

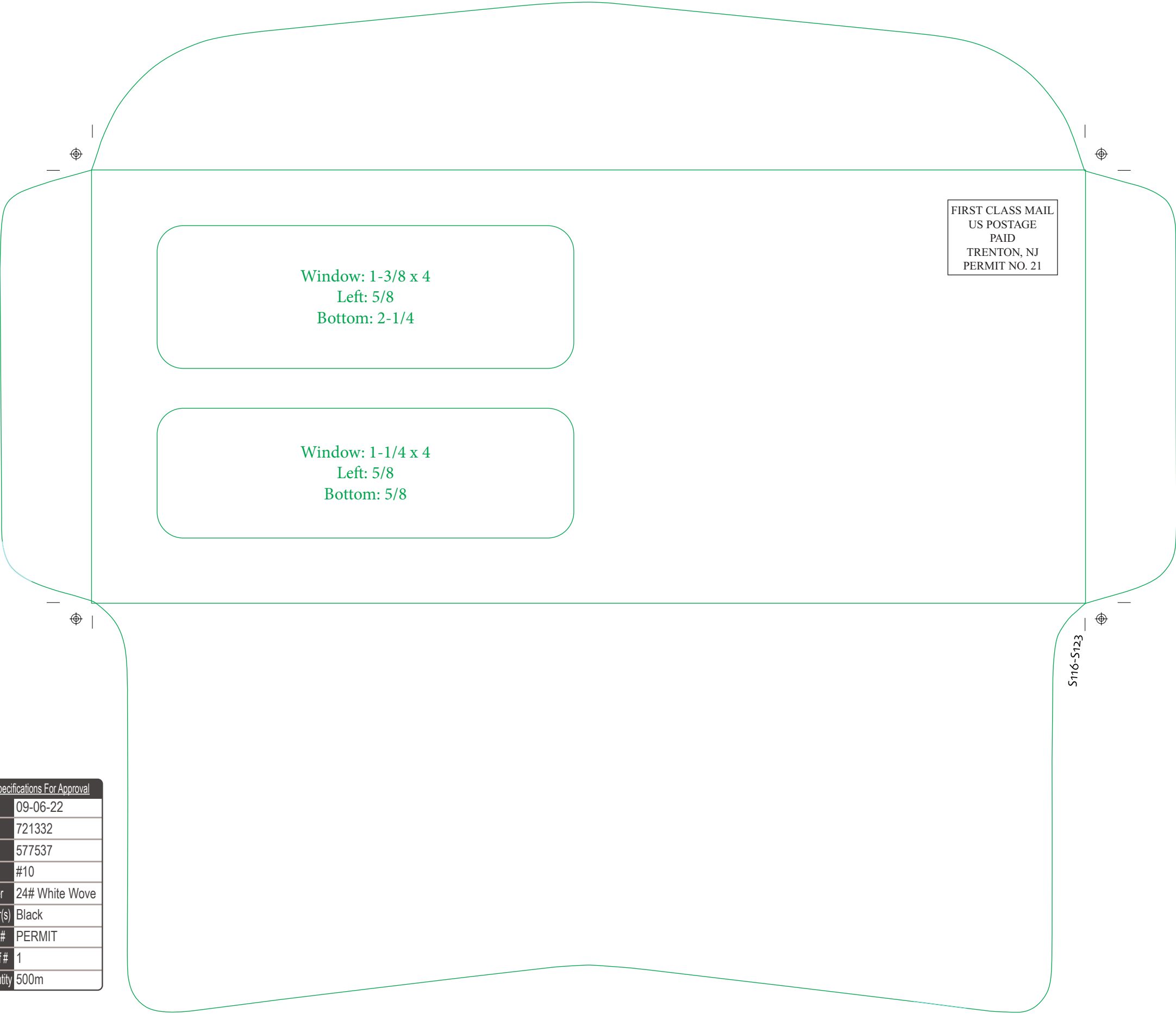
Specifications For Approval	
Date	03-14-22
SO#	
WO#	
Size	#10
Paper	24# White Wove
Color(s)	Black+485
Tint	n/a
Proof #	2
Quantity	700m

STOP! Before the undersigned approves this proof, the undersigned must be absolutely certain that all copy, images and construction of the envelope (including, without limitation, all addresses, postal indicias, URLs, text, content, artwork, logos, designs, copy and slogans) are complete and accurate. If this is not true, the undersigned must (i) not sign this proof indicating approval, and (ii) indicate prominently and in writing to printer/envelope manufacturer anything that is not complete or accurate and provide the desired or necessary change, if any. By signing this proof, the undersigned and their company assumes complete and total responsibility for this proof and the resulting product including, without limitation, all risks of mistakes, omissions, infringement, compliance with all USPS or other postal regulations, as well as all legal requirements pertaining to this proof. This means, without limitation, that the undersigned shall bear all costs, including but not limited to monetary or other penalties or any other financial obligation, for altering, supplementing or otherwise correcting the product after such approval. The undersigned acknowledges and agrees that the printer/envelope manufacturer's role, communications and advice regarding any of the foregoing are advisory in nature, and the printer/envelope manufacturer shall have no, and disclaims all, obligations with respect to such role, communications and advice. By approving this Proof digitally (via email, text, fax or other electronic means), the person so approving represents and warrants to printer/envelope manufacturer that he/she is duly authorized to bind the customer in the same manner and effect as signing this Proof.

