

Calistoga Tribune

1007 Washington St. Suite 3 • Calistoga, CA 94515
(707) 942-5181 • FAX (707) 942-6508

PAT HAMPTON & RAMONA ASMUS - PUBLISHERS

June 9, 2016

Dear Council Members:

We are an independent, family-owned newspaper that started publishing in 2002 in response to the community's request for a local, hometown newspaper. Our reputation in the community over the past 13 years is one of accuracy, professionalism and dependability.

Cities and other governmental agencies are required in some instances by state law to publish notices in an adjudicated paper. In July 2005 the Calistoga Tribune, following the guidelines of State Code Sec. 6020-6027, petitioned and was granted adjudication by Napa Superior Court Judge Scott Snowden's order No. 26-29449, the first newspaper in over 60 years to do so in Napa County. We are the only adjudicated newspaper in the valley not owned by Napa Valley Publishing. We compete with *The Weekly Calistogan* and its parent company, Lee Enterprises, a national corporation which also owns 53 daily newspapers and 300 specialty publications in 23 states.

The Tribune is the most-read weekly newspaper in town as shown by circulation figures supplied by the U.S. Postal Service's required Statement of Ownership:

	<i>Calistoga Tribune</i>	<i>The Weekly Calistogan</i>
• Total Paid Distribution	1135	509*
• Paid subscriptions in county	733	239
• Paid subscriptions outside county	127	20
• Copies sold from newsracks	275	250

Our commitment to the city includes a newspaper office open four days a week during business hours as well as three part-time employees and local ownership.

Thank you for the consideration,

Pat Hampton
Publisher/Owner

**The numbers for The Weekly Calistogan are as of October 1, 2014. We were unable to verify their numbers for 2015.*

CITY-WIDE ADVERTISING

SECTION A: BID PROPOSAL FORM

BIDS MUST BE RECEIVED BY: Friday, June 10, 2016 at 10:00 a.m. in the Office of the City Clerk.

QUESTIONS regarding this bid should be referred to Kathy Flamson, City Clerk (707) 942-2807 or email kflamson@ci.calistoga.ca.us.

PRINTING OF OFFICIAL AND LOCAL CLASSIFIED ADVERTISING to be furnished to the City of Calistoga during the period commencing July 1, 2016 through June 30, 2017.

SECTION A: GENERAL

1. This newspaper is published 1 day(s) per week, on the following days: Friday.

2. Indicate column format:

Legal 8 picas wide

Display 1 col = 2" wide

3. This newspaper observes the following holidays:

New Year's Day, Memorial Day, Veteran's Day, 4th of July, Christmas Day, Thanksgiving Day

The deadline to submit publications for holidays is:

Tuesday noon

4. Can your newspaper reduce blueprint drawings/maps for publication? yes

If so, is there an additional cost (indicate cost) no.

5. If proofreading is required by the City, what is the deadline to submit information?

Legals Tues. noon

Display Tues. noon

> we're flexible, ask city clerk

6. DECLARATION OF NON-COLLUSION

The undersigned certifies (or declares) under penalty of perjury that this bid is genuine and not sham or collusive, or made in the interest or on behalf of any person, firm, or corporation not herein named; that the contractor has not directly or indirectly induced or solicited any other contractor to put up a sham bid, or any other person, firm, or corporation to refrain from bidding, and that the contractor has not in any manner sought by collusion to secure to himself any advantage over other contractors.

7. DECLARATION OF ADJUDICATION

The undersigned certifies (or declares) under penalty of perjury that the named newspaper is adjudicated as a newspaper of general circulation by the State of California (as defined by Government Code Section 6000, et seq.).

8. ERRORS AND OMISSIONS

The undersigned understands and agrees that the City of Calistoga will not be responsible for any error or omission on the part of the undersigned in making this proposal.

9. DECLARATION OF NON-DISCRIMINATION

In the performance of any contract awarded pursuant to these specifications, the undersigned understands and agrees that it shall not discriminate against any employee or applicant for employment because of age, sex, marital status, physical handicap, race, color, religion, ancestry, or national origin. Contractor will take affirmative action to ensure the applicants are employed, and that employees are treated during employment without regard to their age, sex, marital status, physical handicap, race, color, religion, ancestry or national origin. Such action shall include, but not be limited to the following: Employment, upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. Contractor shall post in conspicuous place, available to employees and applicants for employment, notices setting forth the provisions of this Fair Employment Practices paragraph.

