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PS Form 3602-R - Standard Mail - Permit Imprint

Final

Postage Summary

| | | | | | |
|-------------------------------------|--|-------------------------------------|---|--|--|
| Permit Holder: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031 -2506 Contact: ALAN MORSE (856) 933 - 0222 Ext. 275 elm@egpp.com | Mailing Agent: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031 -2506 Telephone: (856) 933-0222 Ext. 275 | Org. For Mailing is Prepared: | SHOP-A-HOLIC 15 N MAIN ST MARI BORO, NJ 07746 -1409 Telephone: (856) 933-2803 |
| Permit Holder's Permit: | Permit Imprint 1239 Price Eligibility: Regular | Mailing Agent's Permit: | Permit Imprint 1239 | Processing Category: | Flats |
| | CRID: 2527504 | | CRID: 2527504 | | CRID: 5684466 |
| Post Office Of Mailing: | BELLMAWR NJ 08099 | Mailer's Mailing Date: | 11/18/2011 | Weight of Single Piece: | 0.1110 lbs. |
| Total Pieces: | 3,200 pcs. | Total Weight: | 355.2000 lbs. | Total Postage: | \$ 464.96 |
| No. of simplified addressed pieces: | 0 | | | | |
| Sequencing Date: | 10/28/2011 | Address Matching Date - Automation: | | Address Matching Date - Carrier Route: | 10/28/2011 |
| No of Containers: | 1' MM Trays: | 2' MM Trays: | 2' EMM Trays: | Flat Trays: | Sacks: Pallets: 1 Other: |
| Statement Sequence No | SI SHOP ZONE 1 | | | | |
| Move Update Method: | Alternative Address Format | | | | |
| Mail-piece is a Product Sample: | NO | | Mailpieces contain a DVD/CD or other Disk: NO | | |
| Incentive Claimed: | N/A | | | | |
| Mail Arrival Date and Time: | 11/18/2011 13:59 | | Payment Date and Time: | | 11/18/2011 14:00 |
| Comments: | | | Caps Transaction Number:: | | 2011111813005800M1 |

Part F : Carrier Route Flats

| Line Number | Entry Discount | Title | Description | Price | Quantity | Postage |
|-------------|----------------|--------------|-----------------------------------|-------|-----------|--|
| F10 | DDU | Saturation | Flats 3.3 oz (0.2063 lbs) or less | 0.142 | 2794 pcs. | \$ 396.7480 |
| F11 | DDU | High Density | Flats 3.3 oz (0.2063 lbs) or less | 0.168 | 406 pcs. | \$ 68.2080 |
| | | | | | | Part F Postage: \$ 464.9560 |
| | | | | | | Total Postage From All Parts: \$ 464.9560 |
| | | | | | | Affixed Postage: \$ 0.00 |

Certification

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.

I hereby certify 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 the form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Signature

| | | |
|------------------------------|-------------------------|-----------|
| Signature of Mailer or Agent | Name of Mailer or Agent | Telephone |
|------------------------------|-------------------------|-----------|

Facsimile Form 3602-R

USPS Use Only

| | |
|--------------------------|---|
| Weight of a Single Piece | Are figures at left adjusted from mailer's entries? |
|--------------------------|---|

| | | |
|---|-------------------------------|---|
| | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Give Reason |
| Total Pieces 3,200 pcs. | Total Weight 355.2000 lbs. | Date Mailer Notified |
| Total Postage \$464.96 | | Contact |
| Presort Verification: Check One (If Applicable) <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Performed | | By (Initials) |
| I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage price claimed; (2) Proper preparation (and presort where required); and (3) proper completion of postage statement; and (4) payment of annual fee (if required). | | |
| Verifying Employee's Signature | | Verifying Employee's Name |
| | | Round Stamp Required |
| Optional Procedure No | Location Code 0131K | Mailing Date |

Facsimile Form 3602-R

| Verification | Request Source | Performance Status | Disposition | Performance Type | Performance Percentage | Additional Postage | Cost Avoidance |
|---|--------------------------------------|--------------------|-------------|------------------|------------------------|--------------------|----------------|
| eMIR cursory review | | Not Performed | N/A | | N/A | | |
| Weigh Entire Mailing | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Bundle Preparation | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Manual Presort | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Plant Verified Drop Shipment Verification | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Total: | | | | | | \$0.00 | \$0.00 |

This mailing has been inspected concerning:
 (1) eligibility for postage prices claimed;
 (2) proper preparation (*and presort where required*);
 (3) proper completion of postage statement; and
 (4) payment of annual fee (*if required*).