Approval Signature: _____

Printed Name: _____ Date: _____

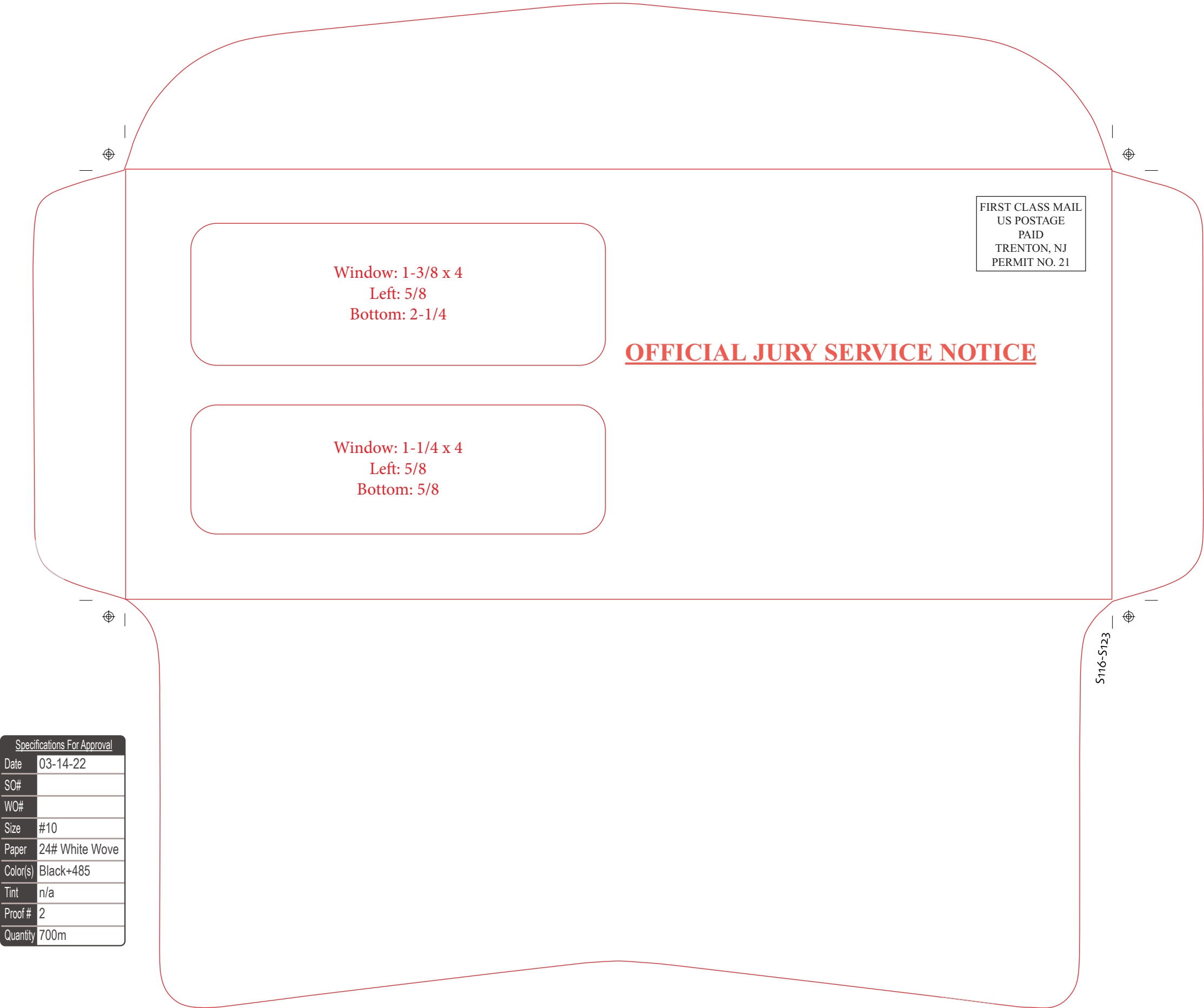
Specifications For Approval	
Date	09-06-22
SO#	721332
WO#	577537
Size	#10
Paper	24# White Wove
Color(s)	Black
Form#	PERMIT
Proof #	1
Quantity	500m



