letter	.072 x	_____ pcs. = \$	
	3-Digit Letter	.093 x	_____ pcs. = \$	
	Basic Letter	.098 x	_____ pcs. = \$	
	3/5 Flat	.123 x	_____ pcs. = \$	
	Basic Flat	.161 x	_____ pcs. = \$	

Total — Part A (Carry to front of form)

\$ \_\_\_\_\_

<b>C</b>	ECR Pieces 3.3103 Oz. (.2069 Lb.) or Less			
None	Saturation Letter	.072 x	_____ pcs. = \$	
	Saturation Nonletter	.084 x	_____ pcs. = \$	
	High Density Letter	.078 x	_____ pcs. = \$	
	High Density Nonletter	.092 x	_____ pcs. = \$	
	Basic Letter	.099 x	_____ pcs. = \$	
	Basic Nonletter	.099 x	_____ pcs. = \$	
	Basic Automation Letter*	.092 x	_____ pcs. = \$	
DBMC	Saturation Letter	.056 x	_____ pcs. = \$	
	Saturation Nonletter	.068 x	_____ pcs. = \$	
	High Density Letter	.062 x	_____ pcs. = \$	
	High Density Nonletter	.076 x	_____ pcs. = \$	
	Basic Letter	.083 x	_____ pcs. = \$	
	Basic Nonletter	.083 x	_____ pcs. = \$	
	Basic Automation Letter*	.076 x	_____ pcs. = \$	
DSCF	Saturation Letter	.051 x	_____ pcs. = \$	
	Saturation Nonletter	.063 x	_____ pcs. = \$	
	High Density Letter	.057 x	_____ pcs. = \$	
	High Density Nonletter	.071 x	_____ pcs. = \$	
	Basic Letter	.078 x	_____ pcs. = \$	
	Basic Nonletter	.078 x	_____ pcs. = \$	
	Basic Automation Letter*	.071 x	_____ pcs. = \$	
DDU	Saturation Letter	.046 x	_____ pcs. = \$	
	Saturation Nonletter	.058 x	_____ pcs. = \$	
	High Density Letter	.052 x	_____ pcs. = \$	
	High Density Nonletter	.066 x	_____ pcs. = \$	
	Basic Letter	.073 x	_____ pcs. = \$	
	Basic Nonletter	.073 x	_____ pcs. = \$	
	Basic Automation Letter*	.066 x	_____ pcs. = \$	

\*Automation-compatible letters (DMM E640.2)

Total — Part C (Carry to front of form)

\$ \_\_\_\_\_

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>B</b>	Presorted Pieces 3.2873 Oz. (.2055 Lb.) or Less			
None	3/5 Letter	.142 x	_____ pcs. = \$	
	3/5 Nonletter	.165 x	_____ pcs. = \$	
	Basic Letter	.169 x	_____ pcs. = \$	
	Basic Nonletter	.233 x	_____ pcs. = \$	
DBMC	3/5 Letter	.126 x	_____ pcs. = \$	
	3/5 Nonletter	.149 x	_____ pcs. = \$	
	Basic Letter	.153 x	_____ pcs. = \$	
	Basic Nonletter	.217 x	_____ pcs. = \$	
DSCF	3/5 Letter	.121 x	_____ pcs. = \$	
	3/5 Nonletter	.144 x	_____ pcs. = \$	
	Basic Letter	.148 x	_____ pcs. = \$	
	Basic Nonletter	.212 x	_____ pcs. = \$	

Total — Part B (Carry to front of form)

\$ \_\_\_\_\_

**D** Check ☐ Pieces More Than 3.2873 Oz. (.2055 Lb.)  
One: ☐ ECR Pieces More Than 3.3103 Oz. (.2069 Lb.)

As described in DMM E612, compute and enter the rate for each piece in the "Rate per Piece" column.

None	Saturation ECR	\$ _____ x	_____ pcs. = \$	
	High Density ECR	\$ _____ x	_____ pcs. = \$	
	Basic ECR	\$ _____ x	_____ pcs. = \$	
	3/5 Automation*	\$ _____ x	_____ pcs. = \$	
	3/5 Presorted	\$ _____ x	_____ pcs. = \$	
	Basic Automation*	\$ _____ x	_____ pcs. = \$	
	Basic Presorted	\$ _____ x	_____ pcs. = \$	
DBMC	Saturation ECR	\$ _____ x	_____ pcs. = \$	
	High Density ECR	\$ _____ x	_____ pcs. = \$	
	Basic ECR	\$ _____ x	_____ pcs. = \$	
	3/5 Automation*	\$ _____ x	_____ pcs. = \$	
	3/5 Presorted	\$ _____ x	_____ pcs. = \$	
	Basic Automation*	\$ _____ x	_____ pcs. = \$	
	Basic Presorted	\$ _____ x	_____ pcs. = \$	
DSCF	Saturation ECR	\$ _____ x	_____ pcs. = \$	
	High Density ECR	\$ _____ x	_____ pcs. = \$	
	Basic ECR	\$ _____ x	_____ pcs. = \$	
	3/5 Automation*	\$ _____ x	_____ pcs. = \$	
	3/5 Presorted	\$ _____ x	_____ pcs. = \$	
	Basic Automation*	\$ _____ x	_____ pcs. = \$	
	Basic Presorted	\$ _____ x	_____ pcs. = \$	
DDU	Saturation ECR	\$ _____ x	_____ pcs. = \$	
	High Density ECR	\$ _____ x	_____ pcs. = \$	
	Basic ECR	\$ _____ x	_____ pcs. = \$	

