

**Postage Statement - Package Services**Post Office: Note Mail Arrival Date & Time  
(Do Not Round-Stamp)**(Bound Printed Matter, Library Mail, Media Mail, Parcel Post, and Parcel Select)***Use this form for all Package Services. Only Library Mail and Media Mail may be combined.*

<b>Mailer</b>	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)	
	CAPS Cust. Ref. No. _____ CRID _____			CRID _____			CRID _____	
<b>Mailing</b>	Post Office of Mailing		Processing Category <input type="checkbox"/> Flats <input type="checkbox"/> Parcels		Mailer's Mailing Date		Federal Agency Cost Code	
	Type of Postage <input type="checkbox"/> Permit Imprint <input type="checkbox"/> Metered				Weight of a Single Piece _____ pounds		Combined Mailing <input type="checkbox"/> Mixed Class <input type="checkbox"/> Single Class	
	Permit #		Packaging Based on <input type="checkbox"/> Piece Count <input type="checkbox"/> Weight <input type="checkbox"/> Both		If Sacked, Based on <input type="checkbox"/> Piece Count <input type="checkbox"/> 20 Pounds		Hold For Pickup (HFPU) # of pieces _____	
	For Barcoded Pieces, Enter Date of Address Matching and Coding ____/____/____							
							Total Pieces	
<b>Postage</b>	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 type="checkbox"/> F <input type="checkbox"/> G <input type="checkbox"/> H <input type="checkbox"/> I <input type="checkbox"/> S							
	<b>Total Postage</b> (Add parts totals)							
	Price at Which Postage Affixed (Check one) Complete if the mailing includes pieces bearing metered or precanceled stamps. <input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither _____ pcs. x \$ _____ = <b>Postage Affixed</b>							
	<b>Permit #</b> _____ <b>Net Postage Due</b> (Subtract postage affixed from total postage)							
	For USPS Use Only: Additional Postage Payment (State reason)							
<b>USPS Use Only</b>	(Add additional payment to net postage due for affixed or permit imprint - choose one only) <b>Total Adjusted Postage Affixed</b>							
	Postmaster: Report Total Postage in Applicable AIC (Permit Imprint Only)	<b>AIC 131</b>		<b>Total Adjusted BPM Postage Permit Imprint</b>				
		<b>AIC 124</b>		<b>Total Adjusted Media Mail/Lib. Mail Postage Permit Imprint</b>				
		<b>AIC 211</b>		<b>Total Adjusted Parcel Select Postage Permit Imprint</b>				
		<b>AIC 212</b>		<b>Total Adjusted Parcel Post Postage Permit Imprint</b>				
<b>Certification</b>	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.							
	<i>Privacy Notice: For information regarding our Privacy Policy visit <a href="http://www.usps.com">www.usps.com</a></i>							
	Signature of Mailer or Agent			Name of Mailer or Agent			Telephone	
<b>USPS Use Only</b> To be completed in non-Postal/One! sites	Weight of a Single Piece _____ pound			Are postage figures at left adjusted from mailer's entries? If yes, reason: <input type="checkbox"/> Yes <input type="checkbox"/> No				
	Total Pieces		Total Weight	<div style="border: 1px solid black; padding: 5px;"> <b>USPS Use Only</b> To be completed in non-Postal/One! sites </div>				
	Total Postage							
	Presort Verification Performed? (If required) <input type="checkbox"/> Yes <input type="checkbox"/> 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 (if required); and (5) sufficient funds on deposit (if required)			Date Mailer Notified		Contact		
	USPS Employee's Signature			By (Initials)		Time AM PM		
				Print USPS Employee's Name				
				Round Stamp (Required) Payment Date				

# Package Services



## Part A

Bound Printed Matter

Check box at left if prices are populated in this section.