STOP! Before the undersigned approves this proof, the undersigned must be absolutely certain that all copy, images and construction of the envelope (including, without limitation, all addresses, postal indicias, URLs, text, content, artwork, logos, designs, copy and slogans) are complete and accurate. If this is not true, the undersigned must (i) not sign this proof indicating approval, and (ii) indicate prominently and in writing to printer/envelope manufacturer anything that is not complete or accurate and provide the desired or necessary change, if any. By signing this proof, the undersigned and their company assumes complete and total responsibility for this proof and the resulting product including, without limitation, all risks of mistakes, omissions, infringement, compliance with all USPS or other postal regulations, as well as all legal requirements pertaining to this proof. This means, without limitation, that the undersigned shall bear all costs, including but not limited to monetary or other penalties or any other financial obligation, for altering, supplementing or otherwise correcting the product after such approval. The undersigned acknowledges and agrees that the printer/envelope manufacturer's role, communications and advice regarding any of the foregoing are advisory in nature, and the printer/envelope manufacturer shall have no, and disclaims all, obligations with respect to such role, communications and advice. By approving this Proof digitally (via email, text, fax or other electronic means), the person so approving represents and warrants to printer/envelope manufacturer that he/she is duly authorized to bind the customer in the same manner and effect as signing this Proof.

Approval Signature: _____

Printed Name: _____ Date: _____



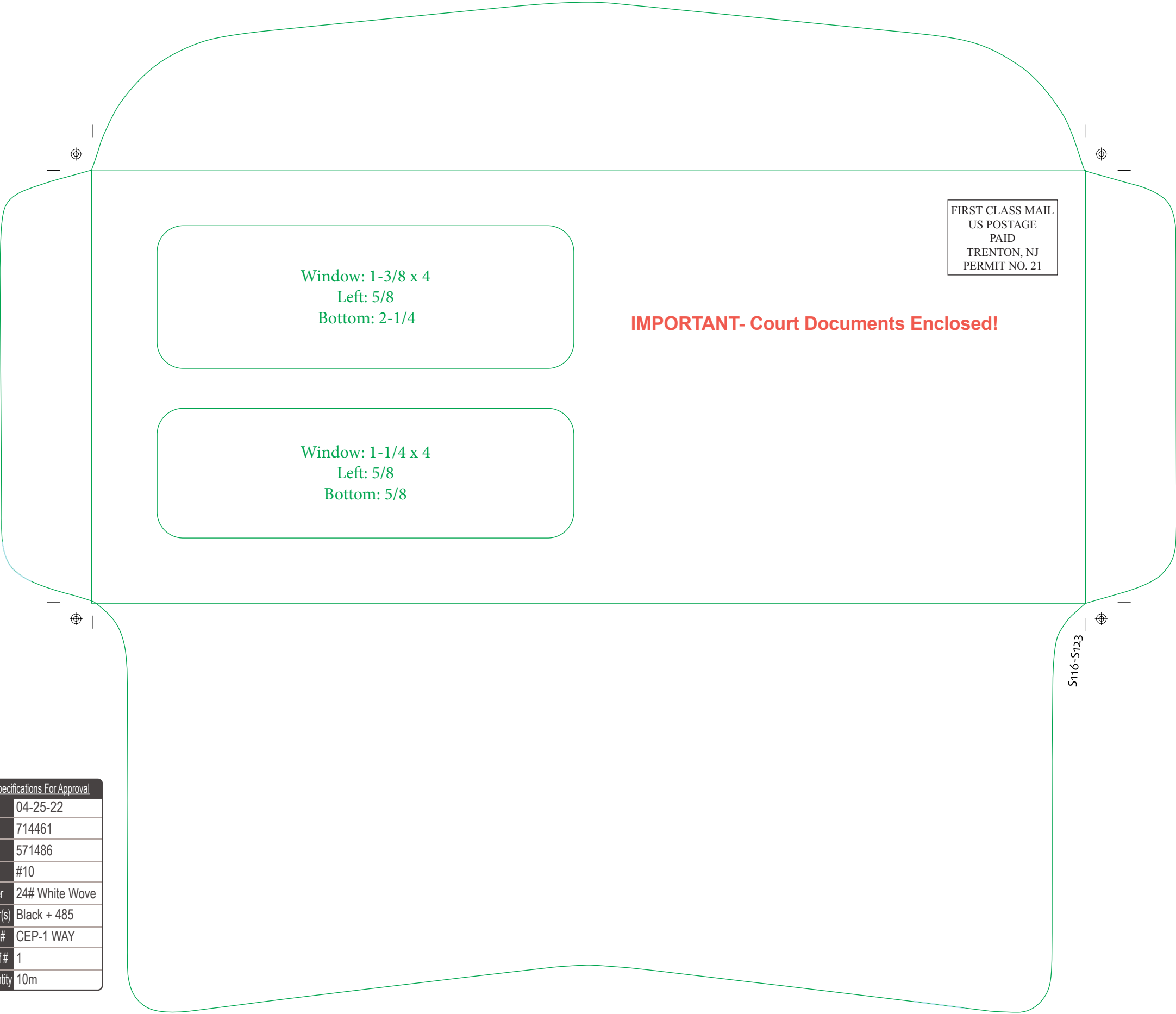
Specifications For Approval	
Date	03-14-22
SO#	
WO#	
Size	#10
Paper	24# White Wove
Color(s)	Black+485
Tint	n/a
Proof #	2
Quantity	700m