\*Automation-compatible flats only (DMM C820)

Total — Part D (Carry to front of form)

\$ \_\_\_\_\_

United States Postal Service

**Consolidated Postage Statement — Nonprofit Standard Mail**  
**Permit Imprint**

Post Office Note Mail Arrival Time

<b>Mailer Info</b>	Permit Holder's Name and Address	Telephone Number	Name and Address of Mailing Agent (If other than permit holder)	Telephone Number	Name and Address of Organization for Which Mailing is Prepared (If other than permit holder)
<b>Mailing Info</b>	CAPS Customer Ref. ID		Dun & Bradstreet No.		Dun & Bradstreet No.
	Origin Post Office	Mailing Date	Permit Number	Federal Agency Cost Code	Mailing Cycle or Job Number and Description
<b>Mailing Info</b>	Prepared Under DMM (Check all that apply)		Processing Category (DMM C050)		Number of Containers (Fill in all that apply)
	<input type="checkbox"/> M610 (Ltrs., flats, parcels) <input type="checkbox"/> M610 (Upgr. ltrs.)		<input type="checkbox"/> Letters <input type="checkbox"/> Flats		1' MM Trays <input type="checkbox"/> 2' MM Trays <input type="checkbox"/> 3' EMM Trays <input type="checkbox"/> Total Ltr. Trays <input type="checkbox"/>
	<input type="checkbox"/> M620 (ECR)		<input type="checkbox"/> Automation-Compatible Flats (DMM C820)		Flat Trays N/A <input type="checkbox"/> Number of Sacks <input type="checkbox"/> Number of Pallets <input type="checkbox"/> Number of Other <input type="checkbox"/>
	<input type="checkbox"/> M810 (Auto. letters) <input type="checkbox"/> M820 (Auto. flats)		<input type="checkbox"/> Machinable Parcels <input type="checkbox"/> Irregular Parcels		
If Sacking, Based on: <input type="checkbox"/> 125 Pcs. <input type="checkbox"/> 15 Lbs. <input type="checkbox"/> Both					

<b>Postage Imputation (DMM P013)</b>	Enter the following information for each mailing represented in this consolidation. If more than three mailings are represented or more space is needed, attach a printout containing the same information in the same format. Enter presort and entry discount codes from reverse.											
	Postage Stmt. Sequence No.	PO & ZIP of Entry	Piece Weight	Entry Disc.	Presort Level	Rate	Number of Pieces/Lbs.	\$ Charge	Number of Containers	Number of Pieces	Total Weight	Postage
Enter the total of all pieces in each rate category on the reverse side.			Total No. Statements		For Attached Printouts or Postage Statements				Total From Attachments			
For Residual Shape Surcharge								Number of Pieces		Fee per Piece X \$ .10		
Postmaster: Report total postage in AIC 125.								<b>Total Postage Due (Add lines above)</b> →				
USPS: Additional Postage Payment (State reason. Add amount to line above)								\$		→		

<b>Certification</b>	<p>The signature of a mailer certifies that: (1) the mailing does not violate DMM E670; (2) the income derived from the sale of any products or services advertised in the mailing is not subject to the Unrelated Business Income Tax (UBIT) and any products and services advertised are substantially related to the nonprofit organization's authorized purpose within the meaning of 39 U.S.C. § 3626(j)(1)(D)(ii)(I) and 26 U.S.C. § 513(A); (3) only the mailer's matter is being mailed; (4) this is not a cooperative mailing with other persons or organizations that are not authorized to mail at Nonprofit Standard Mail rates at this office; (5) this mailing has not been undertaken by the mailer on behalf of or produced for another person or organization not authorized to mail at Nonprofit Standard Mail rates at this office; (6) the mailing, if made by a voting registration official, is required or authorized by the National Voter Registration Act of 1993; and (7) it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing, whether due to a finding that the mailing is cooperative or for other reasons. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the nonprofit mailer, and that both the nonprofit mailer and the agent will be liable for and agree to pay any deficiencies.)</p> <p>I hereby certify that all information furnished on this form is accurate, truthful, and complete; that this mailing meets any applicable CASS/MASS standards for address and barcode accuracy; that the material presented qualifies for the rates of postage claimed; and that this mailing does not contain any hazardous materials prohibited by postal regulations.</p> <p>I understand that anyone who furnishes false or misleading information on this form or who omits material information requested on the form may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties).</p>		<input type="checkbox"/> For Enclosed Reply Pieces (Automation rates only): I certify that any letter-size cards or envelopes enclosed in the pieces described above bear the correct facing identification mark (FIM) and barcode and meet automation compatibility standards in DMM C810.  <input type="checkbox"/> For ZIP Codes (Presorted rates only): I certify that the ZIP Codes appearing on the pieces described above have been verified and corrected where necessary within 12 months of the date of this mailing using a USPS-approved method.
	Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)		Telephone