### Nonpresorted - Flats or Parcels

	Zone	Barcoded / Nonbarcoded	Price	No. of Pieces	Total Postage
A1	1 & 2	Barcoded			
A2	3	Barcoded			
A3	4	Barcoded			
A4	5	Barcoded			
A5	6	Barcoded			
A6	7	Barcoded			
A7	8	Barcoded			
A8	1 & 2	Nonbarcoded			
A9	3	Nonbarcoded			
A10	4	Nonbarcoded			
A11	5	Nonbarcoded			
A12	6	Nonbarcoded			
A13	7	Nonbarcoded			
A14	8	Nonbarcoded			

### Carrier Route - Flats or Parcels

	Zone	Entry	Piece Price	No. of Pieces	Pieces Subtotal	Pound Price	No. of Pounds	Pounds Subtotal	Total Postage
A15	1 & 2	None							
A16	3	None							
A17	4	None							
A18	5	None							
A19	6	None							
A20	7	None							
A21	8	None							
A22	1 & 2	DNDC							
A23	3	DNDC							
A24	4	DNDC							
A25	5	DNDC							
A26		DSCF							
A27		DDU							

A28	Part A Nonpresorted and Carrier Route BPM Total (Lines A1 - A27)
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Part A continued on next page

# Package Services

☐ **Part A continued**  
Bound Printed Matter

Check box at left if prices are populated in this section.

## Presorted - Flats or Parcels

	Zone	Entry	Barcoded / Nonbarcoded	Piece price	No. of Pieces	Pieces Subtotal	Pound Price	No. of Pounds	Pounds Subtotal	Total Postage
A29	1 & 2	None	Barcoded							
A30	3	None	Barcoded							
A31	4	None	Barcoded							
A32	5	None	Barcoded							
A33	6	None	Barcoded							
A34	7	None	Barcoded							
A35	8	None	Barcoded							
A36	1 & 2	None	Nonbarcoded							
A37	3	None	Nonbarcoded							
A38	4	None	Nonbarcoded							
A39	5	None	Nonbarcoded							
A40	6	None	Nonbarcoded							
A41	7	None	Nonbarcoded							
A42	8	None	Nonbarcoded							
A43	1 & 2	DNDC	Barcoded							
A44	3	DNDC	Barcoded							
A45	4	DNDC	Barcoded							
A46	5	DNDC	Barcoded							
A47	1 & 2	DNDC	Nonbarcoded							
A48	3	DNDC	Nonbarcoded							
A49	4	DNDC	Nonbarcoded							
A50	5	DNDC	Nonbarcoded							
A51		DSCF	Barcoded Flats Only							
A52		DSCF	Nonbarcoded							
A53		DDU								

A54	<b>Presorted BPM Total (Lines A29 - A53)</b>
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A55	<b>Part A BPM Subtotal (Lines A28 + A54)</b>
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## Full Service Intelligent Mail Option

A56	Flats - Number of pieces that comply _____ x \$ =
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**Part A Total (Line A55 minus A56)**

Package Services

☐ **Part B**  
Library Mail and Media Mail

Check box at left if prices are populated in this section.

Library Mail		Barcoded / Nonbarcoded	Price	No. of Pieces	Total Postage
B1	Basic	Barcoded			
B2	Single Piece	Barcoded			
B3	5-Digit				
B4	Basic	Nonbarcoded			
B5	Single-Piece	Nonbarcoded			

Media Mail		Barcoded / Nonbarcoded	Price	No. of Pieces	Total Postage
B6	Basic	Barcoded			
B7	Single Piece	Barcoded			
B8	5-Digit				
B9	Basic	Nonbarcoded			
B10	Single-Piece	Nonbarcoded			

Part B Total (Add lines B1-B10)

# Package Services

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## Part C

Parcel Select - Destination Entry

Check box at left if prices are populated in this section.

Parcel Select	Zone	Entry	Machinable / Nonmachinable / Oversized	Price	No. of Pieces	Total Postage
C1	1 & 2	DNDC	Machinable			
C2	3	DNDC	Machinable			
C3	4	DNDC	Machinable			
C4	5	DNDC	Machinable			
C5	1 & 2	DNDC	Nonmachinable			
C6	3	DNDC	Nonmachinable			
C7	4	DNDC	Nonmachinable			
C8	5	DNDC	Nonmachinable			
C9		DSCF	Machinable			
C10		DSCF	Nonmachinable - 5-Digit			
C11		DSCF	Nonmachinable - 3-Digit			
C12		DDU	Parcels			
C13	1 & 2	DNDC	Oversized			
C14	3	DNDC	Oversized			
C15	4	DNDC	Oversized			
C16	5	DNDC	Oversized			
C17		DSCF	Oversized			
C18		DDU	Oversized			

Part C Total (Add lines C1-C18)

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## Part D

Parcel Select - Nonpresort

Check box at left if prices are populated in this section.