EXECUTED AT: Calistoga, CA ON THE _____ DAY OF June, 2018~~6~~

BY Ramona M. Bando Publisher, Mg Member
(Signature) (Title)

on behalf of Palisades Publishing dba Calistoga Tribune
(Service Provider)

SECTION B: LEGAL ADVERTISING

1. Legal advertising to be accomplished as no larger than eight (8) point on 9.5 leading.
2. See the enclosed "Exhibit 1": Please typeset and indicate cost to publish as a legal ad.
3. Dollar rate per column inch: \$ 12.00
4. \$ 89.88 (cost estimate)

SECTION C: DISPLAY ADVERTISING

ITEM	DESCRIPTION
1.	Display advertising to be accomplished as follows: Format: ROP (Run of Publication)
2.	Does the rate change, depending upon number of publications or size of ad? Yes _____ No <input checked="" type="checkbox"/> If so, please indicate

-
3. See the enclosed "Exhibit 2" to typeset and set up as 2 column by 6 inch ad.
 4. Dollar rate per column inch: \$ 12.00
 5. \$ 90.00 (cost estimate)

SECTION D: CIRCULATION

CONTRACTOR'S QUALIFICATION - LEGAL ADVERTISING

Attach a copy of U.S. Postal Service "Statement of Ownership Management and Circulation" Form PS 3526 filed for 2015, and the circulation amount for February 2016. Please also include the number of paid subscriptions in the 94515 zip code area. If available, please verify the newsrack sales for 2015. Please include the most recent Weekly Postal Report.

PROFESSIONAL SERVICES AGREEMENT

The selected consultant will be required to enter into a City standard Professional Services Agreement (attached Exhibit 3). Two signed copies of the Professional Services Agreement shall be submitted with the RFP. All other required insurance certifications and documentation shall be submitted to the City within ten (10) days of award of the contract, prior to execution of the agreement by the City.

Particular attention should be given to the Indemnity and Insurance sections in the Professional Services Agreement. These sections are not negotiable and will be included unaltered in the final agreement.

CONTRACTOR MUST COMPLETE AND SIGN BELOW:

Firm Name Calistoga Tribune Phone 707-942-5181

Address 1007 Washington St. #3 Calistoga CA 94515
(Street) (City) (State) (Zip)

S/ Ramona M. Damo Title publisher

(Signature of Corporate Officer or person authorized to sign bids and contracts on behalf of the Contractor)

Vendors submitting a sealed proposal for the provision of official City advertising must complete and submit the following form(s) no later than 10:00 a.m. on Friday, June 10, 2016, to the Office of the City Clerk, City of Calistoga, 1232 Washington Street, Calistoga, CA 94515. The sealed proposal must be clearly labeled "PROPOSAL FOR OFFICIAL ADVERTISING SERVICES", Friday, June 10, 2016, 10:00 AM" in the bottom left hand corner.

ALL SIGNATURES ON BIDS SHALL BE ACCOMPANIED BY AN APPROPRIATE (i.e.: CORPORATE, PARTNERSHIP OR INDIVIDUAL) NOTARIAL ACKNOWLEDGMENT. NO BID WILL BE CONSIDERED FOR AN AWARD OF CONTRACT UNLESS SUCH NOTARIAL ACKNOWLEDGMENT IS RECEIVED.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

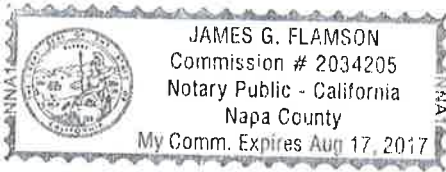
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California,)
County of NAPA)
On JUNE 9, 2016 before me, JAMES G. FLAMSON, Notary Public
Date Here Insert Name and Title of the Officer
personally appeared RAMONA M. RASMUS
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature [Handwritten Signature]
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: REP CITY-WIDE ADVERTISING
Document Date: JUNE 9, 2016 Number of Pages: 8
Signer(s) Other Than Named Above: NONE

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

**NOTICE OF PUBLIC HEARING
BY THE CALISTOGA CITY COUNCIL**

NOTICE IS HEREBY GIVEN by the City Council of the City of Calistoga that a PUBLIC HEARING will be conducted on **Tuesday, April 21, 2015**, at or after 7:00 p.m. or thereafter in the Calistoga Community Center, 1307 Washington Street, City of Calistoga, County of Napa, State of California, at which time and place testimony will be considered on:

Zoning Ordinance Amendment ZOA 2014-6: Consideration of amendment to the Downtown Commercial and Community Commercial Zoning Districts to allow off-site automated teller machines (ATMs). The proposed amendments are exempt from the California Environmental Quality Act (CEQA) under Section 15061(b)(3) of the CEQA Guidelines.

