## TOWN OF MILLIS SCHEDULE OF DEPARTMENTAL BILLS PAYABLE

TO THE TOWN ACCOUNTANT:

THE FOLLOWING BILLS OF THE FINANCE COMMITTEE AMOUNTING TO AN AGGREGATE OF \$ 719.20 HAS BEEN APPROVED AND YOU ARE REQUESTED TO PLACE THEM ON A WARRANT FOR PAYMENT.								
DATE:	October (	6, 2021						
		8						
LINE ITEM NUMBER	AMOUNT	VENDOR ID	INVOICE NUMBER	INVOICE DATE	PAY TO	ACCT USE ONLY		
Postage								
01131520-542010	\$ 719.20	8423	Fall 2021	10/06/21	Postmaster			
			<del></del>					
				,				
Total of Bills	\$ 719.20				1			

## POST OFFICE LOCATIONS AND DROP INFORMATION

Information provided below identifies the Post Office retail units that service the ZIP Codes and routes included in your mailing. Each mailing must be taken to the specified Post Office retail unit as indicated below for processing at the discount postage rate.

1 MILLIS 1116 MAIN ST MILLIS, MA 02054 Phone: (508) 376-9187 Fax: (508) 376-5947

800-ASK-USPS

 Retail Business Hours

 M
 T
 W
 Th
 F
 Sa
 Su

 08:00AM
 08:00AM
 08:00AM
 08:00AM
 08:00AM
 08:00AM

 05:00PM
 05:00PM
 05:00PM
 05:00PM
 05:00PM
 12:00PM
 Closed

ZIP Code	Route	Mailpieces	ZIP Code	Route	Mailpieces	ZIP Code	Route	Mailpieces
02054	C001	552	02054	C002	252	02054	C003	602
02054	C004	652	02054	PBOX	188	02054	R001	764
02054	R007	586			7			
Total Mailpi	eces: 35	96	<b>Approximat</b>	e Cost: S	719.20		· · · · · · · · · · · · · · · · · · ·	

## United States Postal Service Every Door Direct Mail (EDDM) Retail®

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

***************************************	Name and Address of Individual or Organization   Telephone   for Which Mailing is Prepared   (508) 376-5424				****	Name and Address of Mailing Agent (If other than mailer)						
Mailer	Town of Millis 900 MAIN ST MILLIS, MA, 02054											
	Custo	Customer Registration I.D. (CRID) 25890048 Cus						Regist	ration I.D. (C	RID)		
Mailing	1	Post Office of Mailing Processing Category MILLIS Processing Category  EDDM Flats			Mailer's Mailing Date 10/28/2021		То	Total # of Bundles		Total # of Pieces per Bundle		
	Type of Postage  EDDM Retail Indicia  Metered  Meter Strip		Delivery Type Residential		Weight of a Single Piece ounces Max Weight 3.3 ounces		nces	es III was III ii		rect Mail Barcode		
			Route Type(s) Rural,CTY,PBOX		Incentive/Discount Claimed		11	11000000000002589004			481035960	
	Entry	y Price Category Pric	Postage			Т		Tota	l Postage	Status	– Affix Meter Stri	ip Here
	DDU	Saturation 0.20			19.20					UNPAID		.,
Certification	subject the ma resulting this for mailing regulat	ailer's signature certifies acce to appeal. If an agent signs dier is bound by the certificati ng from matters within their re m is accurate, truthful, and co orqualifies-for-the-prices-and-f tion. I understand that anyone form may be subject to crimi	this form, the agon and agrees to exponsibility, known per that the ees-claimed; and who furnishes and and/or civil p	gent certifice o pay any owledge, o o mail and d-that-the-rifalse or mi oenalties, in	es that he deficiencier control. 'the support mailing do isleading including finduding fi	or she is a es, in addit The mailer orting docu es-not-con nformation nes and in	uthorized to fion, agents in hereby certing mentation contains any tains any male on this form appisonment.	sign or may be ifies that omply v tter-pro or who	n behalf of th Illable for an at all informa: vith all postal hibited-by-las o omits inform	e mailer and that y deficiencies tion furnished on I standards and the w or postal mation requested		
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ğ												Acceptance SPS Use Or
Acceptance	USPS Use Only	USPS Acceptance Employee Signature									Round Date (Regulred) Payment Date	
	l	USPS Acceptance Employee Printed Name										
Verification	,	Number of Bundles Any postage figures a						rom ma	ailer's entries	Yes No		
	Use Only (1)							Round Date	Round Date (Required) Verification Date			
		CERTIFY that this mailing has been inspected for ach item below if required: ) eligibility for postage prices claimed; ) proper preparation (and presort where required;		Date Maller Notified		d Co	Contact				Verification USPS Use Only	
		3) proper completion of posta	per completion of postage statement.		By (Initials)		Tin		in the second	AM PM		Only
		JSPS Verification Employee	signature		Print USPS Verification Employee			yee Pri	r Filineu Name			