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Approval Signature: _____

Printed Name: _____ Date: _____

Specifications For Approval	
Date	04-25-22
SO#	714461
WO#	571486
Size	#10
Paper	24# White Wove
Color(s)	Black + 485
Form#	CEP-1 WAY
Proof #	1
Quantity	10m

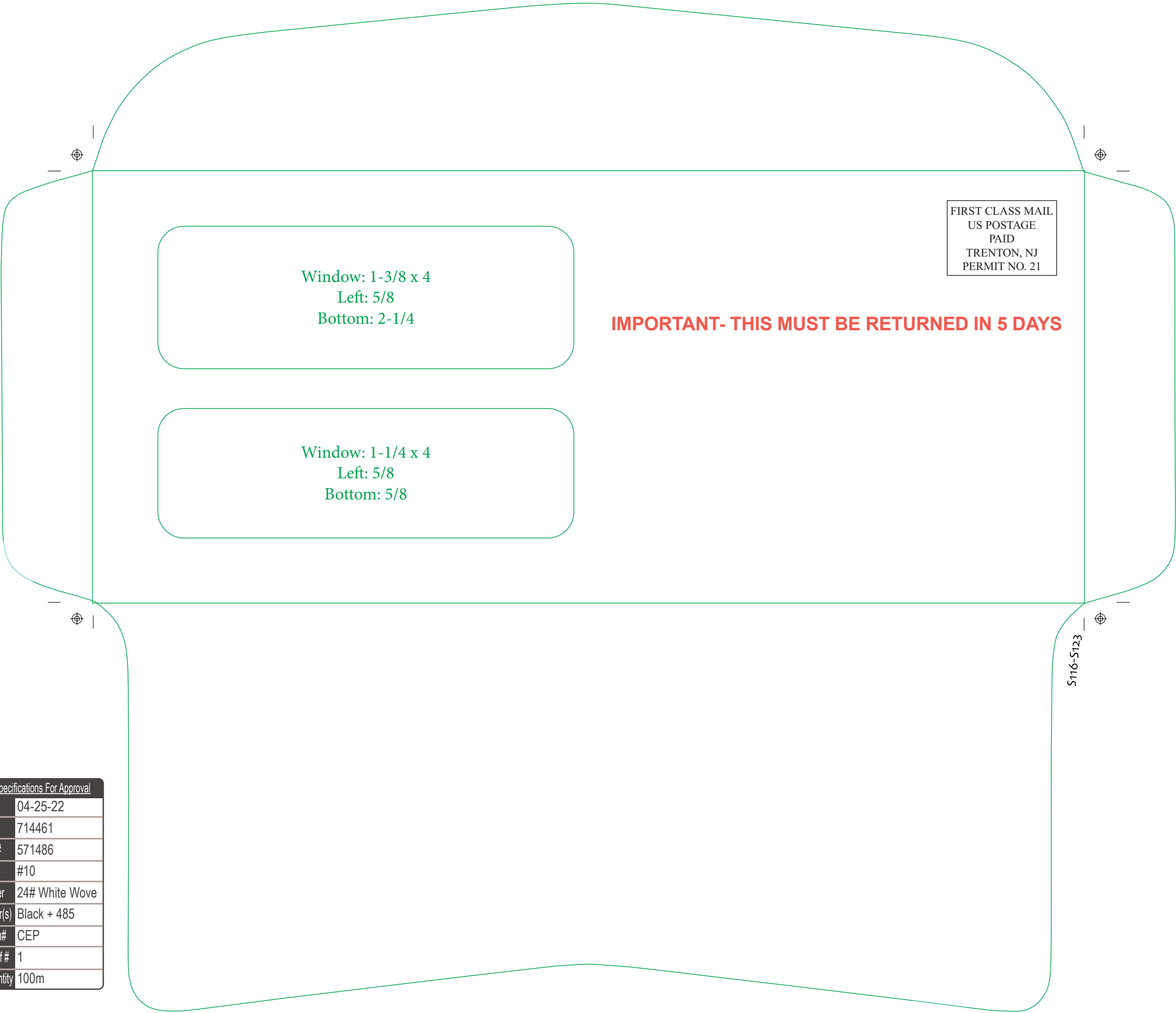