Beginning Friday, April 17, 2015 no later than 4:30 pm, the City Council staff report for this item will be available online at <http://www.ci.calistoga.ca.us>. For additional information, please contact the City Clerk's office at 707-942-2807.

NOTICE: If you challenge the City's zoning, planning, or other decision in court, you may be limited to raising only those issues you or someone else raised at the public hearing described in this notice, or in written correspondence delivered to the Planning Commission at, or prior to, the public hearing. Judicial review of any City administrative decision may be heard only if a petition is filed with the court not later than the 90th day following the date upon which the decision becomes final. Judicial review of environmental determinations may be subject to a shorter time period for litigation, in certain cases 30 days following the date of final decision.

BY ORDER OF THE CALISTOGA CITY COUNCIL

Kathy Flamson
City Clerk

Date

EXHIBIT 1

NOTICE OF PUBLIC HEARING BY THE CALISTOGA CITY COUNCIL

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**BY ORDER OF THE CALISTOGA
CITY COUNCIL**

Kathy Flamson
City Clerk
City of Calistoga

*(Legals are set in 7 pt
on 8.5 leading, which is
smaller than the RFP
requires and helps save
the city money.)*

7.49" at submitted
contract rate: \$89.88

EXHIBIT 2



ADMINISTRATIVE SERVICES TECHNICIAN

City of Calistoga –Salary: \$53,940-\$65,544 plus benefits. The Administrative Services Technician reports directly to the Administrative Services Director and is responsible for providing a complete range of accounting work including payroll. Requires 3 years of progressively responsible accounting and payroll processing in a municipal agency.

Applications and other information may be obtained from the City of Calistoga, Personnel, 1232 Washington St., Calistoga CA 94515 at (707) 942-2803; or on the City website at www.ci.calistoga.ca.us .

Deadline to apply is February 2, 2015, 4:30 p.m. No faxes or email applications will be accepted.

EXHIBIT 2

(is not the size as requested in the RFP because the size of font is not what is required by the City for Display legal ads. Also the size that is submitted will save the City money.)



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Deadline to apply is February 2, 2015, 4:30 p.m. No faxes or email applications will be accepted.

Display ad size 2 columns (4") by 3.75" deep.
Cost at submitted contract rate: \$90.00



**UNITED STATES
POSTAL SERVICE®**

**Statement of Ownership, Management, and Circulation
(All Periodicals Publications Except Requester Publications)**

1. Publication Title <u>Calistoga Tribune</u>	2. Publication Number <u>1541-5805</u>	3. Filing Date <u>9-23-15</u>
4. Issue Frequency <u>Weekly</u>	5. Number of Issues Published Annually <u>52</u>	6. Annual Subscription Price <u>\$43.00 / 1838 SE</u>
7. Complete Mailing Address of Known Office of Publication (Not printer) (Street, city, county, state, and ZIP+4®) <u>1007 Washington St., #3 Calistoga, CA 94515</u>		Contact Person <u>Pat Hampton</u> Telephone (Include area code) <u>707-942-5181</u>

8. Complete Mailing Address of Headquarters or General Business Office of Publisher (Not printer)
1007 Washington St., #3
Calistoga CA 94515

9. Full Names and Complete Mailing Addresses of Publisher, Editor, and Managing Editor (Do not leave blank)

Publisher (Name and complete mailing address)
1007 Washington St., #3
Calistoga, CA 94515

Editor (Name and complete mailing address)
N/A

Managing Editor (Name and complete mailing address)
N/A

10. Owner (Do not leave blank. If the publication is owned by a corporation, give the name and address of the corporation immediately followed by the names and addresses of all stockholders owning or holding 1 percent or more of the total amount of stock. If not owned by a corporation, give the names and addresses of the individual owners. If owned by a partnership or other unincorporated firm, give its name and address as well as those of each individual owner. If the publication is published by a nonprofit organization, give its name and address.)