2

PS Form 3602-R - Standard Mail - Permit Imprint

Final

Postage Summary

| | | | | | |
|-------------------------------------|---|-------------------------------------|--|---|--|
| Permit Holder: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031-2506 Contact: ALAN MORSE (856) 933 - 0222 Ext. 275 elm@egpp.com | Mailing Agent: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031-2506 Telephone: (856) 933-0222 Ext. 275 | Org. For Mailing is Prepared: | SHOP-A-HOLIC 15 N MAIN ST MARLBORO, NJ 07746-1409 Telephone: (856) 933-2803 |
| Permit Holder's Permit: | Permit Imprint 1239 Price Eligibility: Regular | Mailing Agent's Permit: | Permit Imprint 1239 | Processing Category: | Flats |
| | CRID: 2527504 | | CRID: 2527504 | | CRID: 5684466 |
| Post Office Of Mailing: | BELLMAWR NJ 08099 | Mailer's Mailing Date: | 11/18/2011 | Weight of Single Piece: | 0.1100 lbs. |
| Total Pieces: | 5,000 pcs. | Total Weight: | 550.0000 lbs. | Total Postage: | \$ 710.00 |
| No. of simplified addressed pieces: | 0 | | | | |
| Sequencing Date: | 10/28/2011 | Address Matching Date - Automation: | | Address Matching Date - Carrier Route: | 10/28/2011 |
| No of Containers: | 1' MM Trays: | 2' MM Trays: | 2' EMM Trays: | Flat Trays: | Sacks: Pallets: 2 Other: |
| Statement Sequence No | SI SHOP ZONE 2 | | | | |
| Move Update Method: | Alternative Address Format | | | | |
| Mail-piece is a Product Sample: | NO | | Mailpieces contain a DVD/CD or other Disk: NO | | |
| Incentive Claimed: | N/A | | | | |
| Mail Arrival Date and Time: | 11/18/2011 12:52 | | Payment Date and Time: | | 11/18/2011 12:54 |
| | | | | Caps Transaction Number: 2011111811540101M1 | |
| Comments: | | | | | |

Part F : Carrier Route Flats

| Line Number | Entry Discount | Title | Description | Price | Quantity | Postage |
|-------------|----------------|------------|-----------------------------------|-------|-----------|--|
| F10 | DDU | Saturation | Flats 3.3 oz (0.2063 lbs) or less | 0.142 | 5000 pcs. | \$ 710.0000 |
| | | | | | | Part F Postage: \$ 710.0000 |
| | | | | | | Total Postage From All Parts: \$ 710.0000 |
| | | | | | | Affixed Postage: \$ 0.00 |

Certification

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.

I hereby certify 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 the form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Signature

| | | |
|------------------------------|-------------------------|-----------|
| Signature of Mailer or Agent | Name of Mailer or Agent | Telephone |
|------------------------------|-------------------------|-----------|

Facsimile Form 3602-R

USPS Use Only

| | |
|--------------------------|--|
| Weight of a Single Piece | Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Give Reason |
|--------------------------|--|

| | | |
|---|-------------------------------|---------------------------|
| Total Pieces 5,000 pcs. | Total Weight 550.0000 lbs. | Date Mailer Notified |
| Total Postage \$710.00 | | Contact |
| Presort Verification: Check One (If Applicable) <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Performed | | By (Initials) |
| I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage price claimed; (2) Proper preparation (and presort where required); and (3) proper completion of postage statement; and (4) payment of annual fee (if required). | | |
| Verifying Employee's Signature | | Verifying Employee's Name |
| | | Round Stamp Required |
| Optional Procedure No | Location Code 0131K | Mailing Date |

Facsimile Form 3602-R

| Verification | Request Source | Performance Status | Disposition | Performance Type | Performance Percentage | Additional Postage | Cost Avoidance |
|---|--------------------------------------|--------------------|-------------|------------------|------------------------|--------------------|----------------|
| eMIR cursory review | | Not Performed | N/A | | N/A | | |
| Weigh Entire Mailing | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Bundle Preparation | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Manual Presort | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Plant Verified Drop Shipment Verification | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Total: | | | | | | \$0.00 | \$0.00 |

This mailing has been inspected concerning:
 (1) eligibility for postage prices claimed;
 (2) proper preparation (*and presort where required*);
 (3) proper completion of postage statement; and
 (4) payment of annual fee (*if required*).