<b>USPS Use Only</b>	Weight of a Single Piece	Total Postage	Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	0 _____ lbs.		If "Yes," Reason	
	Total Pieces	Total Weight		
	Check One (If applicable)		Date Mailed Notified	Contact
	<input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled		By (Initials)	
I CERTIFY that these mailings have been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of required annual fee.				
Verifying Employee's Signature		Verifying Employee's Name		Time AM PM

# Nonprofit Standard Mail — Permit Imprint

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>A Automation Rates — Letters and Flats 3.2873 Oz. (.2055 Lb.) or Less</b>				
None	A1 5-Digit Letter	.093 x	pcs. = \$	
	A2 3-Digit Letter	.114 x	pcs. = \$	
	A3 Basic Letter	.119 x	pcs. = \$	
	A4 3/5 Flat	.144 x	pcs. = \$	
	A5 Basic Flat	.182 x	pcs. = \$	
DBMC	A6 5-Digit Letter	.077 x	pcs. = \$	
	A7 3-Digit Letter	.098 x	pcs. = \$	
	A8 Basic Letter	.103 x	pcs. = \$	
	A9 3/5 Flat	.128 x	pcs. = \$	
	A10 Basic Flat	.166 x	pcs. = \$	
DSCF	A11 5-Digit Letter	.072 x	pcs. = \$	
	A12 3-Digit Letter	.093 x	pcs. = \$	
	A13 Basic Letter	.098 x	pcs. = \$	
	A14 3/5 Flat	.123 x	pcs. = \$	
	A15 Basic Flat	.161 x	pcs. = \$	
<b>Total — Part A (Carry to front of form)</b>				\$

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>C ECR Pieces 3.3103 Oz. (.2069 Lb.) or Less</b>				
None	C1 Saturation Letter	.072 x	pcs. = \$	
	C2 Saturation Nonletter	.084 x	pcs. = \$	
	C3 High Density Letter	.078 x	pcs. = \$	
	C4 High Density Nonletter	.092 x	pcs. = \$	
	C5 Basic Letter	.099 x	pcs. = \$	
	C6 Basic Nonletter	.099 x	pcs. = \$	
	C7 Basic Automation Letter*	.092 x	pcs. = \$	
DBMC	C8 Saturation Letter	.056 x	pcs. = \$	
	C9 Saturation Nonletter	.068 x	pcs. = \$	
	C10 High Density Letter	.062 x	pcs. = \$	
	C11 High Density Nonletter	.076 x	pcs. = \$	
	C12 Basic Letter	.083 x	pcs. = \$	
	C13 Basic Nonletter	.083 x	pcs. = \$	
	C14 Basic Automation Letter*	.076 x	pcs. = \$	
DSCF	C15 Saturation Letter	.051 x	pcs. = \$	
	C16 Saturation Nonletter	.063 x	pcs. = \$	
	C17 High Density Letter	.057 x	pcs. = \$	
	C18 High Density Nonletter	.071 x	pcs. = \$	
	C19 Basic Letter	.078 x	pcs. = \$	
	C20 Basic Nonletter	.078 x	pcs. = \$	
	C21 Basic Automation Letter*	.071 x	pcs. = \$	
DDU	C22 Saturation Letter	.046 x	pcs. = \$	
	C23 Saturation Nonletter	.058 x	pcs. = \$	
	C24 High Density Letter	.052 x	pcs. = \$	
	C25 High Density Nonletter	.066 x	pcs. = \$	
	C26 Basic Letter	.073 x	pcs. = \$	
	C27 Basic Nonletter	.073 x	pcs. = \$	
	C28 Basic Automation Letter*	.066 x	pcs. = \$	

\*Automation-compatible letters (DMM E640.2)

**Total — Part C (Carry to front of form)** \$

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>B Presorted Pieces 3.2873 Oz. (.2055 Lb.) or Less</b>				
None	B1 3/5 Letter	.142 x	pcs. = \$	
	B2 3/5 Nonletter	.165 x	pcs. = \$	
	B3 Basic Letter	.169 x	pcs. = \$	
	B4 Basic Nonletter	.233 x	pcs. = \$	
DBMC	B5 3/5 Letter	.126 x	pcs. = \$	
	B6 3/5 Nonletter	.149 x	pcs. = \$	
	B7 Basic Letter	.153 x	pcs. = \$	
	B8 Basic Nonletter	.217 x	pcs. = \$	
DSCF	B9 3/5 Letter	.121 x	pcs. = \$	
	B10 3/5 Nonletter	.144 x	pcs. = \$	
	B11 Basic Letter	.148 x	pcs. = \$	
	B12 Basic Nonletter	.212 x	pcs. = \$	
<b>Total — Part B (Carry to front of form)</b>				\$

