Post Office: Note Mail Arrival Date & Time United States Postal Service (Do Not Round Stamp) **Every Door Direct Mail (EDDM) Retail® Business Name and Address** Name and Address of Mailing Telephone Telephone Name and Address of Individual or Organization and Email Address, If Any Agent (If other than mailer) for Which Mailing is Prepared (If other than mailer) Mailer Customer Registration I.D. (CRID) Customer Registration I.D. (CRID) Customer Registration I.D. (CRID) Post Office of Mailing Processing Category Mailer's Mailing Date Total # of Bundles Total # of Pieces per Bundle EDDM Flats Weight of a Single Piece Every Door Direct Mail Barcode Type of Postage Delivery Type ounces Mailing EDDM Retail Indicia Max Weight 3.3 ounces Metered Route Type(s) Meter Strip Entry **Price Category** Price No. of Pieces **Total Postage** Status Affix Meter Strip Here 0.160 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 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 Postmaster: Report Total Postage in AIC 207 Total Postage **JSPS Use Only USPS Use Only** Weight of a Single Piece \_ . ounces Total Number of Pieces Round Date (Required) Acceptance Acceptance Payment Date USPS Acceptance Employee Signature USPS Acceptance Employee Printed Name ΙNο Number of Bundles Any postage figures adjusted from mailer's entries? If yes, reason:

**Date Mailer Notified** 

By (Initials)

CERTIFY that this mailing has been inspected for

(2) proper preparation (and presort where required);

each item below if required:

(1) eligibility for postage prices claimed;

USPS Verification Employee Signature

(3) proper completion of postage statement.

JSPS Use Only

Verification

AM

РМ

Contact

Time

Print USPS Verification Employee Printed Name

Round Date (Required)
Verification Date

**USPS Use Only** 

## **EVERY DOOR DIRECT MAIL RETAIL®**

5-Digit ZIP Code	Route Number	# of Mailpieces	5-Digit ZIP Code	Route Number	# of Mailpieces

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This form and mailing standards available on Postal Explorer at pe.usps.com

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