

United States Postal Service  
**Postage Statement — USPS Marketing Mail**

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

<b>MAILER</b>	Permit Holder's Name and Address and Email Address, if Any  Sutherland Printing 525 N Front St Montezuma IA 50171  mikew@sutherlandprinting.com  CAPS Cust. Ref. No. _____ CRID 4823215	Telephone (641)-623-5115 Extension _____	Name and Address of Mailing Agent (If other than permit holder) Sutherland Printing 525 N Front St Montezuma IA 50171  mikew@sutherlandprinting.com  CRID 4823215	Telephone (641)-623-5115 Extension _____	Name and Address of Mail Owner (If other than permit holder) American Farming Publications LLC PO Box 841 2616 14th Ave N Fort Dodge IA 50501  CRID 25596373
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<b>MAILING</b>	Post Office of Mailing Montezuma IA 50171	Mailer's Mailing Date 11/29/2018	Federal Agency Cost Code	Statement Seq. No. Am Farming 531929	For Automation Price Pieces, Enter Date of Address Matching and Coding 11/29/2018	No. & Type of Containers 1' MM Trays 2' MM Trays 2' EMM Trays Total Trays Flat Trays Sacks Pallets Other
	Type of Postage <input checked="" type="checkbox"/> Permit Imprint <input type="checkbox"/> Precanceled Stamps <input type="checkbox"/> Metered	Processing Category <input type="checkbox"/> Letters <input type="checkbox"/> CMM <input checked="" type="checkbox"/> Flats <input type="checkbox"/> Catalogs <input type="checkbox"/> Marketing Parcels	Total # of Pieces in Mailing 8,000	SSF Transaction #	For CR Price Pieces, Enter Date of Address Matching and Coding 11/29/2018	
	For Mail Enclosed Within Another Class <input type="checkbox"/> Periodicals <input type="checkbox"/> Bound Printed Matter <input type="checkbox"/> Library Mail <input type="checkbox"/> Media Mail	Move Update Method <input type="checkbox"/> ASE <input type="checkbox"/> Multiple <input checked="" type="checkbox"/> NCOALink <input type="checkbox"/> OneCode ACS <input type="checkbox"/> ACS <input type="checkbox"/> Alternative Method <input type="checkbox"/> n/a Alternative Address Format	Weight of a Single Piece 0.3588 pounds	Permit # 30	For CR Price Pieces, Enter Date of CR Sequencing 11/29/2018	
	Combined Mailing <input type="checkbox"/> Mixed Class <input type="checkbox"/> Single Class	<input type="checkbox"/> Letter-size or flat mailpiece contains DVD/CD or other disk.	This is a Political Mailing <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Mailpiece is a product sample. _____ % Samples	For Pieces Bearing a Simplified Address Enter Date of Delivery Statistics File or Alternative Method	

Parts Completed (Select all that apply)  A  B  C  D  E  F  G  H  I  J  K  L  M  N  O  P  Q  R  S  T  U  V  W  X  Y  Z

<b>POSTAGE</b>	1	<b>Subtotal Postage (Add Parts Totals)</b>	4,808.58
	2	Price at Which Postage Affixed (Check one) Complete if the mailing includes pieces bearing metered/PC Postage or precanceled stamps. <input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither pcs. x \$ = <b>Postage Affixed</b>	
	3	Incentive/Discount Flat Dollar Amount	
	4	Fee Flat Dollar Amount	
	5	<b>Permit # _____ Net Postage Due (Line 1 +/- Lines 2, 3, 4)</b>	4,808.58

<b>USPSE</b>	<b>Additional Postage Payment (State reason)</b>	
	For postage affixed add additional payment to net postage due; for permit imprint add additional payment to total postage.	<b>Total Adjusted Postage Affixed</b>
	Postmaster: Report Total Postage In <b>AIC 130</b> (Permit Imprint Only, Excluding Simplified Addressing (EDDM))	<b>Total Adjusted Postage Permit Imprint</b>
	Postmaster: Report Total Postage In <b>AIC 208</b> (Simplified Addressing (EDDM), Permit Imprint Only)	<b>Total Adjusted Postage Simplified Addressing (EDDM)</b>

**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 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.

Signature of Mailer or Agent: \_\_\_\_\_ Printed Name of Mailer or Agent Signing Form: Mike Wagenknecht Telephone: \_\_\_\_\_ Extension: \_\_\_\_\_

*Privacy Notice: For information regarding our Privacy Policy visit www.usps.com.*

<b>USPSE ONLY</b>	Weight of a Single Piece _____ pound	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	Contact	
		By (Initials)	Time	AM PM
USPS Employee's Signature	Print USPS Employee's Name			