Full Name	Complete Mailing Address
<u>Palisades Publishing LLC</u>	<u>2005 High Rocks Rd., Calistoga, CA 94515</u>
<u>Patricia A. Hampton, Mgr</u>	<u>2005 High Rocks Rd. Calistoga, CA 94515</u>
<u>Ramona Asmus, Co-publisher</u>	<u>2005 High Rocks Rd. Calistoga, CA 94515</u>

11. Known Bondholders, Mortgagees, and Other Security Holders Owning or Holding 1 Percent or More of Total Amount of Bonds, Mortgages, or Other Securities. If none, check box None

Full Name	Complete Mailing Address

12. Tax Status (For completion by nonprofit organizations authorized to mail at nonprofit rates) (Check one)
The purpose, function, and nonprofit status of this organization and the exempt status for federal income tax purposes:
 Has Not Changed During Preceding 12 Months
 Has Changed During Preceding 12 Months (Publisher must submit explanation of change with this statement)

13. Publication Title		14. Issue Date for Circulation Data Below	
Calistoga Tribune		Sept. 18, 2015	
15. Extent and Nature of Circulation		Average No. Copies Each Issue During Preceding 12 Months	No. Copies of Single Issue Published Nearest to Filing Date
a. Total Number of Copies (Net press run)		1200	1200
b. Paid Circulation (By Mail and Outside the Mail)	(1) Mailed Outside-County Paid Subscriptions Stated on PS Form 3541 (Include paid distribution above nominal rate, advertiser's proof copies, and exchange copies)	127	127
	(2) Mailed In-County Paid Subscriptions Stated on PS Form 3541 (Include paid distribution above nominal rate, advertiser's proof copies, and exchange copies)	733	733
	(3) Paid Distribution Outside the Mails Including Sales Through Dealers and Carriers, Street Vendors, Counter Sales, and Other Paid Distribution Outside USPS®	275	275
	(4) Paid Distribution by Other Classes of Mail Through the USPS (e.g., First-Class Mail®)	0	0
c. Total Paid Distribution (Sum of 15b (1), (2), (3), and (4))		1135	1135
d. Free or Nominal Rate Distribution (By Mail and Outside the Mail)	(1) Free or Nominal Rate Outside-County Copies included on PS Form 3541	0	0
	(2) Free or Nominal Rate In-County Copies Included on PS Form 3541	0	0
	(3) Free or Nominal Rate Copies Mailed at Other Classes Through the USPS (e.g., First-Class Mail)	0	0
	(4) Free or Nominal Rate Distribution Outside the Mail (Carriers or other means)	0	0
e. Total Free or Nominal Rate Distribution (Sum of 15d (1), (2), (3) and (4))		0	0
f. Total Distribution (Sum of 15c and 15e)		1135	1135
g. Copies not Distributed (See Instructions to Publishers #4 (page #3))		65	65
h. Total (Sum of 15f and g)		1200	1200
i. Percent Paid (15c divided by 15f times 100)		100	100

* If you are claiming electronic copies, go to line 16 on page 3. If you are not claiming electronic copies, skip to line 17 on page 3.



UNITED STATES
POSTAL SERVICE®

Statement of Ownership, Management, and Circulation (All Periodicals Publications Except Requester Publications)

16. Electronic Copy Circulation	Average No. Copies Each Issue During Preceding 12 Months	No. Copies of Single Issue Published Nearest to Filing Date
a. Paid Electronic Copies ▶	120	120
b. Total Paid Print Copies (Line 15c) + Paid Electronic Copies (Line 16a) ▶	1255	1255
c. Total Print Distribution (Line 15f) + Paid Electronic Copies (Line 16a) ▶	1255	1255
d. Percent Paid (Both Print & Electronic Copies) (16b divided by 16c × 100) ▶	100	100

I certify that 50% of all my distributed copies (electronic and print) are paid above a nominal price.

17. Publication of Statement of Ownership

If the publication is a general publication, publication of this statement is required. Will be printed

Publication not required.

in the Sept. 25, 2015 issue of this publication.

18. Signature and Title of Editor, Publisher, Business Manager, or Owner

Date

pat hampton

9-23-15

I certify that all information furnished on this form is true and complete. I understand that anyone who furnishes false or misleading information on this form or who omits material or information requested on the form may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including civil penalties).

