UNITED STATES POSTAL SERVICE®

Shipment Confirmation Acceptance Notice

A. Mailer Action

Note To Mailer: The labels and volumes associated to this form online **must** match the labeled packages being presented to the USPS® employee with this form.

Shipment Date: 08/05/25

Shipped From:

Name: SHIPPING DEPT

Address: 16 Applegate Dr

City: Robbinsville Twp

State: NJ ZIP+4: 08691

Type of Mail	Volume
Priority Mail Express®*	0
Priority Mail®	0
USPS Ground Advantage™	1
Returns	0
International*	0
USPS Connect™ Local	0
USPS Connect™ Local Mail	0
USPS Connect™ Regional	0
Other	0
Total	1

*Start time for products with service guarantees will begin when mail arrives at the local Post Office™ and items receive individual processing and acceptance scans.

B. USPS Action

USPS EMPLOYEE: Please scan upon pickup or receipt of mail.
Leave form with customer or in customer's mail receptacle.

USPS SCAN AT ACCEPTANCE

9275 0903 8159 9900 0019 6834 76