

Postage Statement - Nonprofit Standard Mail

Post Office: Note Mail Arrival Date & Time
(Do Not Round-Stamp)

Mailing	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)	
	USPS Nonprofit Auth. No. _____ CAPS Cust. Ref. No. _____ CRID _____			CRID _____			USPS Nonprofit Auth. No. _____ CRID _____	
Mailing	Post Office of Mailing		Processing Category ☐ Letters ☐ Flats ☐ Marketing Parcels ☐ Parcels - Machinable ☐ Parcels - Irregular ☐ CMM ☐ Catalogs		Mailer's Mailing Date		Federal Agency Cost Code	
	Type of Postage ☐ Permit Imprint ☐ Precanceled Stamps ☐ Metered		Weight of a Single Piece 0 _____ pounds		Combined Mailing ☐ Mixed Class ☐ Single Class		Statement Seq. No. _____ Total # of Pieces in Mailing _____ Total Weight _____	
	Permit # _____		For Mail Enclosed within Another Class ☐ Periodicals ☐ Bound Printed Matter ☐ Library Mail ☐ Media Mail ☐ Parcel Post		☐ Mailpiece is a product sample. _____ % Samples		No. and Type of Containers _____ Sacks _____ 1 ft. Letter Trays _____ 2 ft. Letter Trays _____ EMM Letter Trays _____ Flat Trays _____ Pallets _____ Other	
	For Automation Pieces, Enter Date of Address Matching and Coding ____/____/____		For Carrier Route Pieces, Enter Date of Address Matching and Coding ____/____/____		For Carrier Route Price Pieces, Enter Date of Carrier Route Sequencing ____/____/____		For Pieces Bearing a Simplified Address Enter Date of Delivery Statistics File or Alternative Method ____/____/____	
	Move Update Method: ☐ Ancillary Service Endorsement ☐ NCOALink ☐ ACS ☐ Alternative Method ☐ Multiple ☐ OneCode ACS ☐ n/a Alternative Address Format							
Postage	Parts Completed (Select all that apply) ☐ A ☐ B ☐ C ☐ D ☐ E ☐ F ☐ G ☐ H ☐ I ☐ J ☐ L ☐ M ☐ S ☐ NSA							
	☐ Letter-size or flat mailpiece contains DVD/CD or other disk.		1		Subtotal Postage (Add Parts Totals)			
	2 Price at Which Postage Affixed (Check one) Complete if the mailing includes pieces bearing metered/PC Postage or precanceled stamps. ☐ Correct ☐ Lowest ☐ Neither _____ pcs. x \$ _____		- Postage Affixed			-		
	3		Incentive/Discount Flat Dollar Amount:			-		
	4		Fee Flat Dollar Amount:			+		
5		Permit # _____		Net Postage Due (Line 1 +/- Lines 2, 3, 4)				
USPS Use	Additional Postage Payment (State reason)							
	For postage affixed, add additional payment to net postage due; for permit imprint add additional payment to total postage.							Total Adjusted Postage Affixed
	Postmaster: Report Total Postage in AIC 125 (Permit Imprint Only, Excluding Simplified Addressing (EDDM))							Total Adjusted Postage Permit Imprint
Certification	Postmaster: Report Total Postage in AIC 208 (Simplified Addressing (EDDM), Permit Imprint Only)							Total Adjusted Postage Simplified Addressing (EDDM)
	Incentive/Discount Claimed: _____ Type of Fee: _____							
The mailer's signature certifies that: (1) the mailing complies with DMM 703; (2) the income derived from the sale of any products or services advertised in the mailing is not subject to the Unrelated Business Income Tax (UBIT) and any products and services advertised are substantially related to the nonprofit organization's authorized purpose within the meaning of 39 U.S.C. 3626(j)(1)(d)(ii)(I) and 26 U.S.C. 513(A); (3) the mailing if made by a voting registration official is required or authorized under the National Voter Registration Act of 1993; and (4) it will agree to pay, subject to appeal, any revenue deficiencies assessed on this mailing. 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 supporting documentation comply with all postal standards and that the mailing qualifies for the prices 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. Privacy Notice: For information regarding our Privacy Policy visit www.usps.com .								
Signature of Mailer or Agent			Printed Name of Mailer or Agent Signing Form			Telephone		
USPS Use Only To be completed in non-PostalOne! sites	Weight of a Single Piece _____ pound		Are postage figures at left adjusted from mailer's entries? If yes, reason: ☐ Yes ☐ No					
	Total Pieces	Total Weight	Round Stamp (Required) Payment Date					
	Total Postage							
	Presort Verification Performed? (If required) ☐ Yes ☐ No (Check one) I CERTIFY that this mailing has been inspected for each item below if required: (1) eligibility for postage prices claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; (4) payment of annual fee; and (5) sufficient funds on deposit (if required)		Date Mailer Notified		Contact		USPS Use Only To be completed in non-PostalOne! sites	
	USPS Employee's Signature		By (Initials)		Time AM PM			
		Print USPS Employee's Name						