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>D Check <input type="checkbox"/> Pieces More Than 3.2873 Oz. (.2055 Lb.) One: <input type="checkbox"/> ECR Pieces More Than 3.3103 Oz. (.2069 Lb.)</b>				
None	D1 Saturation ECR	.024 x	pcs. = \$	
	plus	.290 x	lbs. = \$	
	D2 High Density ECR	.032 x	pcs. = \$	
	plus	.290 x	lbs. = \$	
	D3 Basic ECR	.039 x	pcs. = \$	
	plus	.290 x	lbs. = \$	
	D4 3/5 Automation*	.031 x	pcs. = \$	
	plus	.550 x	lbs. = \$	
	D5 3/5 Presorted	.052 x	pcs. = \$	
	plus	.550 x	lbs. = \$	
	D6 Basic Automation*	.069 x	pcs. = \$	
	plus	.550 x	lbs. = \$	
	D7 Basic Presorted	.120 x	pcs. = \$	
	plus	.550 x	lbs. = \$	
DBMC	D8 Saturation ECR	.024 x	pcs. = \$	
	plus	.211 x	lbs. = \$	
	D9 High Density ECR	.032 x	pcs. = \$	
	plus	.211 x	lbs. = \$	
	D10 Basic ECR	.039 x	pcs. = \$	
	plus	.211 x	lbs. = \$	
	D11 3/5 Automation*	.031 x	pcs. = \$	
	plus	.471 x	lbs. = \$	
	D12 3/5 Presorted	.052 x	pcs. = \$	
	plus	.471 x	lbs. = \$	
	D13 Basic Automation*	.069 x	pcs. = \$	
	plus	.471 x	lbs. = \$	
	D14 Basic Presorted	.120 x	pcs. = \$	
	plus	.471 x	lbs. = \$	
DSCF	D15 Saturation ECR	.024 x	pcs. = \$	
	plus	.190 x	lbs. = \$	
	D16 High Density ECR	.032 x	pcs. = \$	
	plus	.190 x	lbs. = \$	
	D17 Basic ECR	.039 x	pcs. = \$	
	plus	.190 x	lbs. = \$	
	D18 3/5 Automation*	.031 x	pcs. = \$	
	plus	.450 x	lbs. = \$	
	D19 3/5 Presorted	.052 x	pcs. = \$	
	plus	.450 x	lbs. = \$	
	D20 Basic Automation*	.069 x	pcs. = \$	
	plus	.450 x	lbs. = \$	
	D21 Basic Presorted	.120 x	pcs. = \$	
	plus	.450 x	lbs. = \$	
DDU	D22 Saturation ECR	.024 x	pcs. = \$	
	plus	.164 x	lbs. = \$	
	D23 High Density ECR	.032 x	pcs. = \$	
	plus	.164 x	lbs. = \$	
	D24 Basic ECR	.039 x	pcs. = \$	
	plus	.164 x	lbs. = \$	

\*Automation-compatible flats only (DMM C820)

**Total — Part D (Carry to front of form)** \$

United States Postal Service

## Consolidated Postage Statement — Nonprofit Standard Mail

## Postage Affixed

Post Office Note Mail Arrival Time

Mailer Info	Permit Holder's Name and Address	Telephone Number	Name and Address of Mailing Agent (If other than permit holder)	Telephone Number	Name and Address of Organization for Which Mailing is Prepared (If other than permit holder)
	Dun & Bradstreet No.		Dun & Bradstreet No.		
Mailing Info	Origin Post Office	Mailing Date	Permit Number <input type="checkbox"/> Meter <input type="checkbox"/> Stamps	Mailing Cycle or Job Number and Description	
	Prepared Under DMM (Check All that apply) <input type="checkbox"/> M610 (Ltrs., flats, parcels) <input type="checkbox"/> M610 (Upgr. ltrs.) <input type="checkbox"/> M620 (ECR) <input type="checkbox"/> M820 (Auto. flats) <input type="checkbox"/> M810 (Auto. letters)		Processing Category (DMM C050) <input type="checkbox"/> Letters <input type="checkbox"/> Flats <input type="checkbox"/> Automation-Compatible Flats (DMM C820) <input type="checkbox"/> Machinable Parcels <input type="checkbox"/> Irregular Parcels		Number of Containers (Fill in all that apply) 1' MM Trays _____ 2' MM Trays _____ 2' EMM Trays _____ Total Ltr. Trays _____ Flat Trays N/A Number of Sacks _____ Number of Pallets _____ Number of Other _____
	If Sacking, Based on: <input type="checkbox"/> 125 Pcs. <input type="checkbox"/> 15 Lbs. <input type="checkbox"/> Both		Sequencing Date (ECR only)		

Enter the following information for each mailing represented in this consolidation. If more than three mailings are represented or more space is needed, attach a printout containing the same information in the same format. Enter presort and entry discount codes from reverse.