4A

PS Form 3602-R - Standard Mail - Permit Imprint

Final

Postage Summary

| | | | | | |
|-------------------------------------|--|-------------------------------------|---|--|---|
| Permit Holder: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031 -2506 Contact: ALAN MORSE (856) 933 - 0222 Ext. 275 elm@egpp.com | Mailing Agent: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031 -2506 Telephone: (856) 933-0222 Ext. 275 | Org. For Mailing is Prepared: | SHOP-A-HOLIC 15 N MAIN ST MARLBORO, NJ 07746 -1409 Telephone: (856) 933-2803 |
| Permit Holder's Permit: | Permit Imprint 1239 Price Eligibility: Regular | Mailing Agent's Permit: | Permit Imprint 1239 | Processing Category: | Flats |
| | CRID: 2527504 | | CRID: 2527504 | | CRID: 5684466 |
| Post Office Of Mailing: | BELLMAWR NJ 08099 | Mailer's Mailing Date: | 11/18/2011 | Weight of Single Piece: | 0.1120 lbs. |
| Total Pieces: | 10,465 pcs. | Total Weight: | 1,172.0800 lbs. | Total Postage: | \$ 1,486.03 |
| No. of simplified addressed pieces: | 0 | | | | |
| Sequencing Date: | 10/28/2011 | Address Matching Date - Automation: | 10/28/2011 | Address Matching Date - Carrier Route: | 10/28/2011 |
| No of Containers: | 1' MM Trays: | 2' MM Trays: | 2' EMM Trays: | Flat Trays: | Sacks: Pallets: 3 Other: |
| Statement Sequence No | sa shop zone 4a | | | | |
| Move Update Method: | Alternative Address Format | | | | |
| Mail-piece is a Product Sample: | NO | | Mailpieces contain a DVD/CD or other Disk: | NO | |
| Incentive Claimed: | N/A | | | | |
| Mail Arrival Date and Time: | 11/18/2011 23:41 | Payment Date and Time: | 11/18/2011 23:52 | Caps Transaction Number: | 2011111822525100M1 |
| Comments: | | | | | |

Part F : Carrier Route Flats

| Line Number | Entry Discount | Title | Description | Price | Quantity | Postage |
|-------------|----------------|------------|-----------------------------------|-------|--------------------------------------|----------------------|
| F10 | DDU | Saturation | Flats 3.3 oz (0.2063 lbs) or less | 0.142 | 10465 pcs. | \$ 1,486.0300 |
| | | | | | Part F Postage: | \$ 1,486.0300 |
| | | | | | Total Postage From All Parts: | \$ 1,486.0300 |
| | | | | | Affixed Postage: | \$ 0.00 |

Certification

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.

I hereby certify 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 the form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Signature

| | | |
|------------------------------|-------------------------|-----------|
| Signature of Mailer or Agent | Name of Mailer or Agent | Telephone |
|------------------------------|-------------------------|-----------|

Facsimile Form 3602-R

USPS Use Only

| | |
|--------------------------|---|
| Weight of a Single Piece | Are figures at left adjusted from mailer's entries? [] Yes [x] No If Yes, Give Reason |
|--------------------------|---|

| | | |
|---|---------------------------------|---------------------------|
| Total Pieces 10,465 pcs. | Total Weight 2,093.0000 lbs. | Date Mailer Notified |
| Total Postage \$1,486.03 | Contact | |
| Presort Verification: Check One (If Applicable) <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Performed | By (Initials) | |
| I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage price claimed; (2) Proper preparation (and presort where required); and (3) proper completion of postage statement; and (4) payment of annual fee (if required). | | |
| Verifying Employee's Signature | | Verifying Employee's Name |
| | | Round Stamp Required |
| | | |
| Optional Procedure No | Location Code 0131B | Mailing Date |

Facsimile Form 3602-R

| Verification | Request Source | Performance Status | Disposition | Performance Type | Performance Percentage | Additional Postage | Cost Avoidance |
|---|---|--------------------|-------------|--------------------------|------------------------|--------------------|----------------|
| eMIR Cursory review | | Not Performed | N/A | | N/A | | |
| Weigh Entire Mailing | Mailer declared information is in error or incomplete | Performed | N/A | Weigh Verification Error | 100% | N/A | N/A |
| Bundle Preparation | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Manual Presort | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Plant Verified Drop Shipment Verification | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Total: | | | | | | \$0.00 | \$0.00 |

This mailing has been inspected concerning:
 (1) eligibility for postage prices claimed;
 (2) proper preparation (*and presort where required*);
 (3) proper completion of postage statement; and
 (4) payment of annual fee (*if required*).

4B

PS Form 3602-R - Standard Mail - Permit Imprint

Final

Postage Summary

| | | | | | |
|-------------------------------------|---|-------------------------------------|--|--|--|
| Permit Holder: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031-2506 Contact: ALAN MORSE (856) 933-0222 Ext. 275 elm@egpp.com | Mailing Agent: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031-2506 Telephone: (856) 933-0222 Ext. 275 | Org. For Mailing is Prepared: | SHOP-A-HOLIC 15 N MAIN ST MARLBORO, NJ 07746-1409 Telephone: (856) 933-2803 |
| Permit Holder's Permit: | Permit Imprint 1239 Price Eligibility: Regular | Mailing Agent's Permit: | Permit Imprint 1239 | Processing Category: | Flats |
| | CRID: 2527504 | | CRID: 2527504 | | CRID: 5684466 |
| Post Office Of Mailing: | BELLMAWR NJ 08099 | Mailer's Mailing Date: | 11/18/2011 | Weight of Single Piece: | 0.1125 lbs. |
| Total Pieces: | 8,282 pcs. | Total Weight: | 931.7250 lbs. | Total Postage: | \$ 1,176.04 |
| No. of simplified addressed pieces: | 0 | | | | |
| Sequencing Date: | 10/28/2011 | Address Matching Date - Automation: | 10/28/2011 | Address Matching Date - Carrier Route: | 10/28/2011 |
| No of Containers: | 1' MM Trays: | 2' MM Trays: | 2' EMM Trays: | Flat Trays: | Sacks: Pallets: 3 Other: |
| Statement Sequence No | SI Shop 4B | | | | |
| Move Update Method: | Alternative Address Format | | | | |
| Mail-piece is a Product Sample: | NO | | Mailpieces contain a DVD/CD or other Disk: | NO | |
| Incentive Claimed: | N/A | | | | |
| Mail Arrival Date and Time: | 11/18/2011 23:46 | Payment Date and Time: | 11/18/2011 23:47 | Caps Transaction Number: | 201111182247500011 |
| Comments: | | | | | |

