

**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.
	Permit No.	<input type="checkbox"/> Meter Postage <input type="checkbox"/> Precanceled Stamps	Weight of a Single Piece 0 _____ pounds		Total Pieces
	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				Number of Pieces _____ Fee per Piece X \$.10
	Is additional rate paid by permit imprint? (Form 3602-R required)				<b>Total Postage (Add lines above) →</b>
	<input type="checkbox"/> Yes <input type="checkbox"/> No				
	Rate at Which Postage Affixed (Check one)		_____ pcs. x \$ _____ = <b>Postage Affixed →</b>		
	<input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither (DMM P600)				
<b>Total Postage Due (Subtract postage affixed from total postage) →</b>					
USPS: Additional Postage Payment (State reason. Add amount to line above)				\$ _____ →	
Certification	The signature of a mailer certifies that: (1) the mailing does not violate DMM E670; (2) only the mailer's matter is being mailed; (3) 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; (4) 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; (5) the mailing, if made by a voting registration official, is required or authorized by the National Voter Registration Act of 1993; and (6) 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.)				
	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"/> <b>For Enclosed Reply Pieces (Automation rates 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. <input type="checkbox"/> <b>For ZIP Codes (Presorted rates 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.				
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
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		
	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 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.		Round Stamp (Required)		
			Date Mailer Notified	Contact	By (Initials)
	Verifying Employee's Signature		Verifying Employee's Name		Time AM PM

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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>	<b>Automation Rates — Letters and Flats 3.2873 Oz. (.2055 Lb.) or Less</b>				<b>B</b>	<b>Presorted Pieces 3.2873 Oz. (.2055 Lb.) or Less</b>				
<b>None</b>	5-Digit Letter	.093 x	_____ pcs. = \$		<b>None</b>	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. = \$							
<b>DBMC</b>	5-Digit Letter	.077 x	_____ pcs. = \$		<b>DBMC</b>	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. = \$							
<b>DSCF</b>	5-Digit Letter	.072 x	_____ pcs. = \$		<b>DSCF</b>	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>	<b>ECR Pieces 3.3103 Oz. (.2069 Lb.) or Less</b>				<b>D</b>	<input type="checkbox"/> <b>Pieces More Than 3.2873 Oz. (.2055 Lb.)</b> <input type="checkbox"/> <b>One: ECR Pieces More Than 3.3103 Oz. (.2069 Lb.)</b>				
<b>None</b>	Saturation Letter	.072 x	_____ pcs. = \$		<b>None</b>	Saturation ECR	\$. _____ x	_____ pcs. = \$		
	Saturation Nonletter	.084 x	_____ pcs. = \$			High Density ECR	\$. _____ x	_____ pcs. = \$		
	High Density Letter	.078 x	_____ pcs. = \$			Basic ECR	\$. _____ x	_____ pcs. = \$		
	High Density Nonletter	.092 x	_____ pcs. = \$			3/5 Automation*	\$. _____ x	_____ pcs. = \$		
	Basic Letter	.099 x	_____ pcs. = \$			3/5 Presorted	\$. _____ x	_____ pcs. = \$		
	Basic Nonletter	.099 x	_____ pcs. = \$			Basic Automation*	\$. _____ x	_____ pcs. = \$		
	Basic Automation Letter*	.092 x	_____ pcs. = \$			Basic Presorted	\$. _____ x	_____ pcs. = \$		
<b>DBMC</b>	Saturation Letter	.056 x	_____ pcs. = \$		<b>DBMC</b>	Saturation ECR	\$. _____ x	_____ pcs. = \$		
	Saturation Nonletter	.068 x	_____ pcs. = \$			High Density ECR	\$. _____ x	_____ pcs. = \$		
	High Density Letter	.062 x	_____ pcs. = \$			Basic ECR	\$. _____ x	_____ pcs. = \$		
	High Density Nonletter	.076 x	_____ pcs. = \$			3/5 Automation*	\$. _____ x	_____ pcs. = \$		
	Basic Letter	.083 x	_____ pcs. = \$			3/5 Presorted	\$. _____ x	_____ pcs. = \$		
	Basic Nonletter	.083 x	_____ pcs. = \$			Basic Automation*	\$. _____ x	_____ pcs. = \$		
	Basic Automation Letter*	.076 x	_____ pcs. = \$			Basic Presorted	\$. _____ x	_____ pcs. = \$		
<b>DSCF</b>	Saturation Letter	.051 x	_____ pcs. = \$		<b>DSCF</b>	Saturation ECR	\$. _____ x	_____ pcs. = \$		
	Saturation Nonletter	.063 x	_____ pcs. = \$			High Density ECR	\$. _____ x	_____ pcs. = \$		
	High Density Letter	.057 x	_____ pcs. = \$			Basic ECR	\$. _____ x	_____ pcs. = \$		
	High Density Nonletter	.071 x	_____ pcs. = \$			3/5 Automation*	\$. _____ x	_____ pcs. = \$		
	Basic Letter	.078 x	_____ pcs. = \$			3/5 Presorted	\$. _____ x	_____ pcs. = \$		
	Basic Nonletter	.078 x	_____ pcs. = \$			Basic Automation*	\$. _____ x	_____ pcs. = \$		
	Basic Automation Letter*	.071 x	_____ pcs. = \$			Basic Presorted	\$. _____ x	_____ pcs. = \$		
<b>DDU</b>	Saturation Letter	.046 x	_____ pcs. = \$		<b>DDU</b>	Saturation ECR	\$. _____ x	_____ pcs. = \$		
	Saturation Nonletter	.058 x	_____ pcs. = \$			High Density ECR	\$. _____ x	_____ pcs. = \$		
	High Density Letter	.052 x	_____ pcs. = \$			Basic ECR	\$. _____ 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)					*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>				\$ _____	