

United States Postal Service

Postage Statement — Standard Mail (A)
(Nonprofit Only) — Meter or Precanceled Postage Affixed

Payment Method
<input type="checkbox"/> Meter Postage
<input type="checkbox"/> Precanceled Stamps

MAILER: Complete all items by typewriter, pen, or indelible pencil. If you need a receipt, use Form 3606 (DMM S914).

Mailer Information	Post Office of Mailing		Mailing Date		Processing Category <input type="checkbox"/> Letters (DMM C050) <input type="checkbox"/> Flats (DMM C050) <input type="checkbox"/> Automation Flats (DMM C820) <input type="checkbox"/> Machinable Parcels (DMM C050) <input type="checkbox"/> Irregular Parcels (DMM C050)		USPS Authorized Mailing ID Code(s)	
	Permit No.		Statement Sequence No.					
	Permit Holder's Name and Address (Include ZIP Code)		Telephone		Receipt No.		Prepared Under DMM (Check all that apply) <input type="checkbox"/> M610 (Letters, flats, parcels) <input type="checkbox"/> M610 (Upgradable letters) <input type="checkbox"/> M620 (Enhanced Carrier Route) <input type="checkbox"/> M810 (Automation letters) <input type="checkbox"/> M820 (Automation flats)	
					Number of Containers (Fill in all that apply) 1-Ft. MM Trays _____ 2-Ft. MM Trays _____ 2-Ft. EMM Trays _____ Total Ltr. Trays _____ Flat Trays N/A Sacks _____ Pallets _____ Other _____			
	Authorized nonprofit rates? (DMM E670) <input type="checkbox"/> Yes <input type="checkbox"/> No		Customer No. _____ (Dun & Bradstreet)		Weight of a Single Piece _____ pounds		If Sacking, Based On <input type="checkbox"/> 125 pieces <input type="checkbox"/> 15 pounds <input type="checkbox"/> Both	
					Total Pieces _____ Total Weight _____		Name and Address of Mailing Agent (If other than permit holder)	
		Name and Address of Organization for Which Mailing Is Prepared (If other than permit holder)		Authorized nonprofit rates? (DMM E670) <input type="checkbox"/> Yes <input type="checkbox"/> No		Customer No. _____ (Dun & Bradstreet)		

Postage Computation	<ul style="list-style-type: none">For Nonprofit automation rate letter-size (DMM C810) or flat-size pieces (see DMM C820) weighing .2085 lb. (3.3362 oz.) or less, go to Part A on reverse of this form.For Nonprofit nonautomation rate pieces (DMM C050) weighing .2085 lb. (3.3362 oz.) or less, go to Part B on reverse of this form.For Nonprofit Enhanced Carrier Route rate pieces (DMM C050) weighing .2084 lb. (3.3348 oz.) or less, go to Part C on reverse of this form.For Nonprofit Enhanced Carrier Route rate pieces weighing more than .2084 lb. (3.3348 oz.), or Nonprofit rate pieces weighing more than .2085 lb. (3.3362 oz.) but all less than 1.0 lb. (16.0 oz.), go to Part D on reverse of this form.		Postage (From reverse side)	Part A	\$
				Part B	\$
				Part C	\$
				Part D	\$
	<input type="checkbox"/> Additional Postage Payment (State reasons) <input type="checkbox"/> Single-Piece Rate <input type="checkbox"/> Nonstandard Surcharge <input type="checkbox"/> Special Service (Specify)		No. Pieces	Rate/Fee Per Pc. = \$	
Is additional bulk pound rate paid by permit imprint? (Form 3602-N required) <input type="checkbox"/> Yes <input type="checkbox"/> No		Total Postage ➡ \$			
Postage Affixed at (Check one) <input type="checkbox"/> Correct Rate <input type="checkbox"/> Lowest Rate <input type="checkbox"/> Neither (DMM P600)		_____ pcs. x \$ _____ = Less Total Affixed ➡ \$ -			
		Net Postage Due ➡ \$			

Certification	<input type="checkbox"/> For Enclosed Reply Pieces (Automation rates only): I certify that all business reply, courtesy reply, or metered reply letter-size cards or envelopes, enclosed in the pieces described above, bear the correct facing identification mark (FIM) and barcode under 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.	
	<p>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 both the nonprofit 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 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.</p> <p>Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)</p> <p>Telephone</p>	

USPS Use Only	Single-Piece Weight _____ pounds	Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No		
		If "Yes," Reason		Round Stamp (Required)
	Check One <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.			
	Signature of Weigher	Time		AM PM

Form 3602-PN — Standard Mail (A) (Nonprofit Only) — Postage Affixed

¹ Show actual amount due for each piece.
Show total affixed and balance due on front.