Part F : Carrier Route Flats

| Line Number | Entry Discount | Title | Description | Price | Quantity | Postage |
|-------------|----------------|------------|-----------------------------------|-------|--------------------------------------|----------------------|
| F10 | DDU | Saturation | Flats 3.3 oz (0.2063 lbs) or less | 0.142 | 8282 pcs. | \$ 1,176.0440 |
| | | | | | Part F Postage: | \$ 1,176.0440 |
| | | | | | Total Postage From All Parts: | \$ 1,176.0440 |
| | | | | | Affixed Postage: | \$ 0.00 |

Certification

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.

I hereby certify 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 the form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Signature

| | | |
|------------------------------|-------------------------|-----------|
| Signature of Mailer or Agent | Name of Mailer or Agent | Telephone |
|------------------------------|-------------------------|-----------|

Facsimile Form 3602-R

USPS Use Only

| | |
|--------------------------|--|
| Weight of a Single Piece | Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Give Reason |
|--------------------------|--|

| | | |
|---|-------------------------------|---------------------------|
| Total Pieces 8,282 pcs. | Total Weight 931.7000 lbs. | Date Mailer Notified |
| Total Postage \$1,176.04 | | Contact |
| Presort Verification: Check One (If Applicable) <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Performed | | By (Initials) |
| I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage price claimed; (2) Proper preparation (and presort where required); and (3) proper completion of postage statement; and (4) payment of annual fee (if required). | | |
| Verifying Employee's Signature | | Verifying Employee's Name |
| | | Round Stamp Required |
| | | |
| Optional Procedure No | Location Code 0131B | Mailing Date |

Facsimile Form 3602-R

| Verification | Request Source | Performance Status | Disposition | Performance Type | Performance Percentage | Additional Postage | Cost Avoidance |
|---|--------------------------------------|--------------------|-------------|------------------|------------------------|--------------------|----------------|
| eMIR cursory review | | Not Performed | N/A | | N/A | | |
| Weigh Entire Mailing | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Bundle Preparation | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Manual Presort | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Plant Verified Drop Shipment Verification | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Total: | | | | | | \$0.00 | \$0.00 |

This mailing has been inspected concerning:
 (1) eligibility for postage prices claimed;
 (2) proper preparation (and presort where required);
 (3) proper completion of postage statement; and
 (4) payment of annual fee (if required).

PS Form 3602-R - Standard Mail - Permit Imprint

5

Final

Postage Summary

| | | | | | |
|-------------------------------------|--|-------------------------------------|---|--|---|
| Permit Holder: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031 -2506 Contact: ALAN MORSE (856) 933 - 0222 Ext. 275 elm@egpp.com | Mailing Agent: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031 -2506 Telephone: (856) 933-0222 Ext. 275 | Org. For Mailing is Prepared: | SHOP-A-11011C 15 N MAIN ST MARIBORO, NJ 07746 1409 Telephone: (856) 933-2803 |
| Permit Holder's Permit: | Permit Imprint 1239 Price Eligibility: Regular | Mailing Agent's Permit: | Permit Imprint 1239 | Processing Category: | Flats |
| | CRID: 2527504 | | CRID: 2527504 | | CRID: 5684466 |
| Post Office Of Mailing: | BELLMAWR NJ 08099 | Mailer's Mailing Date: | 11/18/2011 | Weight of Single Piece: | 0.1120 lbs. |
| Total Pieces: | 9,634 pcs. | Total Weight: | 1,079.0080 lbs. | Total Postage: | \$ 1,368.03 |
| No. of simplified addressed pieces: | 0 | | | | |
| Sequencing Date: | 10/28/2011 | Address Matching Date - Automation: | | Address Matching Date - Carrier Route: | 10/28/2011 |
| No of Containers: | 1' MM Trays: | 2' MM Trays: | 2' EMM Trays: | Flat Trays: | Sacks: Pallets: 3 Other: |
| Statement Sequence No | SI SHOP ZONE 5 | | | | |
| Move Update Method: | Alternative Address Format | | | | |
| Mail-piece is a Product Sample: | NO | | Mailpieces contain a DVD/CD or other Disk: | NO | |
| Incentive Claimed: | N/A | | | | |
| Mail Arrival Date and Time: | 11/18/2011 16:28 | | Payment Date and Time: | 11/18/2011 16:30 | |
| Comments: | | | Caps Transaction Number: | 2011111815304690M1 | |

Part F : Carrier Route Flats

| Line Number | Entry Discount | Title | Description | Price | Quantity | Postage |
|-------------|----------------|------------|-----------------------------------|-------|-----------|---|
| F10 | DDU | Saturation | Flats 3.3 oz (0.2063 lbs) or less | 0.142 | 9634 pcs. | \$ 1,368.0280 |
| | | | | | | Part F Postage: \$ 1,368.0280 |
| | | | | | | Total Postage From All Parts: \$ 1,368.0280 |
| | | | | | | Affixed Postage: \$ 0.00 |

Certification

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.