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Approval Signature: _____

Printed Name: _____ Date: _____

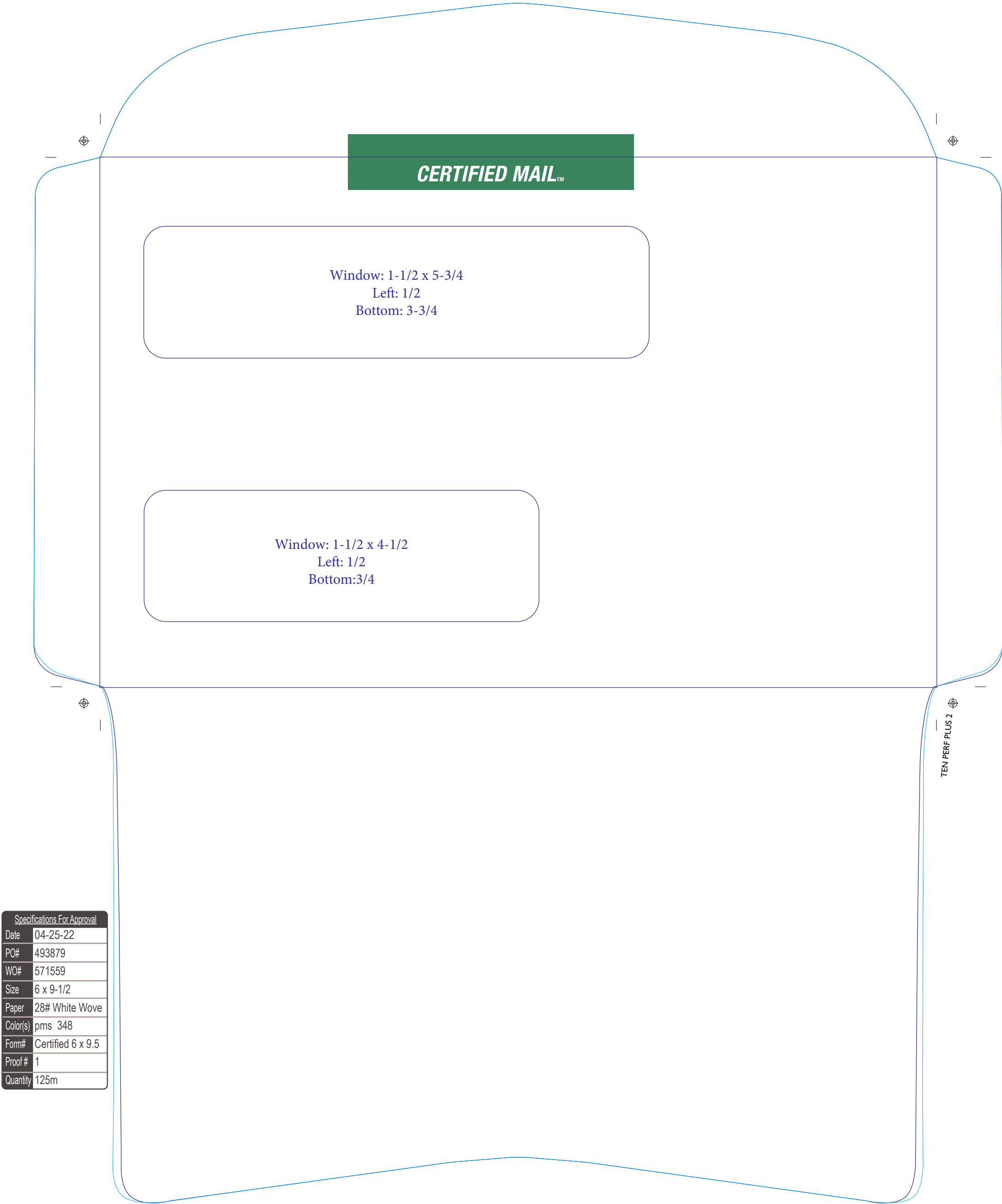
Specifications For Approval	
Date	04-25-22
SO#	714461
WO#	571486
Size	#10
Paper	24# White Wove
Color(s)	Black + 485
Form#	CEP
Proof #	1
Quantity	100m