Postage Statement - Periodicals

One Issue or One Edition Unless Used as a Consolidated Statement

1009 6/3/16

Mailer	Publication Title and Owner or News Agent's Name CALISTOGA TRIBUNE	Mailing Agent's (Printer or Consolidator) Name, Address, Telephone Number, and Email Address if Any CALISTOGA TRIBUNE PO BOX 1176 CALISTOGA, CA 94515	Entry Post Office Name, State, and ZIP+4 CALISTOGA CA 94515
	CAPS Customer Ref. No. _____ CRID _____	Printer/Consolidator Imprint Permit No. _____ CRID _____	

Mailing	Applicable Parts Completed (select all that apply) <input checked="" type="checkbox"/> A <input checked="" type="checkbox"/> B - E <input type="checkbox"/> F	Statement for bundles/containers only (If Applicable) <input type="checkbox"/>	Price Category <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Nonprofit <input type="checkbox"/> Classroom <input type="checkbox"/> Science-of-Agriculture	Combined Mailing <input type="checkbox"/> Mixed Class <input type="checkbox"/> Single Class	Consolidated Postage Statement <input type="checkbox"/> Yes <input type="checkbox"/> No
	Publication No. 20698	Edition/Code 15/6	Mailer's Mailing Date 06/02/2016	Processing Category <input type="checkbox"/> Letter <input checked="" type="checkbox"/> Flats <input type="checkbox"/> Parcels	No. of Addressed Pieces Excluding Addressed Supplements 878
	Issue Date 06/03/2016	Issue Frequency	Statement Sequence No.	Advertising Percentage in This Issue 27.00 %	Number and Type of Containers. (Enter total number of containers) Trays 14 Sacks _____ Pallets _____
	Weight of a Single Ride-Along piece 0 lb	Weight per Copy for Issue (Round off to 4 decimal places if necessary) 0.1060 pounds	For Automation Pieces, Enter Date of Address Matching and Coding 06/01/2016	For Carrier Route Pieces, Enter Date of Address Matching and Coding	For Carrier Route Pieces, Enter Date of Carrier Route Sequencing

Postage	Part A - In-County Prices Total Part A (page 2) (Postmaster: Report total Part A postage in AIC 224)	58.83
	Part B - Outside-County Pound Prices	Total Part B (Page 3) 3.7270
	Part C - Outside-County Piece Prices	Total Part C (Page 4) 42.5150
	Part D - Outside-County Bundle Prices	Total Part D (Page 5) 3.6720
	Part E - Outside-County Sack/Tray/Pallet Prices	Total Part E (Page 6 & 7) 3.1970
	Outside-County Postage	Subtotal Parts B, C, D, and E 53.1110
	Preferred Price Discount - Nonprofit, Classroom, Limited Circulation, Limited Circulation Science of Agriculture (Add line B19, and parts C, D, and E Totals) 0.00 X .05 (all others enter zero)	- 0.0
	Subtract the Preferred Price Discount from the Outside-County Postage	= 53.1110
	Part F - Outside-County Ride-Along (Page 8)	+
	Total Outside-County Postage (Postmaster: Report total Outside-County postage in AIC 135)	53.11
Add Total In-County Postage and Total Outside-County Postage	Total Postage (AIC 224 + AIC 135)	111.94

Certification
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 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 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.

Owner or Agent's Name <i>Shellie Saki</i>	USPS Use Only To be completed in non-PostalOne! sites	Post Office Computed Weight per Copy (Round off to 4 decimal places if necessary)	Round Stamp (Required) Payment Date	USPS Use Only To be completed in non-PostalOne! sites
Owner or Agent's Signature <i>Shellie Saki</i>		Time _____ AM _____ PM		
Name and Telephone Number of Contact Person in Publisher's Office		USPS Employee's Signature		
		Print USPS Employee's Name		