I hereby certify 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 the form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Signature

| | | |
|------------------------------|-------------------------|-----------|
| Signature of Mailer or Agent | Name of Mailer or Agent | Telephone |
|------------------------------|-------------------------|-----------|

Facsimile Form 3602-R

USPS Use Only

| | |
|--------------------------|--|
| Weight of a Single Piece | Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Give Reason |
|--------------------------|--|

| | | |
|---|---------------------------------|---------------------------|
| Total Pieces 9,634 pcs. | Total Weight 1,079.0080 lbs. | Date Mailer Notified |
| Total Postage \$1,368.03 | | Contact |
| Presort Verification: Check One(If Applicable) <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Performed | | By (Initials) |
| I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage price claimed; (2) Proper preparation (and presort where required); and (3) proper completion of postage statement; and (4) payment of annual fee (if required). | | |
| Verifying Employee's Signature | | Verifying Employee's Name |
| | | Round Stamp Required |
| Optional Procedure No | Location Code 0131K | Mailing Date |

Facsimile Form 3602-R

| Verification | Request Source | Performance Status | Disposition | Performance Type | Performance Percentage | Additional Postage | Cost Avoidance |
|---|--------------------------------------|--------------------|-------------|------------------|------------------------|--------------------|----------------|
| eMIR cursory review | | Not Performed | N/A | | N/A | | |
| Weigh Entire Mailing | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Bundle Preparation | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Manual Presort | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Plant Verified Drop Shipment Verification | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Total: | | | | | | \$0.00 | \$0.00 |

This mailing has been inspected concerning:
 (1) eligibility for postage prices claimed;
 (2) proper preparation (and presort where required);
 (3) proper completion of postage statement; and
 (4) payment of annual fee (if required).

PS Form 3602-R - Standard Mail - Permit Imprint

6

Final

Postage Summary

| | | | | | |
|-------------------------------------|--|-------------------------------------|---|--|--|
| Permit Holder: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031 -2506 Contact: ALAN MORSE (856) 933 - 0222 Ext. 275 elm@egpp.com | Mailing Agent: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031 -2506 Telephone: (856) 933-0222 Ext. 275 | Org. For Mailing is Prepared: | SHOP-A-HO LIC 15 N MAIN ST MARI BORO, NJ 07746 1409 Telephone: (856) 933-2803 |
| Permit Holder's Permit: | Permit Imprint 1239 Price Eligibility: Regular | Mailing Agent's Permit: | Permit Imprint 1239 | Processing Category: | Flats |
| | CRID: 2527504 | | CRID: 2527504 | | CRID: 5684466 |
| Post Office Of Mailing: | BELLMAWR NJ 08099 | Mailer's Mailing Date: | 11/18/2011 | Weight of Single Piece: | 0.1130 lbs. |
| Total Pieces: | 4,471 pcs. | Total Weight: | 505.2230 lbs. | Total Postage: | \$ 634.88 |
| No. of simplified addressed pieces: | 0 | | | | |
| Sequencing Date: | 10/28/2011 | Address Matching Date - Automation: | | Address Matching Date - Carrier Route: | 10/28/2011 |
| No of Containers: | 1' MM Trays: | 2' MM Trays: | 2' EMM Trays: | Flat Trays: | Sacks: Pallets: 2 Other: |
| Statement Sequence No | SI SHOP ZONE 6 | | | | |
| Move Update Method: | Alternative Address Format | | | | |
| Mail-piece is a Product Sample: | NO | | Mailpieces contain a DVD/CD or other Disk: | NO | |
| Incentive Claimed: | N/A | | | | |
| Mail Arrival Date and Time: | 11/18/2011 16:08 | | Payment Date and Time: | 11/18/2011 16:10 | |
| Comments: | | | Caps Transaction Number: | 201111181516230001 | |

Part F : Carrier Route Flats

| Line Number | Entry Discount | Title | Description | Price | Quantity | Postage |
|-------------|----------------|------------|-----------------------------------|-------|-----------|--|
| F10 | DDU | Saturation | Flats 3.3 oz (0.2063 lbs) or less | 0.142 | 4471 pcs. | \$ 634.8820 |
| | | | | | | Part F Postage: \$ 634.8820 |
| | | | | | | Total Postage From All Parts: \$ 634.8820 |
| | | | | | | Affixed Postage: \$ 0.00 |

Certification

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.

