

United States Postal Service
Postage Statement — Periodicals
One Issue or One Edition

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

P 1

3541

Mailer	Publication Title and Owner or News Agent's Name _____ Customer No. _____ CAPS Customer Ref. ID _____	Mailing Agent's (Printer or Consolidator) Name, Address, Telephone Number, and Email Address if Any _____ Printer/Consolidator Imprint Permit No. _____ Customer No. _____	Entry Post Office Name, State, and ZIP+4 _____
	M 1		M 2

Mailing	Applicable Parts Code (select all that apply) <input type="checkbox"/> A <input type="checkbox"/> B - E <input type="checkbox"/> F	Statement for bulk containers only (If Applicable) <input type="checkbox"/>	Price Category <input type="checkbox"/> Regular <input type="checkbox"/> Non-regular <input type="checkbox"/> Classroom <input type="checkbox"/> Science-of-Agriculture	Combined Mailing <input type="checkbox"/> Yes <input type="checkbox"/> No	Consolidated Postage Statement <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Publication No. _____ Issue Date _____	Edition/Code _____ Issue Frequency _____	Mailing Date _____ Statement Sequence No. _____	Processing Category <input type="checkbox"/> Letters <input type="checkbox"/> Flats <input type="checkbox"/> Parcels	No. of Addressed Pieces _____	No. and Type of Containers (enter total number of containers) _____
	Weight of a Single Ride-Along piece _____ lb.	Weight per Copy for Issue (Round off to 4 places if necessary) _____ pounds	Advertising Percentage in Issue _____ %	Post Office Computed Weight per Copy (Round off to 4 decimal places if necessary) _____ pounds		
	For Automation Price Pieces, Enter Date of Address Matching and Coding _____/_____/_____	For Carrier Route Price Pieces, Enter Date of Address Matching and Coding _____/_____/_____	For Carrier Route Price Pieces, Enter Date of Carrier Route Sequencing _____/_____/_____			

Postage	Part A — In-County Prices	Postmaster: Report total Part A postage in AIC 224	Total Part A (Page 2)	M 24
	Part B — Outside County Pound Prices	Total Part B (Page 3)		M 25
	Part C — Outside County Piece Prices	Total Part C (Page 4)		
	Part D — Outside County Bundle Prices	Total Part D (Page 5)		
	Part E — Outside County Sack/Tray/Pallet Prices	Total Part E (Page 6 & 7)		
	Outside County Postage	Subtotal Parts B, C, D, and E		
	Preferred Price Discount - Nonprofit, Classroom, Limited Circulation, Limited Circulation Science of Agriculture (Add line B16, and parts C, D, and E Totals) _____ X .05 (all others enter zero)	—	M 26	
	Subtract the Preferred Price Discount from the Outside County Postage	=	M 27	
	Part F — Outside County Ride-Along and Repositionable Notes (Page 8)	+	M 28	
	Total Outside County Postage (Postmaster report in AIC 135)			=
Add Total Outside County Postage and Total Inside County Postage		Total Postage		M 30

The signature of the owner of the publication 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 owner of the publication and that the owner of the publication 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 owner of the publication 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.

Certification	Owner or Agent's Name _____ M 31	Name and Telephone Number of Contact Person in Publisher's Office _____ M 33	USPS Employee's Signature _____ P 3	Round Stamp (Required) Date Mail Released _____ P 6
	Owner or Agent's Signature _____ M 32		Print USPS Employee's Name _____ P 4	
			Time _____ P 5	

PERIODICALS (PS3541) POSTAGE STATEMENT KEY

REQUIRED MAILER Responsibility Sections YELLOW HIGHLIGHTED AREAS

- M1 - Publication Title and Owner or News agent name
- M3 - Enter Post office Name, State, and zip+4 where mail is entered
- M4 - Select all blocks for postage statement sections (Part A-F) completed
- M6 - Price Category, Regular, Nonprofit, Classroom, Science of Agriculture (customer picks one)
- M7 - Combined Mailing, Yes or No
- M8 - Consolidated postage Statement, Yes or No
- M9 - Publication Number
- M10 - Publication Edition/Code (can be left blank if there's only one edition of the publication)
- M11 - Date mail entered at the Post Office
- M12 - Processing Category (customer picks one)
- M13 - Enter number of addressed pieces
- M14 - Enter total number and types of containers
- M15 - Enter Periodical Issue date
- M16 - Enter Periodical publishing frequency
- M19 - Enter weight per copy for Issue (Round off to 4 decimal places)
- M20 - Enter percentage of advertising in This Issue
- M24 - Enter postage from Part A (In County prices)
- M25 - Enter any postage from parts B-E (Outside County) that apply and enter subtotal for all
- M29 - Add total Outside County postage (M27+M28) and enter on this line
- M30 - Enter total of Inside County and Outside County postage (M24+M29)
- M31 - Read the Certification section and print Owner or Agent's Name
- M32 - Owner or Agent's Signature
- M33 - Name and telephone number of contact person in Publisher's Office

MAILER Complete ONLY If Applicable PINK HIGHLIGHTED AREAS

- M2 - If mailing agent is submitting mail on behalf of owner/permit holder enter their information
- M5 - Required if separate form is used for bundles and/or sack containers
- M17 - Statement Sequence Number (for example, if more than one statement is submitted, mailer may assign sequence numbers)
- M18 - Weight of a single ride-Along Piece
- M21 - If claiming automation rates, enter date of address Matching and Coding (date of the CASS certificate must be within the last 180 days)
- M22 - For carrier routed mail, enter date of Address matching and coding (the date must be updated within 90 days of the mailing date). *Exception: Simplified Address mailings
- M23 - Enter date of Carrier Route Sequencing (ECR Prices)
- M26 - If authorized a Preferred Price discount- multiply totals from B16, C, D & E by .05 and enter amount
- M27 - Subtract the Preferred Price discount from the Outside county Postage
- M28 - Enter amount from Part F if applicable (Outside County Ride-along and Repositionable Notes)

REQUIRED USPS Responsibility Sections GREEN HIGHLIGHTED AREAS

- P1 - Record date and time mailing was tendered to Post Office
- P2 - Weight of a single piece in pounds (use ten or more for average)
- P3 - Verifying Employees Signature (first and last name - must be original signature - no rubber stamps)
- P4 - Print Verifying employees' Name (first and last name - must be original - no rubber stamps)
- P5 - Time mail is cleared to P&DC
- P6 - Round Date Stamp (must be legible)