### Parcel Select - Nonpresort - Barcoded

	Zone	Price	No. of Pieces	Total Postage
D1	1 & 2			
D2	3			
D3	4			
D4	5			
D5	6			
D6	7			
D7	8			

Part D Total (Add lines D1-D7)

Package Services

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Part E

Parcel Select - NDC Presort

Check box at left if prices are populated in this section.

NDC Presort - Barcoded

	Zone	Price	No. of Pieces	Total Postage
E1	1 & 2			
E2	3			
E3	4			
E4	5			
E5	6			
E6	7			
E7	8			

NDC Presort - Nonbarcoded

	Zone	Price	No. of Pieces	Total Postage
E8	1 & 2			
E9	3			
E10	4			
E11	5			
E12	6			
E13	7			
E14	8			

NDC Presort - Oversized

	Zone	Price	No. of Pieces	Total Postage
E15	1 & 2			
E16	3			
E17	4			
E18	5			
E19	6			
E20	7			
E21	8			

Part E - NDC Presort Total (Add lines E1-E21)

# Package Services



## Part F

Parcel Select - ONDC Presort

Check box at left if prices are populated in this section.

### ONDC Presort - Barcoded

	Zone	Price	No. of Pieces	Total Postage
F1	1 & 2			
F2	3			
F3	4			
F4	5			
F5	6			
F6	7			
F7	8			

### ONDC Presort - Nonbarcoded

	Zone	Price	No. of Pieces	Total Postage
F8	1 & 2			
F9	3			
F10	4			
F11	5			
F12	6			
F13	7			
F14	8			

### ONDC Presort - Oversized

	Zone	Price	No. of Pieces	Total Postage
F15	1 & 2			
F16	3			
F17	4			
F18	5			
F19	6			
F20	7			
F21	8			

Part F - ONDC Presort Total (Add lines F1-F21)

## Package Services

☐ **Part G**  
Parcel Post

Check box at left if prices are populated in this section.

### Parcel Post - Nonbarcoded

	Zone	Price	No. of Pieces	Total Postage
G1	1 & 2			
G2	3			
G3	4			
G4	5			
G5	6			
G6	7			
G7	8			

### Parcel Post - Oversized

	Zone	Price	No. of Pieces	Total Postage
G8	1 & 2			
G9	3			
G10	4			
G11	5			
G12	6			
G13	7			
G14	8			

**Part G - Parcel Post Total** (Add lines G1-G14)

## Package Services

☐ **Part H**  
Parcel Select - Regional Ground

Check box at left if prices are populated in this section.

### Parcel Select

	Zone	Entry	No. of Pcs	Total Postage
H1	L,1,2,3	OSCF		
H2	L,1,2,3	ONDC		
H3	4	ONDC		
H4	5	ONDC		
H5	6	ONDC		
H6	7	ONDC		
H7	8	ONDC		

**Part H Total** (Add lines H1-H7)



Package Services

☐ **Part I**

Parcel Select - Regional Ground - NSA

Check box at left if prices are populated in this section.

Parcel Select (NSA)

	Zone	Entry	No. of Pcs	Total Postage
I1	L,1,2,3	OSCF		
I2	L,1,2,3	ONDC		
I3	4	ONDC		
I4	5	ONDC		
I5	6	ONDC		
I6	7	ONDC		
I7	8	ONDC		

Part I Total (Add lines I1-I7)

Extra Services

☐ **Part S**

Extra Services Items mailed with Extra Services must meet the mailing standards for the extra service.

Check box at left if prices are populated in this section.