I hereby certify 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 the form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Signature

| | | |
|------------------------------|-------------------------|-----------|
| Signature of Mailer or Agent | Name of Mailer or Agent | Telephone |
|------------------------------|-------------------------|-----------|

Facsimile Form 3602-R

USPS Use Only

| | |
|--------------------------|--|
| Weight of a Single Piece | Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Give Reason |
|--------------------------|--|

| | | |
|---|-------------------------------|---------------------------|
| Total Pieces 4,471 pcs. | Total Weight 505.2230 lbs. | Date Mailer Notified |
| Total Postage \$634.88 | | Contact |
| Presort Verification: Check One(If Applicable) <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Performed | | By (Initials) |
| I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage price claimed; (2) Proper preparation (and presort where required); and (3) proper completion of postage statement; and (4) payment of annual fee (if required). | | |
| Verifying Employee's Signature | | Verifying Employee's Name |
| | | Round Stamp Required |
| Optional Procedure No | Location Code 0131K | Mailing Date |

Facsimile Form 3602-R

| Verification | Request Source | Performance Status | Disposition | Performance Type | Performance Percentage | Additional Postage | Cost Avoidance |
|---|--------------------------------------|--------------------|-------------|------------------|------------------------|--------------------|----------------|
| eMIR Cursory review | | Not Performed | N/A | | N/A | | |
| Weigh Entire Mailing | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Bundle Preparation | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Manual Presort | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Plant Verified Drop Shipment Verification | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Total: | | | | | | \$0.00 | \$0.00 |

This mailing has been inspected concerning:
 (1) eligibility for postage prices claimed;
 (2) proper preparation (and presort where required);
 (3) proper completion of postage statement; and
 (4) payment of annual fee (if required).

7

PS Form 3602-R - Standard Mail - Permit Imprint

Final

Postage Summary

| | | | | | |
|-------------------------------------|--|-------------------------------------|---|--|--|
| Permit Holder: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031 -2506 Contact: ALAN MORSE (856) 933 - 0222 Ext. 275 elm@egpp.com | Mailing Agent: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031 -2506 Telephone: (856) 933-0222 Ext. 275 | Org. For Mailing is Prepared: | SIHOP-A-HOLIC 15 N MAIN ST MARLBORO, NJ 07746 -1409 Telephone: (856) 933-2803 |
| Permit Holder's Permit: | Permit Imprint 1239 Price Eligibility: Regular | Mailing Agent's Permit: | Permit Imprint 1239 | Processing Category: | Flats |
| | CRID: 2527504 | | CRID: 2527504 | | CRID: 5684466 |
| Post Office Of Mailing: | BELLMAWR NJ 08099 | Mailer's Mailing Date: | 11/18/2011 | Weight of Single Piece: | 0.1120 lbs. |
| Total Pieces: | 4,000 pcs. | Total Weight: | 448.0000 lbs. | Total Postage: | \$ 568.00 |
| No. of simplified addressed pieces: | 0 | | | | |
| Sequencing Date: | 10/28/2011 | Address Matching Date - Automation: | | Address Matching Date - Carrier Route: | 10/28/2011 |
| No of Containers: | 1' MM Trays: | 2' MM Trays: | 2' EMM Trays: | Flat Trays: | Sacks: Pallets: 1 Other: |
| Statement Sequence No | SI SHOP ZONE 7 | | | | |
| Move Update Method: | Alternative Address Format | | | | |
| Mail-piece is a Product Sample: | NO | | Mailpieces contain a DVD/CD or other Disk: NO | | |
| Incentive Claimed: | N/A | | | | |
| Mail Arrival Date and Time: | 11/18/2011 13:43 | | Payment Date and Time: | | 11/18/2011 13:45 |
| | | | | Caps Transaction Number: | 2011111812453700M1 |
| Comments: | | | | | |

Part F : Carrier Route Flats

| Line Number | Entry Discount | Title | Description | Price | Quantity | Postage |
|-------------|----------------|------------|-----------------------------------|-------|-----------|--|
| F10 | DDU | Saturation | Flats 3.3 oz (0.2063 lbs) or less | 0.142 | 4000 pcs. | \$ 568.0000 |
| | | | | | | Part F Postage: \$ 568.0000 |
| | | | | | | Total Postage From All Parts: \$ 568.0000 |
| | | | | | | Affixed Postage: \$ 0.00 |

Certification

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.