Company Detail	
Company Name	CALISTOGA TRIBUNE
Address	PO BOX 1176 CALISTOGA, CA 94515-6176
Contact Name	POSTAL CUSTOMER
Phone Number	(707)942-5181
Profit Indicator	P
PS Form 3607R - Mailing Transaction Receipt	
Account Holder Account Number	124494
Account Holder Permit Number	20698
Account Holder Permit Type	PE
Account Holder CRID	2988816
Post Office of Permit	Post Office Calistoga CA 94515-9998
Post Office of Mailing	Post Office Calistoga CA 94515-9998
Post Office of Permit Cost Center	051134-0301
Post Office of Mailing Cost Center	051134-0301
Mailing Agent Name	
Mailing Agent CRID	
JOB ID	
Customer Reference ID	
CAPS Transaction Number	N/A
Class of Mail	Periodicals
Processing Category	Flats
Postage Statement ID	242649334
Mailing Group ID	168439430
Mailer's Mailing Date	06/03/2016
Mailer Declared Total Pieces	878 pcs.
Mailer Declared Total Weight	93.0680 lbs.
Mailer Declared Weight of a single-piece	Non-Identical
USPS Determined Total Copies	878 copies.
USPS Determined Total Weight	93.0680 lbs.
USPS Determined Weight of a single-piece	0.1060 lbs.
Total Number of Containers	14
Total Adjusted Postage	\$ 111.74
Payment Date and Time	06/03/2016 10:09
Payment Transaction Number	201615512093281M1
Adjustment Transaction Number	
Mailer Figures Adjusted?	No
Person authorizing adjustment	
Name	
Phone Number	
Acceptance Site Mailer ID	
Clerk Initials	LMH
Mail Arrival Date and Time	06/03/2016 10:03

Periodicals - One Issue or One Edition - In-County

Check box at left if prices are populated in this section.

Part A
In-County

Pound Price

	Entry	Subscriber or Requester Copies	Nonsubscriber or Nonrequester Copies	Total Copies	Total Pounds	Price	Total Postage	
A1	DDU	667		667	71.000	\$0.154	10.9340	
A2	None	80		80	9.000	0.201	1.8090	
A3	Total Pound Price Postage (Add lines A1 and A2)							12.7430

Piece Price (Presort)

	Entry / Zone	Presort Discount	Total Copies	Addressed Pieces	Price	Total Postage
A4	Basic	Nonautomation	1	1	\$0.141	0.1410
A5		Automation Letters			0.064	
A6		Automation Flats			0.124	
A7	3-Digit	Nonautomation			0.128	
A8		Automation Letters			0.053	
A9		Automation Flats	9	9	0.116	1.0440
A10	5-Digit	Nonautomation			0.115	
A11		Automation Letters			0.051	
A12		Automation Flats	53	53	0.109	5.7770
A13	Carrier Route	Basic	684	684	0.065	44.4600
A14		High Density			0.048	
A15		Saturation			0.034	
A16	Presort Subtotal (Add lines A4-A15)		747	747		51.4220
A17	Number of Addressed Pieces at DDU Prices			667	0.008	5.3360

A18	Piece Price Subtotal (A16 minus A17)	46.0860
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Full Service Intelligent Mail Option

A19	Number of pieces that comply _____ x \$0.001 =	
A20	Periodicals In-County Subtotal (Line A18 minus A19)	46.0860

Ride-Along Price

(Must equal the number of copies in line A16, not number of addressed pieces)

	Total Copies	Addressed Pieces	Price	Total Postage
A21	Ride-Along Pieces		\$0.175	

Part A Total (Add lines A3, A20, and A21) Postmaster: Report in AIC 224

58.83

Periodicals - One Issue or One Edition - Outside-County

Check box at left if prices are populated in this section.

Part B
Outside-County - Pound Prices

For Nonprofit & Classroom: All commingled nonsubscriber or nonrequester copies over the 10% limit must pay regular prices & use a separate PS Form 3541.

Advertising Pound Prices

Entry Zone	Subscriber or Requester Copies	Nonsubsc. or Nonreq. Copies	Total Copies	Total Pounds	Advertising Pounds	Price		Total Postage
						Reg	Sci/Ag	
B1	DDU					\$0.120	\$0.090	
B2	DFSS					0.176	0.132	
B3	DSCF					0.176	0.132	
B4	DADC					0.188	0.141	
B5	1 & 2	85	85	9.000	2.000	0.212	0.159	0.424
B6	3	6	6	1.000	1.000	0.230		0.230
B7	4	9	9	1.000	1.000	0.291		0.291
B8	5	12	12	1.000	1.000	0.364		0.364
B9	6					0.445		
B10	7	4	4	1.000	1.000	0.539		0.539
B11	8	15	15	2.000	1.000	0.623		0.623
B12	9					0.623		
B13	Subtotal (Add lines B1-B12)			131	15.0000	7.0000		2.4710