Postage Stmt. Sequence No.	PO & ZIP of Entry	Piece Weight	Entry Disc.	Presort Level	Rate	Number of Pieces/Lbs.	\$ Charge	Number of Containers	Number of Pieces	Total Weight	Postage

Totals of all rate categories must be entered on the reverse side.	Total No. Statements	For Attached Printouts or Postage Statements	Total From Attachments
For Residual Shape Surcharge		No. of Pcs. _____ x \$ .10 =	
Rate at Which Postage Affixed (Check one) (DMM P600) <input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither		Total Postage (Add lines above) →	
		_____ pcs. x \$ _____ = Postage Affixed →	
		Total Postage Due (Subtract postage affixed from total postage) →	
USPS: Additional Postage Payment (State reason. Add amount to line above)		\$ _____ →	

Certification	<p>The signature of a mailer certifies that: (1) the mailing does not violate DMM E670; (2) the income derived from the sale of any products or services advertised in the mailing is not subject to the Unrelated Business Income Tax (UBIT) and any products and services advertised are substantially related to the nonprofit organization's authorized purpose within the meaning of 39 U.S.C. § 3626(j)(1)(D)(i)(I) and 26 U.S.C. § 513(A); (3) only the mailer's matter is being mailed; (4) this is not a cooperative mailing with other persons or organizations that are not authorized to mail at Nonprofit Standard Mail rates at this office; (5) this mailing has not been undertaken by the mailer on behalf of or produced for another person or organization not authorized to mail at Nonprofit Standard Mail rates at this office; (6) the mailing, if made by a voting registration official, is required or authorized by the National Voter Registration Act of 1993; and (7) it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing, whether due to a finding that the mailing is cooperative or for other reasons. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the nonprofit mailer, and that both the nonprofit mailer and the agent will be liable for and agree to pay any deficiencies.)</p> <p>I hereby certify that all information furnished on this form is accurate, truthful, and complete; that this mailing meets any applicable CASS/MASS standards for address and barcode accuracy; that the material presented qualifies for the rates of postage claimed; and that this mailing does not contain any hazardous materials prohibited by postal regulations.</p> <p>I understand that anyone who furnishes false or misleading information on this form or who omits material information requested on the form may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties).</p>	<input type="checkbox"/> For Enclosed Reply Pieces (Automation rates only): I certify that any letter-size cards or envelopes enclosed in the pieces described above bear the correct facing identification mark (FIM) and barcode and meet automation compatibility standards in DMM C810.  <input type="checkbox"/> For ZIP Codes (Presorted rates only): I certify that the ZIP Codes appearing on the pieces described above have been verified and corrected where necessary within 12 months of the date of this mailing using a USPS-approved method.
	Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)	

Use Only	Weight of a Single Piece 0 _____ lbs.	Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No		Round Stamp (Required)
	Check One (If applicable) <input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled	If "Yes," Reason		
	I CERTIFY that these mailings have been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of required annual fee.			
	Verifying Employee's Signature	Verifying Employee's Name	Time AM PM	

# Nonprofit Standard Mail — Postage Affixed

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>A</b>	<b>Automation Rates — Letters and Flats 3.2873 Oz. (.2055 Lb.) or Less</b>			
None	A1 5-Digit Letter	.093 x _____	pcs. = \$ _____	
	A2 3-Digit Letter	.114 x _____	pcs. = \$ _____	
	A3 Basic Letter	.119 x _____	pcs. = \$ _____	
	A4 3/5 Flat	.144 x _____	pcs. = \$ _____	
	A5 Basic Flat	.182 x _____	pcs. = \$ _____	
DBMC	A6 5-Digit Letter	.077 x _____	pcs. = \$ _____	
	A7 3-Digit Letter	.098 x _____	pcs. = \$ _____	
	A8 Basic Letter	.103 x _____	pcs. = \$ _____	
	A9 3/5 Flat	.128 x _____	pcs. = \$ _____	
	A10 Basic Flat	.166 x _____	pcs. = \$ _____	
DSCF	A11 5-Digit Letter	.072 x _____	pcs. = \$ _____	
	A12 3-Digit Letter	.093 x _____	pcs. = \$ _____	
	A13 Basic Letter	.098 x _____	pcs. = \$ _____	
	A14 3/5 Flat	.123 x _____	pcs. = \$ _____	
	A15 Basic Flat	.161 x _____	pcs. = \$ _____	