STOP! Before the undersigned approves this proof, the undersigned must be absolutely certain that all copy, images and construction of the envelope (including, without limitation, all addresses, postal indicias, URLs, text, content, artwork, logos, designs, copy and slogans) are complete and accurate. If this is not true, the undersigned must (i) not sign this proof indicating approval, and (ii) indicate prominently and in writing to printer/envelope manufacturer anything that is not complete or accurate and provide the desired or necessary change, if any. By signing this proof, the undersigned and their company assumes complete and total responsibility for this proof and the resulting product including, without limitation, all risks of mistakes, omissions, infringement, compliance with all USPS or other postal regulations, as well as all legal requirements pertaining to this proof. This means, without limitation, that the undersigned shall bear all costs, including but not limited to monetary or other penalties or any other financial obligation, for altering, supplementing or otherwise correcting the product after such approval. The undersigned acknowledges and agrees that the printer/envelope manufacturer's role, communications and advice regarding any of the foregoing are advisory in nature, and the printer/envelope manufacturer shall have no, and disclaims all, obligations with respect to such role, communications and advice. By approving this Proof digitally (via email, text, fax or other electronic means), the person so approving represents and warrants to printer/envelope manufacturer that he/she is duly authorized to bind the customer in the same manner and effect as signing this Proof.

Approval Signature: _____

Printed Name: _____ Date: _____



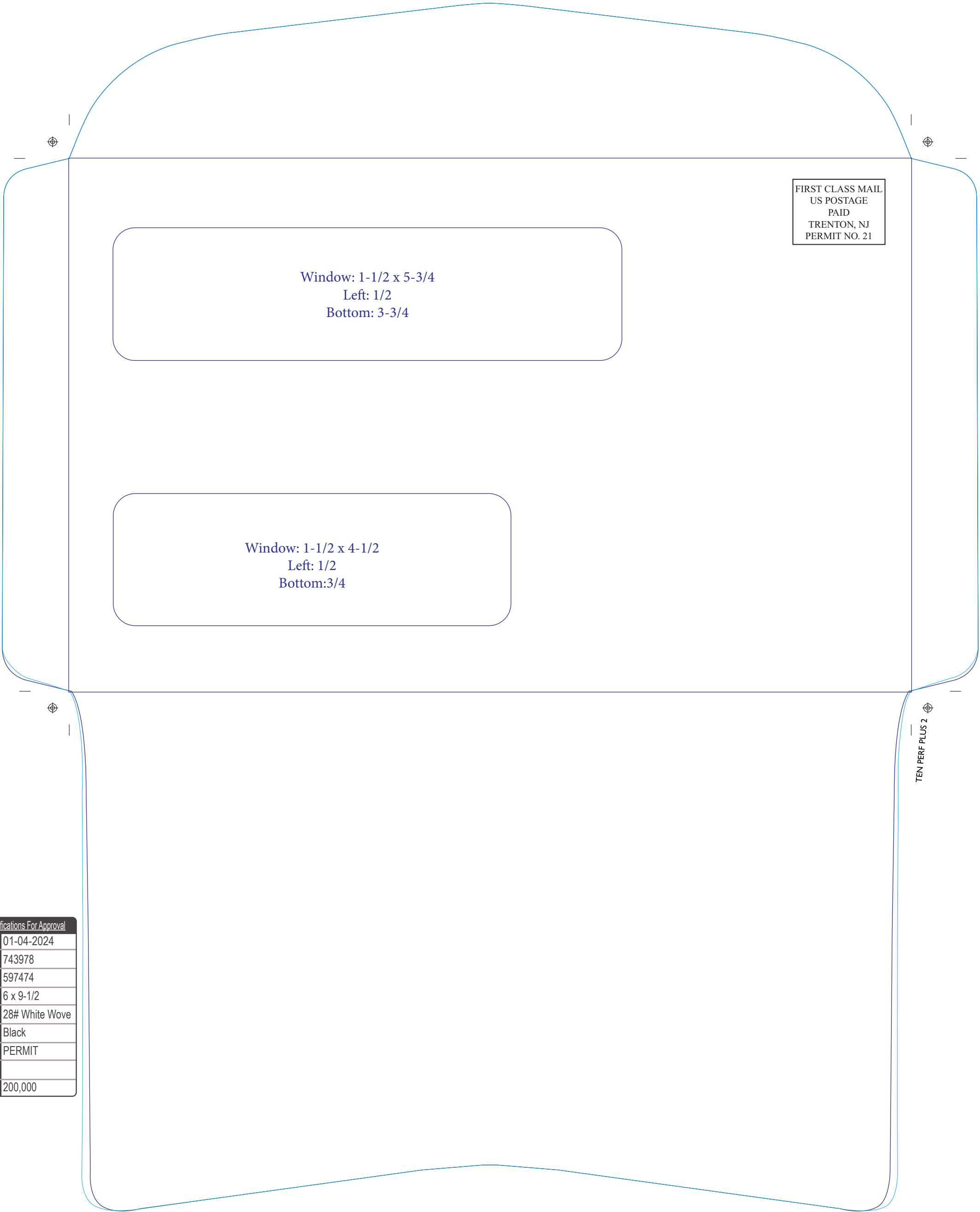
Specifications For Approval	
Date	04-25-22
PO#	493879
WO#	571559
Size	6 x 9-1/2
Paper	28# White Wove
Color(s)	pms 348
Form#	Certified 6 x 9.5
Proof #	1
Quantity	125m