Nonadvertising Pound Prices

Entry Zone	Total Pounds	minus	Advertising Pounds	equals	Nonadvertising Pounds	X	Price		Total Postage
							Reg	Sci/Ag	
B14	DDU	(From B1)	(From B1)				\$0.088	\$0.088	
B15	DFSS	(From B2)	(From B2)				0.132	0.132	
B16	DSCF	(From B3)	(From B3)				0.132	0.132	
B17	DADC	(From B4)	(From B4)				0.141	0.141	
B18	All Others	(From B5-B12)	(From B5-B12)	8.000			0.157	0.157	1.2560
B19	Subtotal (Add lines B14-B18)								1.2560

Pound Price Postage Total (Add lines B13 and B19)

3.7270

Nonadvertising Pound Prices - Alternate (Nonprofit and Classroom publications with 10% or less advertising, or other publications with 0% advertising.)

Entry Zone	Subscriber or Requester Copies	Nonsubsc. or Nonreq. Copies	Total Copies	Total Pounds	Price		Total Postage	
					Reg	Sci/Ag		
B14	DDU				\$0.088	\$0.088		
B15	DFSS				0.132	0.132		
B16	DSCF				0.132	0.132		
B17	DADC				0.141	0.141		
B18	All Others				0.157	0.157		
B19	Subtotal (Add lines B14-B18)							

Part B Total - Pound Price Total (Add lines B13 and B19)

3.7270

Periodicals - One Issue or One Edition - Outside-County

Part C
Outside-County - Piece Prices

Check box at left if prices are populated in this section.

Machinable Flats

	Level	Price Level	Total Copies	Addressed Pieces	Price	Total Postage
C1	Mixed ADC	Barcoded	49	49	\$0.438	21.4620
C2		Nonbarcoded	1	1	0.473	0.4730
C3	ADC	Barcoded	34	34	0.407	13.8380
C4		Nonbarcoded			0.435	
C5	3-Digit	Barcoded	33	33	0.390	12.8700
C6		Nonbarcoded			0.416	
C7	5-Digit	Barcoded	14	14	0.300	4.2000
C8		Nonbarcoded			0.311	
C9	FSS	Barcoded			0.230	
C10		Nonbarcoded			0.360	

Nonmachinable Flats

C11	Mixed ADC	Barcoded			0.658	
C12		Nonbarcoded			0.658	
C13	ADC	Barcoded			0.554	
C14		Nonbarcoded			0.579	
C15	3-Digit	Barcoded			0.466	
C16		Nonbarcoded			0.472	
C17	5-Digit	Barcoded			0.329	
C18		Nonbarcoded			0.329	

Parcels

C19	Mixed ADC				0.658	
C20	ADC				0.579	
C21	3-Digit				0.472	
C22	5-Digit				0.329	

Letters

C23	Mixed ADC	Barcoded			0.341	
C24		Nonbarcoded			0.473	
C25	ADC	Barcoded			0.304	
C26		Nonbarcoded			0.435	
C27	3-Digit	Barcoded			0.284	
C28		Nonbarcoded			0.416	
C29	5-Digit	Barcoded			0.216	
C30		Nonbarcoded			0.311	

Carrier Route & Firm Bundles

C31	Basic				0.202	
C32	High-Density				0.168	
C33	Saturation				0.145	
C34	Firm Bundle (Use "Addressed Pieces" to calculate postage)				0.195	
C35	Subtotal (Add lines C1 through C34)		131	131		52.8430
C36	Nonadv. % (100 minus adv.%) <u>73.00</u> X # of Addressed Pieces (C35) X \$0.00108				10.3280	

C37	Subtotal Outside County Piece Prices (Line C35 minus C36)					42.5150
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Full Service Intelligent Mail Option

C38	Number of pieces that comply _____ x \$0.001 =
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Part C Total (Line C37 minus C38) 42.5150

Periodicals - One Issue or One Edition - Outside-County

Part D
 Outside County - Bundle Prices

Check box at left if prices are populated in this section.