Total — Part A (Carry to front of form) \$ \_\_\_\_\_

<b>C</b>	<b>ECR Pieces 3.3103 Oz. (.2069 Lb.) or Less</b>			
None	C1 Saturation Letter	.072 x _____	pcs. = \$ _____	
	C2 Saturation Nonletter	.084 x _____	pcs. = \$ _____	
	C3 High Density Letter	.078 x _____	pcs. = \$ _____	
	C4 High Density Nonletter	.092 x _____	pcs. = \$ _____	
	C5 Basic Letter	.099 x _____	pcs. = \$ _____	
	C6 Basic Nonletter	.099 x _____	pcs. = \$ _____	
	C7 Basic Automation Letter*	.092 x _____	pcs. = \$ _____	
DBMC	C8 Saturation Letter	.056 x _____	pcs. = \$ _____	
	C9 Saturation Nonletter	.068 x _____	pcs. = \$ _____	
	C10 High Density Letter	.062 x _____	pcs. = \$ _____	
	C11 High Density Nonletter	.076 x _____	pcs. = \$ _____	
	C12 Basic Letter	.083 x _____	pcs. = \$ _____	
	C13 Basic Nonletter	.083 x _____	pcs. = \$ _____	
	C14 Basic Automation Letter*	.076 x _____	pcs. = \$ _____	
DSCF	C15 Saturation Letter	.051 x _____	pcs. = \$ _____	
	C16 Saturation Nonletter	.063 x _____	pcs. = \$ _____	
	C17 High Density Letter	.057 x _____	pcs. = \$ _____	
	C18 High Density Nonletter	.071 x _____	pcs. = \$ _____	
	C19 Basic Letter	.078 x _____	pcs. = \$ _____	
	C20 Basic Nonletter	.078 x _____	pcs. = \$ _____	
	C21 Basic Automation Letter*	.071 x _____	pcs. = \$ _____	
DDU	C22 Saturation Letter	.046 x _____	pcs. = \$ _____	
	C23 Saturation Nonletter	.058 x _____	pcs. = \$ _____	
	C24 High Density Letter	.052 x _____	pcs. = \$ _____	
	C25 High Density Nonletter	.066 x _____	pcs. = \$ _____	
	C26 Basic Letter	.073 x _____	pcs. = \$ _____	
	C27 Basic Nonletter	.073 x _____	pcs. = \$ _____	
	C28 Basic Automation Letter*	.066 x _____	pcs. = \$ _____	

\*Automation-compatible letters (DMM E640.2)

Total — Part C (Carry to front of form) \$ \_\_\_\_\_

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
<b>B</b>	<b>Presorted Pieces 3.2873 Oz. (.2055 Lb.) or Less</b>			
None	B1 3/5 Letter	.142 x _____	pcs. = \$ _____	
	B2 3/5 Nonletter	.165 x _____	pcs. = \$ _____	
	B3 Basic Letter	.169 x _____	pcs. = \$ _____	
	B4 Basic Nonletter	.233 x _____	pcs. = \$ _____	
DBMC	B5 3/5 Letter	.126 x _____	pcs. = \$ _____	
	B6 3/5 Nonletter	.149 x _____	pcs. = \$ _____	
	B7 Basic Letter	.153 x _____	pcs. = \$ _____	
	B8 Basic Nonletter	.217 x _____	pcs. = \$ _____	
DSCF	B9 3/5 Letter	.121 x _____	pcs. = \$ _____	
	B10 3/5 Nonletter	.144 x _____	pcs. = \$ _____	
	B11 Basic Letter	.148 x _____	pcs. = \$ _____	
	B12 Basic Nonletter	.212 x _____	pcs. = \$ _____	

Total — Part B (Carry to front of form) \$ \_\_\_\_\_

**D** Check ☐ Pieces More Than 3.2873 Oz. (.2055 Lb.)  
One: ☐ ECR Pieces More Than 3.3103 Oz. (.2069 Lb.)

As described in DMM E612, compute and enter the rate for each piece in the "Rate per Piece" column.

None	D1 Saturation ECR	\$ _____ x _____	pcs. = \$ _____
	D2 High Density ECR	\$ _____ x _____	pcs. = \$ _____
	D3 Basic ECR	\$ _____ x _____	pcs. = \$ _____
	D4 3/5 Automation*	\$ _____ x _____	pcs. = \$ _____
	D5 3/5 Presorted	\$ _____ x _____	pcs. = \$ _____
	D6 Basic Automation*	\$ _____ x _____	pcs. = \$ _____
	D7 Basic Presorted	\$ _____ x _____	pcs. = \$ _____
DBMC	D8 Saturation ECR	\$ _____ x _____	pcs. = \$ _____
	D9 High Density ECR	\$ _____ x _____	pcs. = \$ _____
	D10 Basic ECR	\$ _____ x _____	pcs. = \$ _____
	D11 3/5 Automation*	\$ _____ x _____	pcs. = \$ _____
	D12 3/5 Presorted	\$ _____ x _____	pcs. = \$ _____
	D13 Basic Automation*	\$ _____ x _____	pcs. = \$ _____
	D14 Basic Presorted	\$ _____ x _____	pcs. = \$ _____
DSCF	D15 Saturation ECR	\$ _____ x _____	pcs. = \$ _____
	D16 High Density ECR	\$ _____ x _____	pcs. = \$ _____
	D17 Basic ECR	\$ _____ x _____	pcs. = \$ _____
	D18 3/5 Automation*	\$ _____ x _____	pcs. = \$ _____
	D19 3/5 Presorted	\$ _____ x _____	pcs. = \$ _____
	D20 Basic Automation*	\$ _____ x _____	pcs. = \$ _____
	D21 Basic Presorted	\$ _____ x _____	pcs. = \$ _____
DDU	D22 Saturation ECR	\$ _____ x _____	pcs. = \$ _____
	D23 High Density ECR	\$ _____ x _____	pcs. = \$ _____
	D24 Basic ECR*	\$ _____ x _____	pcs. = \$ _____