I hereby certify 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 the form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Signature

| | | |
|------------------------------|-------------------------|-----------|
| Signature of Mailer or Agent | Name of Mailer or Agent | Telephone |
|------------------------------|-------------------------|-----------|

Facsimile Form 3602-R

USPS Use Only

| | |
|--------------------------|--|
| Weight of a Single Piece | Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Give Reason |
|--------------------------|--|

| | | |
|---|-------------------------------|---------------------------|
| Total Pieces 4,000 pcs. | Total Weight 448.0000 lbs. | Date Mailer Notified |
| Total Postage \$568.00 | | Contact |
| Presort Verification: Check One (If Applicable) <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Performed | | By (Initials) |
| I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage price claimed; (2) Proper preparation (and presort where required); and (3) proper completion of postage statement; and (4) payment of annual fee (if required). | | |
| Verifying Employee's Signature | | Verifying Employee's Name |
| | | Round Stamp Required |
| Optional Procedure No | Location Code 0131K | Mailing Date |

Facsimile Form 3602-R

| Verification | Request Source | Performance Status | Disposition | Performance Type | Performance Percentage | Additional Postage | Cost Avoidance |
|---|--------------------------------------|--------------------|-------------|------------------|------------------------|--------------------|----------------|
| eMIR cursory review | | Not Performed | N/A | | N/A | | |
| Weigh Entire Mailing | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Bundle Preparation | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Manual Presort | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Plant Verified Drop Shipment Verification | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Total: | | | | | | \$0.00 | \$0.00 |

This mailing has been inspected concerning:
 (1) eligibility for postage prices claimed;
 (2) proper preparation (and presort where required);
 (3) proper completion of postage statement; and
 (4) payment of annual fee (if required).

8A

PS Form 3602-R - Standard Mail - Permit Imprint

Final

Postage Summary

| | | | | | |
|-------------------------------------|---|-------------------------------------|--|--|---|
| Permit Holder: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031-2506 Contact: ALAN MORSE (856) 933 - 0222 Ext. 275 elm@egpp.com | Mailing Agent: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031-2506 Telephone: (856) 933-0222 Ext. 275 | Org. For Mailing is Prepared: | SHOP-A-HO LIC 15 N MAIN ST MARLBORO, NJ 07746-1409 Telephone: (856) 933-2803 |
| Permit Holder's Permit: | Permit Imprint 1239 Price Eligibility: Regular | Mailing Agent's Permit: | Permit Imprint 1239 | Processing Category: | Flats |
| | CRID: 2527504 | | CRID: 2527504 | | CRID: 5684466 |
| Post Office Of Mailing: | BELLMAWR NJ 08099 | Mailer's Mailing Date: | 11/18/2011 | Weight of Single Piece: | 0.1110 lbs. |
| Total Pieces: | 3,000 pcs. | Total Weight: | 333.0000 lbs. | Total Postage: | \$ 426.00 |
| No. of simplified addressed pieces: | 0 | | | | |
| Sequencing Date: | 10/28/2011 | Address Matching Date - Automation: | | Address Matching Date - Carrier Route: | 10/28/2011 |
| No of Containers: | 1' MM Trays: | 2' MM Trays: | 2' EMM Trays: | Flat Trays: | Sacks: Pallets: 1 Other: |
| Statement Sequence No | SI SHOP ZONE 8A | | | | |
| Move Update Method: | Alternative Address Format | | | | |
| Mail-piece is a Product Sample: | NO | | Mailpieces contain a DVD/CD or other Disk: | NO | |
| Incentive Claimed: | N/A | | | | |
| Mail Arrival Date and Time: | 11/18/2011 13:26 | | Payment Date and Time: | 11/18/2011 13:27 | |
| Comments: | | | Caps Transaction Number:: | 2011111812275600M1 | |

Part F : Carrier Route Flats

| Line Number | Entry Discount | Title | Description | Price | Quantity | Postage |
|-------------|----------------|------------|-----------------------------------|-------|-----------|---|
| F10 | DDU | Saturation | Flats 3.3 oz (0.2063 lbs) or less | 0.142 | 3000 pcs. | \$ 426.0000 |
| | | | | | | Part F Postage: \$ 426.0000 |
| | | | | | | Total Postage From All Parts: \$ 426.0000 |
| | | | | | | Affixed Postage: \$ 0.00 |

Certification

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.

I hereby certify 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 the form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Signature

| | | |
|------------------------------|-------------------------|-----------|
| Signature of Mailer or Agent | Name of Mailer or Agent | Telephone |
|------------------------------|-------------------------|-----------|

Facsimile Form 3602-R

USPS Use Only

| | |
|--------------------------|--|
| Weight of a Single Piece | Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Give Reason |
|--------------------------|--|

| | | |
|---|-------------------------------|----------------------|
| Total Pieces 3,000 pcs. | Total Weight 333.0000 lbs. | Date Mailer Notified |
| Total Postage \$426.00 | Contact | |
| Presort Verification: Check One (If Applicable) <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Performed | By (Initials) | |
| I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage price claimed; (2) Proper preparation (and presort where required); and (3) proper completion of postage statement; and (4) payment of annual fee (if required). | | |
| Verifying Employee's Signature | Verifying Employee's Name | |
| | Round Stamp Required | |
| Optional Procedure No | Location Code 0131K | Mailing Date |

Facsimile Form 3602-R

| Verification | Request Source | Performance Status | Disposition | Performance Type | Performance Percentage | Additional Postage | Cost Avoidance |
|---|--------------------------------------|--------------------|-------------|------------------|------------------------|--------------------|----------------|
| eMIR cursory review | | Not Performed | N/A | | N/A | | |
| Weigh Entire Mailing | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Bundle Preparation | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Manual Presort | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Plant Verified Drop Shipment Verification | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Total: | | | | | | \$0.00 | \$0.00 |

This mailing has been inspected concerning:
 (1) eligibility for postage prices claimed;
 (2) proper preparation (and presort where required);
 (3) proper completion of postage statement; and
 (4) payment of annual fee (if required).