STOP! Before the undersigned approves this proof, the undersigned must be absolutely certain that all copy, images and construction of the envelope (including, without limitation, all addresses, postal indicias, URLs, text, content, artwork, logos, designs, copy and slogans) are complete and accurate. If this is not true, the undersigned must (i) not sign this proof indicating approval, and (ii) indicate prominently and in writing to printer/envelope manufacturer anything that is not complete or accurate and provide the desired or necessary change, if any. By signing this proof, the undersigned and their company assumes complete and total responsibility for this proof and the resulting product including, without limitation, all risks of mistakes, omissions, infringement, compliance with all USPS or other postal regulations, as well as all legal requirements pertaining to this proof. This means, without limitation, that the undersigned shall bear all costs, including but not limited to monetary or other penalties or any other financial obligation, for altering, supplementing or otherwise correcting the product after such approval. The undersigned acknowledges and agrees that the printer/envelope manufacturer's role, communications and advice regarding any of the foregoing are advisory in nature, and the printer/envelope manufacturer shall have no, and disclaims all, obligations with respect to such role, communications and advice. By approving this Proof digitally (via email, text, fax or other electronic means), the person so approving represents and warrants to printer/envelope manufacturer that he/she is duly authorized to bind the customer in the same manner and effect as signing this Proof.

Approval Signature: _____

Printed Name: _____ Date: _____

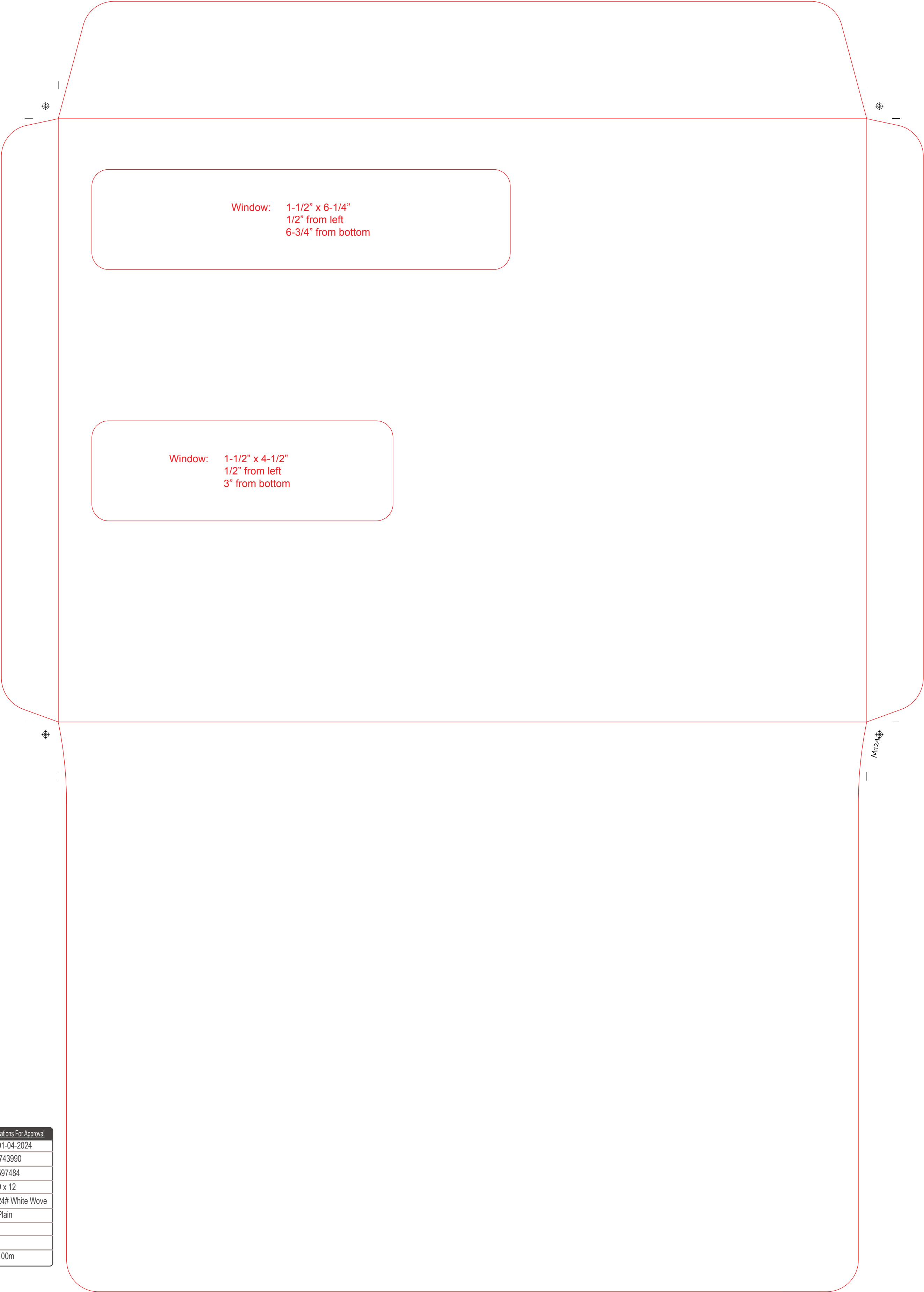
Specifications For Approval	
Date	01-04-2024
SO#	743978
WO#	597474
Size	6 x 9-1/2
Paper	28# White Wove
Color(s)	Black
Form#	PERMIT
Proof #	
Quantity	200,000



