

Postage Statement—USPS Marketing Mail

Mailer	Permit Holder Name, Address, Email, Telephone <i>Town of Millis 900 Main Street Millis, MA 02054 508-376-5424</i>		Mailing Agent (If other than permit holder) Name, Address, Telephone		Mail Owner (If other than permit holder) Name, Address	
	EPS Cust. Ref. No. _____ CRID _____		CRID _____		CRID _____	
Mailing	Post Office of Mailing <i>Millis MA 02054</i>		Mailer's Mailing Date <i>10/26/23</i>		Federal Agency Cost Code	Statement Seq. No.
	Type of Postage <input type="checkbox"/> Permit Imprint <input type="checkbox"/> Precanceled Stamps <input type="checkbox"/> Metered		Processing Category <input type="checkbox"/> Letters <input type="checkbox"/> CMM <input type="checkbox"/> Flats <input type="checkbox"/> Catalogs <input type="checkbox"/> Marketing Parcels		Total # of Pieces in Mailing <i>3858</i>	SSF Transaction#
	For Mail Enclosed within Another Class <input type="checkbox"/> Bound Printed Matter <input type="checkbox"/> Library Mail <input type="checkbox"/> Periodicals <input type="checkbox"/> Media Mail		Move Update Method <input type="checkbox"/> Ancillary Service Endorsement <input type="checkbox"/> NCOA ^{Link} <input type="checkbox"/> ACS		Weight of a Single Piece <i>0. _____</i> pounds	<input type="checkbox"/> Mailpiece is a product sample _____ % Samples
			<input type="checkbox"/> Alternative Method <input type="checkbox"/> Multiple <input type="checkbox"/> OneCode ACS <input type="checkbox"/> n/a Alternative Address Format		<input type="checkbox"/> Letter-size or flat mailpiece contains DVD/CD or other disk.	
			Combined Mailing <input type="checkbox"/> Mixed Class <input type="checkbox"/> Marriage Mail Incentive <input type="checkbox"/> Single Class		This is a Political Campaign Mailing <input type="checkbox"/> Yes <input type="checkbox"/> No	
					This is Official Election Mail <input type="checkbox"/> Yes <input type="checkbox"/> No	
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 ____/____/____						
No. & Type of Containers ____ Sacks ____ 1 ft. Letter Trays ____ 2 ft. Letter Trays ____ EMM Letter Trays ____ Flat Trays ____ Pallets ____ Other						
Parts Completed (Select all that apply): <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input checked="" type="checkbox"/> F <input type="checkbox"/> G <input type="checkbox"/> H <input type="checkbox"/> L <input type="checkbox"/> S <input type="checkbox"/> NSA						
Postage	1 Subtotal Postage (Add parts totals)					<i>\$1,157.40</i>
	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 or precanceled stamps. _____ 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)					<i>\$1,157.40</i>
USPS Use Only	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 130 [Permit Imprint Only, Excluding Simplified Addressing (EDDM)]					Total Adjusted Postage Permit Imprint
	Postmaster: Report Total Postage in AIC 208 [Simplified Addressing (EDDM), Permit Imprint Only]					Total Adjusted Postage Simplified Addressing (EDDM)
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 .					
USPS Use Only	Signature of Mailer or Agent		Printed Name of Mailer or Agent Signing Form		Telephone	
	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:	
	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 Mailed Notified		Contact	
			By (Initials)		Time AM PM	
USPS Employee's Signature			Print USPS Employee's Name		Round Stamp (Required) Payment Date	

USPS Marketing Mail

Part F — Carrier Route Flats

Flats 4 oz. (0.25 lbs.) or less

	Entry	Price Category	Price	No. of Pieces	Subtotal Postage	Discount Total*	Fee Total	Total Postage
F1	None	Saturation**	\$0.300	3858				\$1,157.40
F2	None	High Density Plus	0.329					
F3	None	High Density	0.389					
F4	None	Basic	0.467					
F5	DNDC	Saturation**	0.229					
F6	DNDC	High Density Plus	0.258					
F7	DNDC	High Density	0.318					
F8	DNDC	Basic	0.396					
F9	DSCF	Saturation**	0.209					
F10	DSCF	High Density Plus	0.238					
F11	DSCF	High Density	0.298					
F12	DSCF	Basic	0.376					
F13	DDU	Saturation**	0.196					
F14	DDU	High Density Plus	0.225					
F15	DDU	High Density	0.285					
F16	DDU	Basic	0.363					
F17	Detached Address Label		0.075					
F18	Detached Marketing Label		0.095					

Flats EDDM 4 oz. (0.25 lbs.) or less**

	Entry	Price Category	Price	No. of Pieces	Subtotal Postage	Discount Total	Fee Total	Total Postage
F19	None	Saturation	\$0.301					
F20	DNDC	Saturation	0.230					
F21	DSCF	Saturation	0.210					
F22	DDU	Saturation	0.197					

Flats Over 4 oz. (0.25 lbs.) but less than 16 oz. (1 lbs.)

	Entry	Price Category	Piece Price	Or Amount Affixed	No. of Pieces	Pieces Subtotal	Pound Price	Pounds	Pounds Charged	Pounds Subtotal	Subtotal Postage	Discount Total*	Fee Total	Total Postage
F23	None	Saturation**	\$0.300				\$0.640							
F24	None	High Density Plus	0.329				0.640							
F25	None	High Density	0.389				0.756							
F26	None	Basic	0.467				0.756							
F27	DNDC	Saturation**	0.229				0.640							
F28	DNDC	High Density Plus	0.258				0.640							
F29	DNDC	High Density	0.318				0.756							
F30	DNDC	Basic	0.396				0.756							
F31	DSCF	Saturation**	0.209				0.640							
F32	DSCF	High Density Plus	0.238				0.640							
F33	DSCF	High Density	0.298				0.756							
F34	DSCF	Basic	0.376				0.756							
F35	DDU	Saturation**	0.196				0.640							
F36	DDU	High Density Plus	0.225				0.640							
F37	DDU	High Density	0.285				0.756							
F38	DDU	Basic	0.363				0.756							
F39	Detached Address Label		0.075											
F40	Detached Marketing Label		0.095											

For affixed postage mailings as described in DMM 243, compute and enter the price for each piece in the Amount Affixed column, multiply by No. of Pieces and total in the Total column.

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

** Full Service Intelligent Mail Option not available

Part F continued on next page

Town of Millis
Residents Only Per Postmaster
Fall 2023

City Routes:

C001	439
C002	459
C003	622
C004	639

Rural Routes:

R001	648
R007	591
R010	279

Boxes:	181
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Total	3,858
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