

Postage Statement — Standard Mail Heavy Letters
Postage Affixed

For letters more than 3.3 ounces (0.2063 lb.), up to 3.5 ounces (0.2188 lb.).

Mailer Information	Permit Holder's Name and Address, and Email Address If Any	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 Info.	Post Office of Mailing		Mailing Date		Statement Seq. No.
	Permit No.		Weight of a Single Piece 0 . _____ pound		Number of Containers
	For Automation Rate Pieces, Enter Date of Address Matching and Coding (DMM A950.3.0) ____ / ____ / ____		For Enhanced Carrier Route Rate Pieces, Enter Date of Address Matching and Coding (DMM A950.3.0) ____ / ____ / ____		Total Pieces
Postage (DMM P013)	For Automation Letters (DMM E640)			Total From Part J (On reverse)	
	For Enhanced Carrier Route Letters (DMM E630)			Total From Part K (On reverse)	
	Total Postage (Add lines above) →				
	For USPS Use Only: Additional Postage Payment (State reason)				
	Total Adjusted Postage (Add additional postage to total postage) →				

Certification

The mailer's signature certifies acceptance of liability for and agreement to pay any revenue deficiencies assessed on this mailing, subject to appeal. If an agent signs this form, the agent certifies that he or she is authorized to sign on behalf of the mailer, and that the mailer is bound by the certification and agrees to pay any deficiencies. In addition, agents may be liable for any deficiencies resulting from matters within their responsibility, knowledge, or control.

The mailer hereby certifies that all information furnished on this form is accurate, truthful, and complete; that the mail and the supporting documentation comply with all postal standards and that the mailing qualifies for the rates and fees claimed; and that the mailing does not contain any matter prohibited by law or postal regulation.

I understand that anyone who furnishes false or misleading information on this form or who omits information requested on this form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Signature of Mailer or Agent	Name of Mailer or Agent	Telephone
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USPS Use Only	Weight of a Single Piece 0 . _____ pound	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					
	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 rates 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	Number of Pieces	Total
J	Automation Heavy Letters			
As described in DMM P013.8.0, compute and enter the rate for each piece in the "Rate" column. Rates must include a discount that equals the nonletter piece rate minus the letter piece rate (DMM R600.1.3).				
None	J1. 5-Digit	_____	x _____ pcs.	= \$ _____
	J2. 3-Digit	_____	x _____ pcs.	= \$ _____
	J3. AADC	_____	x _____ pcs.	= \$ _____
	J4. Mixed AADC	_____	x _____ pcs.	= \$ _____
DBMC	J5. 5-Digit	_____	x _____ pcs.	= \$ _____
	J6. 3-Digit	_____	x _____ pcs.	= \$ _____
	J7. AADC	_____	x _____ pcs.	= \$ _____
	J8. Mixed AADC	_____	x _____ pcs.	= \$ _____
DSCF	J9. 5-Digit	_____	x _____ pcs.	= \$ _____
	J10. 3-Digit	_____	x _____ pcs.	= \$ _____
	J11. AADC	_____	x _____ pcs.	= \$ _____
Total — Part J (Carry to front of form)				\$ _____

Entry Discount	Presort / Automation Discount	Rate	Number of Pieces	Total
K	ECR Heavy Letters			
As described in DMM P013.8.0, compute and enter the rate for each piece in the "Rate" column. Rates must include a discount that equals the nonletter piece rate minus the letter piece rate (DMM R600.2.3).				
None	K1. Saturation	_____	x _____ pcs.	= \$ _____
	K2. High Density	_____	x _____ pcs.	= \$ _____
	K3. Basic Automation	_____	x _____ pcs.	= \$ _____
DBMC	K4. Saturation	_____	x _____ pcs.	= \$ _____
	K5. High Density	_____	x _____ pcs.	= \$ _____
	K6. Basic Automation	_____	x _____ pcs.	= \$ _____
DSCF	K7. Saturation	_____	x _____ pcs.	= \$ _____
	K8. High Density	_____	x _____ pcs.	= \$ _____
	K9. Basic Automation	_____	x _____ pcs.	= \$ _____
DDU	K10. Saturation	_____	x _____ pcs.	= \$ _____
	K11. High Density	_____	x _____ pcs.	= \$ _____
	K12. Basic Automation	_____	x _____ pcs.	= \$ _____
Total — Part K (Carry to front of form)				\$ _____