STOP! Before the undersigned approves this proof, the undersigned must be absolutely certain that all copy, images and construction of the envelope (including, without limitation, all addresses, postal indicias, URLs, text, content, artwork, logos, designs, copy and slogans) are complete and accurate. If this is not true, the undersigned must (i) not sign this proof indicating approval, and (ii) indicate prominently and in writing to printer/envelope manufacturer anything that is not complete or accurate and provide the desired or necessary change, if any. By signing this proof, the undersigned and their company assumes complete and total responsibility for this proof and the resulting product including, without limitation, all risks of mistakes, omissions, infringement, compliance with all USPS or other postal regulations, as well as all legal requirements pertaining to this proof. This means, without limitation, that the undersigned shall bear all costs, including but not limited to monetary or other penalties or any other financial obligation, for altering, supplementing or otherwise correcting the product after such approval. The undersigned acknowledges and agrees that the printer/envelope manufacturer's role, communications and advice regarding any of the foregoing are advisory in nature, and the printer/envelope manufacturer shall have no, and disclaims all, obligations with respect to such role, communications and advice. By approving this Proof digitally (via email, text, fax or other electronic means), the person so approving represents and warrants to printer/envelope manufacturer that he/she is duly authorized to bind the customer in the same manner and effect as signing this Proof.

Approval Signature: _____

Printed Name: _____ Date: _____



Specifications For Approval	
Date	01-04-2024
SC#	743990
WO#	597484
Size	9 x 12
Paper	24# White Wove
Color(s)	Plain
Tint	
Proof #	
Quantity	100m

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Approval Signature: _____

Printed Name: _____ Date: _____

CERTIFIED MAIL™

Window:
1-1/2 x 6-1/4
Left: 1/2
Bottom: 6-3/4

Window:
1-1/2 x4-1/2
Left: 1/2
Bottom: 3

M124

•198573

Specifications For Approval	
Date	03-22-24
SO#	747671
WO#	600700
Size	9 x 12
Paper	28# White Wove
Color(s)	pms 348
Tint	n/a
Proof #	1
Quantity	10m

STOP! Before the undersigned approves this proof, the undersigned must be absolutely certain that all copy, images and construction of the envelope (including, without limitation, all addresses, postal indicias, URLs, text, content, artwork, logos, designs, copy and slogans) are complete and accurate. If this is not true, the undersigned must (i) not sign this proof indicating approval, and (ii) indicate prominently and in writing to printer/envelope manufacturer anything that is not complete or accurate and provide the desired or necessary change, if any. By signing this proof, the undersigned and their company assumes complete and total responsibility for this proof and the resulting product including, without limitation, all risks of mistakes, omissions, infringement, compliance with all USPS or other postal regulations, as well as all legal requirements pertaining to this proof. This means, without limitation, that the undersigned shall bear all costs, including but not limited to monetary or other penalties or any other financial obligation, for altering, supplementing or otherwise correcting the product after such approval. The undersigned acknowledges and agrees that the printer/envelope manufacturer's role, communications and advice regarding any of the foregoing are advisory in nature, and the printer/envelope manufacturer shall have no, and disclaims all, obligations with respect to such role, communications and advice. By approving this Proof digitally (via email, text, fax or other electronic means), the person so approving represents and warrants to printer/envelope manufacturer that he/she is duly authorized to bind the customer in the same manner and effect as signing this Proof.

Approval Signature: _____

Printed Name: _____ Date: _____