\*Automation-compatible flats only (DMM C820)

Total — Part D (Carry to front of form) \$ \_\_\_\_\_

United States Postal Service  
**Postage Statement — Bound Printed Matter**  
 Permit Imprint

Post Office Note Mail Arrival Time

<b>Mailer Information</b>	Permit Holder's Name and Address		Telephone		Name and Address of Mailing Agent (If other than permit holder)		Telephone		Name and Address of Individual or Organization for Which Mailing Is Prepared (If other than permit holder)	
	Dun & Bradstreet No. _____		CAPS Cust. Ref. ID _____		Dun & Bradstreet No. _____		Dun & Bradstreet No. _____			
<b>Mailing Information</b>	Post Office of Mailing		Mailing Date		Federal Agency Cost Code		Statement Sequence No.		Receipt No.	
	Permit No.		Weight of a Single Piece _____ pounds		Total Pieces		Total Weight			
	If Sacked or Bundled, Based on <input type="checkbox"/> Piece Count <input type="checkbox"/> 20 Lbs. <input type="checkbox"/> 1,000 Cu. In.		Processing Category (DMM C050) <input type="checkbox"/> Flats <input type="checkbox"/> Irregular Parcels <input type="checkbox"/> Outside Parcels		<input type="checkbox"/> Machinable Parcels 1" MM Trays <u>N/A</u> 2" MM Trays <u>N/A</u> 3" EMM Trays <u>N/A</u> Total Ltr. Trays <u>N/A</u> Flat Trays <u>N/A</u> Number of Sacks _____    Number of Pallets _____    Number of Other _____					
	Separation Method: All pieces must be separated by zone when presented for acceptance except when postage is reported under an MMS.									
<b>Computation (DMM P013)</b>	For Single-Piece BPM						Total From Part A (On reverse)			
	For Presorted BPM						Total From Part B (On reverse)			
	For Presorted and Barcoded BPM						Total From Part C (On reverse)			
	For Special Services and Other Fees						Total From Attached Form 3540-S			
<b>Pos.</b>	Postmaster: Report total postage in AIC 131.						<b>Total Postage Due (Add lines above) →</b>			
<b>Certification</b>	<p>The signature of a mailer certifies that it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the mailer, and that both the mailer and the agent will be liable for and agree to pay any deficiencies.)</p> <p>The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).</p> <p>I hereby certify that all information furnished on this form is accurate and truthful, that the material presented qualifies for the rates of postage claimed, and that this mailing does not contain any hazardous materials prohibited by postal regulations.</p>									
	Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)								Telephone	
	Weight of a Single Piece _____ pounds		Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No							
	Total Pieces _____		Total Weight _____		If "Yes," Reason _____					
<b>USPS Use Only</b>	Total Postage									
	Check One (If applicable) <input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled									
	I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of required annual fee.		Date Mailer Notified		Contact		By (Initials)		Round Stamp (Required)	
	Verifying Employee's Signature		Verifying Employee's Name		Time		AM PM			

# Bound Printed Matter — Permit Imprint

## A. Single-Piece Rate BPM

Zone	Barcoded			Nonbarcoded			Total Postage Part A
	Number of Pieces x	Rate (Include barcoded discount)	Per Piece Charge	Number of Pieces x	Rate	Per Piece Charge	
Local							
1 & 2							
3							
4							
5							
6							
7							
8							
Totals							

## B. Presorted — Nonbarcoded BPM

Zone	Basic Rate			OR Carrier Route (CARRT) PLUS			Pound Rate			Total Postage Part B
	Number of Pieces x	Rate	Per Piece Charge	Number of Pieces x	Rate	Per Piece Charge	Number of Pounds x	Pound Rate	Per Pound Charge	
Local		\$ .540			\$ .463			\$ .028		
1 & 2		.720			.643			.051		
3		.720			.643			.073		
4		.720			.643			.112		
5		.720			.643			.171		
6		.720			.643			.233		
7		.720			.643			.307		
8		.720			.643			.371		
Totals										

## C. Presorted — Barcoded BPM

Zone	Basic Rate		PLUS		Pound Rate		Total Postage Part C
	Number of Pieces x	Rate (Includes barcoded discount)	Per Piece Charge	Number of Pounds x	Pound Rate	Per Pound Charge	
Local		\$.510			\$.028		
1 & 2		.690			.051		
3		.690			.073		
4		.690			.112		
5		.690			.171		
6		.690			.233		
7		.690			.307		
8		.690			.371		
Totals							



