

**Postage Statement — Regular 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 _____				
	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 _____
If Sacking, Based on <input type="checkbox"/> 125 Pcs. <input type="checkbox"/> 15 Lbs. <input type="checkbox"/> Both						

Postage Computation (DMM 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			No. of Pieces	Fee per Pc. x \$.10
	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).

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.

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 _____

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		Round Stamp (Required)		
	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

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Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
A	Automation Rates — Letters and Flats 3.3087 Oz. (.2068 Lb.) or Less			
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. = \$ _____	
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)				\$ _____

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
C	ECR Pieces 3.3062 Oz. (.2066 Lb.) or Less			
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. = \$ _____	
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. = \$ _____	
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. = \$ _____	
Total — Part C (Carry to front of form)				\$ _____

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
B	Presorted Pieces 3.3087 Oz. (.2068 Lb.) or Less			
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. = \$ _____	
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)				\$ _____

Entry Discount	Presort / Automation Discount	Rate per Piece	Number of Pieces	Total
D	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	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. = \$ _____	
DBMC	Basic Automation*	.105 x _____	pcs. = \$ _____	
	plus	.677 x _____	lbs. = \$ _____	
	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. = \$ _____	
DSCF	3/5 Automation*	.063 x _____	pcs. = \$ _____	
	plus	.598 x _____	lbs. = \$ _____	
	3/5 Presorted	.100 x _____	pcs. = \$ _____	
	plus	.598 x _____	lbs. = \$ _____	
	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. = \$ _____	
DDU	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. = \$ _____	
	3/5 Presorted	.100 x _____	pcs. = \$ _____	
	plus	.577 x _____	lbs. = \$ _____	
	Basic Automation*	.105 x _____	pcs. = \$ _____	
	plus	.577 x _____	lbs. = \$ _____	
DDU	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. = \$ _____		
Total — Part D (Carry to front of form)				\$ _____

*Automation-compatible flats only (DMM C820)