

Postage Statement—Package Services and Parcel Select Destination Entry

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

Use this form for all Package Services (Bound Printed Matter, Library Mail, Media Mail) and Parcel Select Destination Entry. Library Mail and Media Mail may be combined.

Mailer	Permit Holder Name, Address, Email, Telephone Postage Saver Software 1712 Morrow St Austin TX 78757 JOE@savepostage.com 512-555-1234 EPS Cust. Ref. No. _____ CRID _____	Mailing Agent (If other than permit holder) Name, Address, Telephone _____ _____ _____ CRID _____	Mail Owner (If other than permit holder) Name, Address _____ _____ _____ CRID _____
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Post Office of Mailing NORTH HOUSTON	Mailer's Mailing Date 01/30/2024	Federal Agency Cost Code _____	Statement Seq. No. _____	Hold For Pickup (HFPU) _____	No. and type of Containers 26 _____ Sacks _____ Flat Trays _____ Pallets _____ Other
Type of Postage <input checked="" type="checkbox"/> Permit Imprint <input type="checkbox"/> Metered	Processing Category <input type="checkbox"/> Flats <input checked="" type="checkbox"/> Parcels	Total # of Pieces in Mailing 575	SSF Transaction# 202401301826	# of pieces _____	
For Barcoded Pieces, Enter Date of Address Matching and Coding ____/____/____	Packaging Based on <input checked="" type="checkbox"/> Piece Count <input type="checkbox"/> Weight <input type="checkbox"/> Both	Total Weight 718.7500	Permit # 48	Customer Generated Electronic Labels <input type="checkbox"/> DelCon <input type="checkbox"/> SigCon	
		Weight of a Single Piece 1.2500 _____ pounds	Combined Mailing <input type="checkbox"/> Mixed Class <input type="checkbox"/> Single Class		

Parts Completed (Select all that apply): A B C S

1		Subtotal Postage (Add parts totals)	\$1,153.69
2	Price at Which Postage Affixed (Check one): <input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither Complete if mailing includes pieces bearing metered/PC Postage.	_____ 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)	\$1,153.69

USPS Use Only	Additional Postage Payment (State reason)	
	Add additional payment to net postage due for affixed or permit imprint—choose one only.	Total Adjusted Postage Affixed
	Postmaster: Report Total Postage in AIC 131 (Permit Imprint Only)	Total Adjusted BPM Postage Permit Imprint
	Postmaster: Report Total Postage in AIC 124 (Permit Imprint Only)	Total Adjusted Media Mail/Library Mail Postage Permit Imprint
	Postmaster: Report Total Postage in AIC 211 (Permit Imprint Only)	Total Adjusted Parcel Select Postage Permit Imprint

Certification

Incentive/Discount Claimed: _____ Type of Fee: _____

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 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 JOE MAILER	Telephone 512-555-1234
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USPS Use Only	Weight of a Single Piece _____ pounds	Total Weight	Are postage figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, reason: _____	Round Stamp (Required) Payment Date
	Total Pieces	Total Postage		
	Presort Verification Performed? (If required) <input type="checkbox"/> Yes <input type="checkbox"/> No			
	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	
			By (Initials)	Time AM PM
	USPS Employee's Signature		Print USPS Employee's Name	

Package Services

Part A — Bound Printed Matter

Nonpresorted — Flats

	Origin	Price	No. of Pieces	Subtotal Postage	Discount Total	Fee Total	Total Postage
A1	Origin						

Carrier Route — Flats

	Entry	Piece Price	No. of Pieces	Pieces Subtotal	Pound Price	No. of Pounds	Pounds Subtotal	Subtotal Postage	Discount Total*	Fee Total	Total Postage
A2	None										
A3	DNDC										
A4	DSCF										
A5	DDU										

Carrier Route — Flats with Simplified Addressing

	Entry	Piece Price	No. of Pieces	Pieces Subtotal	Pound Price	No. of Pounds	Pounds Subtotal	Subtotal Postage	Discount Total*	Fee Total	Total Postage
A6	None										
A7	DNDC										
A8	DSCF										
A9	DDU										

Presorted — Flats

	Entry	Piece Price	No. of Pieces	Pieces Subtotal	Pound Price	No. of Pounds	Pounds Subtotal	Subtotal Postage	Discount Total*	Fee Total	Total Postage
A10	None										
A11	DNDC										
A12	DSCF										
A13	DDU										
A14	Detached Address Label										
A15	Detached Marketing Label										

* May contain both Full Service Intelligent Mail and other discount-see Instructions page for additional information.

A16	BPM Flats Total (Add lines A1 — A15)										
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Nonpresorted — Parcels

	Origin	Price	No. of Pieces	Subtotal Postage	Discount Total	Fee Total	Total Postage
A17	Origin						

Carrier Route — Parcels

	Entry	Piece Price	No. of Pieces	Pieces Subtotal	Pound Price	No. of Pounds	Pounds Subtotal	Subtotal Postage	Discount Total	Fee Total	Total Postage
A18	None										
A19	DNDC										
A20	DSCF										
A21	DDU										

Presorted — Parcels

	Entry	Piece Price	No. of Pieces	Pieces Subtotal	Pound Price	No. of Pounds	Pounds Subtotal	Subtotal Postage	Discount Total	Fee Total	Total Postage
A22	None	2.001	365	730.3650	0.306	456.2500	139.6125	869.9775			869.9775
A23	DNDC										
A24	DSCF	1.251	210	262.7100	0.080	262.5000	21.0000	283.7100			283.7100
A25	DDU										

A26	BPM Parcels Total (Add lines A17 — A25)										1153.6875
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A27	Part A Total (Lines A16 or A26)										1153.6875
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Full Service Intelligent Mail Option

A28	DISPLAY ONLY	Flats-Number of Pieces that Comply _____ x \$0.001 =									
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