United States Postal Service  
**Postage Statement — Parcel Post**  
 Permit Imprint

Post Office Note Mail Arrival Time

Mailer Information	Permit Holder's Name and Address		Telephone		Name and Address of Mailing Agent (If other than permit holder)		Telephone		Name and Address of Individual or Organization for Which Mailing is Prepared (If other than permit holder)	
	Dun & Bradstreet No. _____		CAPS Cust. Ref. ID _____		Dun & Bradstreet No. _____		Dun & Bradstreet No. _____			
Mailing Information	Post Office of Mailing		Mailing Date		Federal Agency Cost Code		Statement Sequence No.		Receipt No.	
	Permit No.		Weight of a Single Piece _____ pounds		Total Pieces		Total Weight			
	If Sacked or Bundled, Based on <input type="checkbox"/> Piece Count <input type="checkbox"/> 20 Lbs. <input type="checkbox"/> 1,000 Cu. In.		Processing Category (DMM C050) <input type="checkbox"/> Flats <input type="checkbox"/> Irregular Parcels <input type="checkbox"/> Outside Parcels		<input type="checkbox"/> Machinable Parcels Number of Containers (Fill in all that apply) 1' MM Trays <u>N/A</u> 2' MM Trays <u>N/A</u> 2' EMM Trays <u>N/A</u> Total Ltr. Trays <u>N/A</u> Flat Trays <u>N/A</u> Number of Sacks _____    Number of Pallets _____    Number of Other _____					
	Separation Method: All pieces must be separated by zone when presented for acceptance except when postage is reported under an MMS.									
Computation (DMM P013)	For Barcoded Inter-BMC/ASF Machinable						Total From Part A (On reverse)			
	For Nonbarcoded Inter-BMC/ASF Machinable						Total From Part B (On reverse)			
	For Inter-BMC/ASF Nonmachinable						Total From Part C (On reverse)			
	For Local and Intra-BMC/ASF						Total From Part D (On reverse)			
	For Destination Entry (DDU/DSCF/DBMC)						Total From Part E (On reverse)			
Postage	For Special Services and Other Fees						Total From Attached Form 3540-S			
	Postmaster: Report total postage in AIC 223.						<b>Total Postage Due (Add lines above) →</b>			
Certification	<p>The signature of a mailer certifies that it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the mailer, and that both the mailer and the agent will be liable for and agree to pay any deficiencies.)</p> <p>The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).</p> <p>I hereby certify that all information furnished on this form is accurate and truthful, that the material presented qualifies for the rates of postage claimed, and that this mailing does not contain any hazardous materials prohibited by postal regulations.</p>									
	Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)								Telephone	
SPS Use Only	Weight of a Single Piece _____ pounds		Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No							
	Total Pieces	Total Weight	If "Yes," Reason							
	Total Postage									
	Check One (If applicable) <input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled									
	I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage rate claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of required annual fee.									
	Verifying Employee's Signature		Verifying Employee's Name		Time		AM PM		Round Stamp (Required)	

# Parcel Post — Permit Imprint

## A. Barcoded Inter-BMC/ASF Machinable

Zone	Single Piece			BMC Presort			OBMC Presort			Total Postage Part A
	Number of Pieces	x Rate (Include barcoded discount)	Postage	Number of Pieces	x Rate (Include barcoded discount)	Postage	Number of Pieces	x Rate (Include barcoded discount)	Postage	
1 & 2										
3										
4										
5										
6										
7										
8										
Totals										

## B. Nonbarcoded Inter-BMC/ASF Machinable

Zone	Single Piece			BMC Presort			OBMC Presort			Total Postage Part B
	Number of Pieces	x Rate	Postage	Number of Pieces	x Rate	Postage	Number of Pieces	x Rate	Postage	
1 & 2										
3										
4										
5										
6										
7										
8										
Totals										

## C. Inter-BMC/ASF Nonmachinable

Zone	Single Piece			BMC Presort			OBMC Presort			Total Postage Part C
	Number of Pieces	x Rate	Postage	Number of Pieces	x Rate	Postage	Number of Pieces	x Rate	Postage	
1 & 2										
3										
4										
5										
6										
7										
8										
Totals										

## D. Local and Intra-BMC/ASF

Zone	Barcoded			Nonbarcoded			Total Postage Part D
	No. of Pieces	x Rate (Include barcoded discount)	Postage	No. of Pieces	x Rate	Postage	
Local							
1 & 2							
3							
4							
5							
Totals							

## E. Destination Entry (DDU/DSCF/DBMC)

Zone	Barcoded			Nonbarcoded			Total Postage Part E
	No. of Pieces	x Rate (Include barcoded discount)	Postage	No. of Pieces	x Rate	Postage	
DDU							
DSCF							
DBMC Zones 1 & 2							
DBMC Zone 3							
DBMC Zone 4							
DBMC Zone 5							
Totals							