

United States Postal Service

Postage Statement — First-Class Mail — Meter or Precanceled Postage Affixed

(For Priority Mail, Use Form 3605-P)

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		USPS Authorized Mailing ID Code(s)	
	Permit No.		Statement Sequence No.	<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)			
	Permit Holder's Name and Address (Include ZIP Code)		Telephone	Receipt No.			
	Container Quantities (Fill in all that apply) 1-Ft. MM Trays _____ 2-Ft. MM Trays _____ 2-Ft. EMM Trays _____ Total Ltr. Trays _____ Flat Trays _____ Number of Sacks _____ Number of Pallets N/A Number of Other _____		Weight of a Single Piece _____ pounds Total Pieces _____ Total Weight _____		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)		
	Dun & Bradstreet No. _____						
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.		Postage (From reverse side)	Part A	\$
				Part B	\$
				Part C	\$
				Part D	\$
	<input type="checkbox"/> Additional Postage Payment (State reasons) <input type="checkbox"/> Special Service (Specify)		No. Pieces	Rate/Fee Per Pc.	= \$
		Total Postage		\$	
Postage Affixed at (Check one) (DMM P100) <input type="checkbox"/> Correct Rate <input type="checkbox"/> Lowest Rate <input type="checkbox"/> Neither _____ pcs. x \$ _____ = Less Total Affixed				\$ -	
		Net Postage Due		\$	

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).

Certification	<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.

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.

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		
		If "Yes," Reason _____		
	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.			Round Stamp (Required)
	Signature of Weigher _____		Time _____	AM PM

Form 3600-P — First-Class Mail — Postage Affixed

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

Postage Computation

Presort / Automation Discounts	Net Rate ¹	Count (Pcs.)	Charge	Presort / Automation Discounts	Net Rate ¹	Count (Pcs.)	Charge
A Automation Rates — Letters (DMM C810) Other Than Cards at Card Rates				B Automation Rates — Flats (DMM C820)			
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. = \$ _____					
↓				↓			
Total — Part A (Carry to front of form)				Total — Part B (Carry to front of form)			
\$ _____				\$ _____			
C Nonautomation Rates — Other Than Cards at Card Rates				D Postal Cards and Postcards at Card Rates			
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. = \$ _____	
↓				↓			
Total — Part C (Carry to front of form)				Total — Part D (Carry to front of form)			
\$ _____				\$ _____			

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