8B

PS Form 3602-R - Standard Mail - Permit Imprint

Final

Postage Summary

| | | | | | |
|-------------------------------------|--|-------------------------------------|---|--|---|
| Permit Holder: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031 -2506 Contact: ALAN MORSE (856) 933 - 0222 Ext. 275 elm@egpp.com | Mailing Agent: | EVERGREEN POST PRESS DIVISION 101 HAAG AVE BELLMAWR, NJ 08031 -2506 Telephone: (856) 933-0222 Ext. 275 | Org. For Mailing is Prepared: | SHOP-A-HOLIC 15 N MAIN ST MARI BORO, NJ 07746 1409 Telephone: (856) 933-2803 |
| Permit Holder's Permit: | Permit Imprint 1239 Price Eligibility: Regular | Mailing Agent's Permit: | Permit Imprint 1239 | Processing Category: | Flats |
| | CRID: 2527504 | | CRID: 2527504 | | CRID: 5684466 |
| Post Office Of Mailing: | BELLMAWR NJ 08099 | Mailer's Mailing Date: | 11/18/2011 | Weight of Single Piece: | 0.1110 lbs. |
| Total Pieces: | 2,475 pcs. | Total Weight: | 274.7250 lbs. | Total Postage: | \$ 351.45 |
| No. of simplified addressed pieces: | 0 | | | | |
| Sequencing Date: | 10/28/2011 | Address Matching Date - Automation: | | Address Matching Date - Carrier Route: | 10/28/2011 |
| No of Containers: | 1' MM Trays: | 2' MM Trays: | 2' EMM Trays: | Flat Trays: | Sacks: Pallets: 1 Other: |
| Statement Sequence No | SI SHOP ZONE 8B | | | | |
| Move Update Method: | Alternative Address Format | | | | |
| Mail-piece is a Product Sample: | NO | | Mailpieces contain a DVD/CD or other Disk: NO | | |
| Incentive Claimed: | N/A | | | | |
| Mail Arrival Date and Time: | 11/18/2011 13:09 | | Payment Date and Time: | | 11/18/2011 13:10 |
| | | | | Caps Transaction Number: | 2011111812102900M1 |
| Comments: | | | | | |

Part F : Carrier Route Flats

| Line Number | Entry Discount | Title | Description | Price | Quantity | Postage |
|-------------|----------------|------------|-----------------------------------|-------|-----------|--|
| F10 | DDU | Saturation | Flats 3.3 oz (0.2063 lbs) or less | 0.142 | 2475 pcs. | \$ 351.4500 |
| | | | | | | Part F Postage: \$ 351.4500 |
| | | | | | | Total Postage From All Parts: \$ 351.4500 |
| | | | | | | Affixed Postage: \$ 0.00 |

Certification

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.

I hereby certify 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 the form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Signature

| | | |
|------------------------------|-------------------------|-----------|
| Signature of Mailer or Agent | Name of Mailer or Agent | Telephone |
|------------------------------|-------------------------|-----------|

Facsimile Form 3602-R

USPS Use Only

| | |
|--------------------------|--|
| Weight of a Single Piece | Are figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Give Reason |
|--------------------------|--|

| | | |
|---|-------------------------------|----------------------|
| Total Pieces 2,475 pcs. | Total Weight 274.7250 lbs. | Date Mailer Notified |
| Total Postage \$351.45 | Contact | |
| Presort Verification: Check One (If Applicable) <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Performed | By (Initials) | |
| I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage price claimed; (2) Proper preparation (and presort where required); and (3) proper completion of postage statement; and (4) payment of annual fee (if required). | | |
| Verifying Employee's Signature | Verifying Employee's Name | |
| | Round Stamp Required | |
| Optional Procedure No | Location Code 0131K | Mailing Date |

Facsimile Form 3602-R

| Verification | Request Source | Performance Status | Disposition | Performance Type | Performance Percentage | Additional Postage | Cost Avoidance |
|---|--------------------------------------|--------------------|-------------|------------------|------------------------|--------------------|----------------|
| eMIR cursory review | | Not Performed | N/A | | N/A | | |
| Weigh Entire Mailing | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Bundle Preparation | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Manual Presort | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Plant Verified Drop Shipment Verification | Verification not requested by system | Not Performed | N/A | | N/A | | |
| Total: | | | | | | \$0.00 | \$0.00 |

This mailing has been inspected concerning:
 (1) eligibility for postage prices claimed;
 (2) proper preparation (and presort where required);
 (3) proper completion of postage statement; and
 (4) payment of annual fee (if required).