	Fee	No. of Pieces	Total Postage
S1	Certificate of Mailing (3 or more)		
S2			
S3	Collect on Delivery (COD)		
S4	Delivery Confirmation (parcels only)		
S5	Insurance		
S6			
S7	Restricted Delivery		
S8	Return Receipt (Electronic)		
S9	Return Receipt (Form 3811)		
S10	Return Receipt for Merchandise		
S11	Signature Confirmation (parcels only)		
S12	Parcel Airlift (PAL)		
S13	Special Handling		
S14			
S15	Adult Signature Required *		
S16	Adult Signature Restricted Delivery *		

\* Only for Parcel Select Barcoded Nonpresort Parcels.

Part S Total

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## Package Services - Instructions

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Use this form for Package Services including Bound Printed Matter, Library Mail, Media Mail, Parcel Post, Parcel Select, and Parcel Return Service.

**Step 1:** Complete *Mailer* and *Mailing* sections on page 1 applicable to the mailing presented. For all sections not applicable, enter N/A.

**Step 2:** Determine which part(s) to complete for your mailing, as follows: Parts A - Bound Printed Matter (BPM) Flats or Parcels; Part B - Library Mail and Media Mail; Parts C, D, & E - Parcel Select and Parcel Post; or Part S - Extra Services.

**Step 3:** Complete applicable part(s) as follows:

**Part A:** Nonpresorted BPM is charged a per-piece price based on weight and zone. Enter applicable per-piece price in "Price" column. Multiply per-piece price by corresponding number of pieces and enter in "Total" column.

All pieces must be reported on the appropriate line at the full published price (not including the Full Service Intelligent Mail incentive). Pieces that comply with the Full Service Intelligent Mail option requirements are additionally reported on the line provided.

*Permit Imprint mailings*, round off to four decimal places. Add line-item totals and enter sum in Part A Total box. Do not round.

Presorted and Carrier Route BPM are charged a per-pound price and a per-piece price. Note: For pieces weighing one pound or less, calculate per-pound postage for a one pound piece.

*Permit Imprint:* Enter corresponding per-piece price for all zones in column one. Multiply applicable per-piece price by number of pieces per zone and enter in "Pieces Subtotal" column. Compute per-pound postage by multiplying the unrounded weight of a single piece (one pound per piece, minimum) by the number of pieces per zone; enter result in "No. of Pounds" column. Multiply the applicable Pound Price by the number of pounds. Do not round. Enter result in "Total" column. Add line-item totals and enter sum in Part/Total box. Do not round.

**Parts B-E:** These categories of mail are charged a per-piece price.

*Permit Imprint:* Multiply number of pieces by applicable per-piece price. Round each result off to four decimal places. Add the products and enter in "Total" column. Add line-item totals and enter sum in Part/Total box. Do not round.

Postage Affixed: Compute applicable postage for a single piece. Round up to next tenth of a cent (three decimal places). Enter single-piece amount(s) in appropriate line in "Price" column; multiply times corresponding number of pieces; enter result in "Total" column. Add line-item totals and enter sum in Part/Total box. Do not round.

**Part H:** Parcel Select - Regional Ground: Enter total in Part H Total box.

**Part I:** Parcel Select - Regional Ground - NSA: Enter total in Part I Total box.

**Part S:** Extra Services are charged a per-piece price.

*Permit Imprint:* Multiply price for requested extra service(s) by number of pieces. Enter result in "Total" column. Add the line-item totals and enter sum in Part S Total box. Round off to four decimal places. Add line-item totals and enter sum in Part A Total box. Do not round.

Postage Affixed: Multiply price for requested extra service(s) by number of pieces. Round off to three decimal places. Enter result in "Total" column. Add line-item totals and enter sum in Part S Total box. Do not round.

*Note: Add postage for extra services to individual postage amounts in Part A - D; round up sum to next tenth of a cent (three decimal places) and affix to piece(s); or include total postage for extra services in "Net Postage Due" (p. 1).*

**Step 4:** Go to *Postage* section on page 1. Place a check mark in the appropriate box(es) to show which part(s) you have completed. Add the postage from the Part/Total box for each completed section; round off to the nearest whole cent (two decimal places); enter sum in Total Postage.

**Step 5:** Read and sign *Certification* section, including your telephone number. Attach all completed pages together to submit with the mailing. (Do not include blank pages.)

**Information:** For more information on mailing standards, prices, and fees please go to Postal Explorer at [pe.usps.com](http://pe.usps.com).