Postage Computation

Entry Discount (If any)	Presort / Automation Discounts	Net Rate ¹	Count (Pcs.)	Charge
A Nonprofit Automation Rates — Letters (DMM C810) and Flats (DMM C820) Weighing .2085 Lb. (3.3362 Oz.) or Less				
None	5-Digit Letter	.085 x	_____ pcs.	= \$ _____
	3-Digit Letter	.098 x	_____ pcs.	= \$ _____
	Basic Letter	.102 x	_____ pcs.	= \$ _____
	3/5 Flat	.125 x	_____ pcs.	= \$ _____
	Basic Flat	.174 x	_____ pcs.	= \$ _____
DBMC	5-Digit Letter	.072 x	_____ pcs.	= \$ _____
	3-Digit Letter	.085 x	_____ pcs.	= \$ _____
	Basic Letter	.089 x	_____ pcs.	= \$ _____
	3/5 Flat	.112 x	_____ pcs.	= \$ _____
	Basic Flat	.161 x	_____ pcs.	= \$ _____
DSCF	5-Digit Letter	.067 x	_____ pcs.	= \$ _____
	3-Digit Letter	.080 x	_____ pcs.	= \$ _____
	Basic Letter	.084 x	_____ pcs.	= \$ _____
	3/5 Flat	.107 x	_____ pcs.	= \$ _____
	Basic Flat	.156 x	_____ pcs.	= \$ _____

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

C Nonprofit Enhanced Carrier Route Rates — Pieces Weighing .2084 Lb. (3.3348 Oz.) or Less				
None	Saturation Letter	.081 x	_____ pcs.	= \$ _____
	Saturation Nonletter	.094 x	_____ pcs.	= \$ _____
	High Density Letter	.087 x	_____ pcs.	= \$ _____
	Basic Automation Letter	.082 x	_____ pcs.	= \$ _____
	High Density Nonletter	.100 x	_____ pcs.	= \$ _____
	Basic Letter	.093 x	_____ pcs.	= \$ _____
DBMC	Basic Nonletter	.107 x	_____ pcs.	= \$ _____
	Saturation Letter	.068 x	_____ pcs.	= \$ _____
	Saturation Nonletter	.081 x	_____ pcs.	= \$ _____
	High Density Letter	.074 x	_____ pcs.	= \$ _____
	Basic Automation Letter	.069 x	_____ pcs.	= \$ _____
	High Density Nonletter	.087 x	_____ pcs.	= \$ _____
DSCF	Basic Letter	.080 x	_____ pcs.	= \$ _____
	Basic Nonletter	.094 x	_____ pcs.	= \$ _____
	Saturation Letter	.063 x	_____ pcs.	= \$ _____
	Saturation Nonletter	.076 x	_____ pcs.	= \$ _____
	High Density Letter	.069 x	_____ pcs.	= \$ _____
	Basic Automation Letter	.064 x	_____ pcs.	= \$ _____
DDU	High Density Nonletter	.082 x	_____ pcs.	= \$ _____
	Basic Letter	.075 x	_____ pcs.	= \$ _____
	Basic Nonletter	.089 x	_____ pcs.	= \$ _____
	Saturation Letter	.057 x	_____ pcs.	= \$ _____
	Saturation Nonletter	.070 x	_____ pcs.	= \$ _____
	High Density Letter	.063 x	_____ pcs.	= \$ _____
	Basic Automation Letter	.058 x	_____ pcs.	= \$ _____
	High Density Nonletter	.076 x	_____ pcs.	= \$ _____
	Basic Letter	.069 x	_____ pcs.	= \$ _____
	Basic Nonletter	.083 x	_____ pcs.	= \$ _____

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

Entry Discount (If any)	Presort / Automation Discounts	Net Rate ¹	Count (Pcs.)	Charge
B Nonprofit Nonautomation Rates — Pieces Weighing .2085 Lb. (3.3362 Oz.) or Less				
None	3/5 Letter	.117 x	_____ pcs.	= \$ _____
	3/5 Nonletter	.149 x	_____ pcs.	= \$ _____
	Basic Letter	.135 x	_____ pcs.	= \$ _____
	Basic Nonletter	.198 x	_____ pcs.	= \$ _____
DBMC	3/5 Letter	.104 x	_____ pcs.	= \$ _____
	3/5 Nonletter	.136 x	_____ pcs.	= \$ _____
	Basic Letter	.122 x	_____ pcs.	= \$ _____
	Basic Nonletter	.185 x	_____ pcs.	= \$ _____
DSCF	3/5 Letter	.099 x	_____ pcs.	= \$ _____
	3/5 Nonletter	.131 x	_____ pcs.	= \$ _____
	Basic Letter	.117 x	_____ pcs.	= \$ _____
	Basic Nonletter	.180 x	_____ pcs.	= \$ _____

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

D Check One: ☐ Nonprofit Rate Pieces Weighing More Than .2085 Lb. (3.3362 Oz.) but Less Than 1.0 Lb. (16.0 Oz.)
☐ Nonprofit Enhanced Carrier Route Rate Pieces Weighing More Than .2084 Lb. (3.3348 Oz.) but Less Than 1.0 Lb. (16.0 Oz.)

Enter the applicable rate for each piece computed as described in DMM E612 →

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

*Available only for automation-compatible flats (DMM C820)

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