

United States Postal Service

Postage Statement — First-Class Mail — Permit Imprint

(For Priority Mail, Use Form 3605-R)

MAILER: Complete all items by typewriter, pen, or indelible pencil. If you need a receipt, prepare in duplicate.

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-Compatible Flats (DMM C820) <input type="checkbox"/> Irregular Parcels (DMM C050)		USPS Authorized Mailing ID Code(s)	
	Permit No.	Federal Agency Cost Code	Statement Sequence No.					
	Permit Holder's Name and Address (Include ZIP Code)		Telephone		Receipt No.			
	Dun & Bradstreet No. _____		Container Quantities (Fill in all that apply)				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 (Automation flats)	
			1-Ft. MM Trays _____ 2-Ft. MM Trays _____ 2-Ft. EMM Trays _____ Total Ltr. Trays _____ Flat Trays _____ Number of Sacks _____ Number of Pallets <b>N/A</b> Number of Other _____					
CTAS Cust. Ref. ID _____		Weight of a Single Piece _____ pounds		Total Pieces _____ Total Weight _____				
Name and Address of Individual or Organization for Which Mailing Is Prepared (If other than permit holder)				Name and Address of Mailing Agent (If other than permit holder)				
Dun & Bradstreet No. _____				Dun & Bradstreet No. _____				
Postage Computation	<input type="checkbox"/> For automation rate letter-size pieces other than cards at card rates (DMM C810), go to Part A on the reverse of this form. <input type="checkbox"/> For automation rate flats (DMM C820), go to Part B on the reverse of this form. <input type="checkbox"/> For nonautomation rate pieces other than cards at card rates (DMM C050), go to Part C on the reverse of this form. <input type="checkbox"/> For postal cards and postcards at card rates (DMM E100), go to Part D on the reverse of this form.  <input type="checkbox"/> Additional Postage Payment (State reasons) <input type="checkbox"/> Special Service (Specify) _____					Postage (From reverse side)	Part A	\$ _____
							Part B	\$ _____
							Part C	\$ _____
							Part D	\$ _____
					No. Pieces _____	Rate/Fee Per Pc. x \$ _____ = \$ _____		
					Total Postage			\$ _____
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>							
	<input type="checkbox"/> For Enclosed Reply Pieces (Automation rate only) (Effective January 1, 1997): I certify that any 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.							
	<input type="checkbox"/> For Updated Addresses (Presorted and automation rates only) (Effective January 1, 1997): I certify that the addresses appearing on the pieces described above have been updated within 6 months of the date of this mailing using a USPS-approved address update tool.							
	<input type="checkbox"/> For ZIP Codes (Presorted rate only) (Effective October 1, 1996): 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>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>								
Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred.)							Telephone _____	
USPS Use Only	Single-Piece Weight _____ 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 <input type="checkbox"/> Presort Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled		Date Mailer Notified _____	Contact _____	By (Initials) _____		Round Stamp (Required)	
	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 3600-R — First-Class Mail — Permit Imprint

## Postage Computation

Presort / Automation Discounts	Net Rate	Count (Pcs.)	Charge	Presort / Automation Discounts	Net Rate	Count (Pcs.)	Charge
<b>A Automation Rates — Letters (DMM C810) Other Than Cards at Card Rates</b>				<b>B Automation Rates — 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. = \$				
↓				↓			
<b>Total — Part A (Carry to front of form)</b> \$				<b>Total — Part B (Carry to front of form)</b> \$			
<b>C Nonautomation Rates — Other Than Cards at Card Rates</b>				<b>D Postal Cards and Postcards at Card Rates</b>			
Presorted		x	pcs. = \$	Automation*			
Single-Piece		x	pcs. = \$	Carrier Route	.140	x	pcs. = \$
Nonstandard Surcharge (If applicable)				5-Digit	.143	x	pcs. = \$
Presorted	.05	x	pcs. = \$	3-Digit	.159	x	pcs. = \$
Single-Piece	.11	x	pcs. = \$	Basic	.166	x	pcs. = \$
↓				Nonautomation			
				Presorted	.180	x	pcs. = \$
				Single-Piece	.200	x	pcs. = \$
↓				↓			
<b>Total — Part C (Carry to front of form)</b> \$				<b>Total — Part D (Carry to front of form)</b> \$			

\* Available only for automation-compatible cards (DMM C810)