Container Level	Bundle Level	Bundles	Price	Total Postage
D1	Mixed ADC	3	\$0.212	0.6360
D2	ADC	3	0.580	1.7400
D3	3-Digit/SCF		0.703	
D4	FSS Scheme		0.705	
D5	5-Digit		0.749	
D6	Carrier Route		0.928	
D7	Firm		0.362	
D8	ADC		0.317	
D9	3-Digit/SCF		0.456	
D10	FSS Scheme		0.463	
D11	5-Digit		0.493	
D12	Carrier Route		0.694	
D13	Firm		0.268	
D14	3-Digit/SCF	3	0.314	0.9420
D15	FSS Scheme		0.314	
D16	5-Digit	1	0.354	0.3540
D17	Carrier Route		0.549	
D18	Firm		0.214	
D19	FSS Facility		0.314	
D20	FSS Scheme		0.000	
D21	5-Digit		0.313	
D22	Carrier Route		0.270	
D23	Firm		0.103	

Part D Total (Add lines D1-D23)

3.6720

Periodicals - One Issue or One Edition - Outside-County

Part E
 Outside-County - Sack and Tray Prices

Check box at left if prices are populated in this section.

Outside-County - Sack/Tray Prices

	Container Level	Entry	Sacks/Trays	Price	Total Postage
E1	Mixed ADC Sack/Tray	Origin NDC		\$0.462	
E2		Origin ADC		0.462	
E3		Origin SCF		0.462	
E4		Origin Post Office/DMU	2	0.462	0.9240
E5	ADC Sack/Tray	Origin NDC		2.167	
E6		Origin ADC		2.167	
E7		Origin SCF		2.167	
E8		Origin Post Office/DMU		2.167	
E9		Destination NDC		1.515	
E10		Destination ADC		0.866	
E11	3-Digit / SCF Sack/ Tray	Origin NDC		2.273	
E12		Origin ADC		2.273	
E13		Origin SCF		2.273	
E14		Origin Post Office/DMU	1	2.273	2.2730
E15		Destination NDC		1.624	
E16		Destination ADC		1.299	
E17	FSS Facility Sack/Tray	Destination SCF		0.866	
E18		Origin NDC		2.273	
E19		Origin ADC		2.273	
E20		Origin SCF		2.273	
E21		Origin Post Office/DMU		2.273	
E22		Destination NDC		1.624	
E23		Destination ADC		1.299	
E24		Destination FSS		0.866	
E25	Destination SCF		0.866		
E26	FSS Scheme Sack/Tray	Origin NDC		2.273	
E27		Origin ADC		2.273	
E28		Origin SCF		2.273	
E29		Origin Post Office/DMU		2.273	
E30		Destination NDC		1.624	
E31		Destination ADC		1.299	
E32		Destination FSS*		0.433	
E33	Destination SCF		0.866		
E34	5-Digit/ Carrier Route Sack/Tray	Origin NDC		2.922	
E35		Origin ADC		2.922	
E36		Origin SCF		2.922	
E37		Origin Post Office/DMU		2.922	
E38		Destination NDC		2.165	
E39		Destination ADC		1.840	
E40		Destination SCF		1.407	
E41		DDU		0.974	

*Loose tray

E42	Part E Sack and Tray Total (Add lines E1-E41)	3.1970
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Periodicals - One Issue or One Edition - Outside-County

Part E - Continued

Check box at left if prices are populated in this section.

Outside-County - Pallet Prices

Outside-County - Pallet Prices

	Container Level	Entry	Pallets	Price	Total Postage	
E43	Mixed ADC Pallet	Origin NDC		\$6.251		
E44		Origin ADC		6.251		
E45		Origin SCF		6.251		
E46		Origin Post Office/DMU		6.251		
E47	ADC Pallet	Origin NDC		61.901		
E48		Origin ADC		61.901		
E49		Origin SCF		61.901		
E50		Origin Post Office/DMU		61.901		
E51		Destination NDC		42.789		
E52		Destination ADC		24.545		
E53		3-Digit / SCF Pallet	Origin NDC		64.497	
E54			Origin ADC		64.497	
E55	Origin SCF			64.497		
E56	Origin Post Office/DMU			64.497		
E57	Destination NDC			45.372		
E58	Destination ADC			41.123		
E59	Destination SCF			23.822		
E60	FSS Facility Pallet	Origin NDC		64.497		
E61		Origin ADC		64.497		
E62		Origin SCF		64.497		
E63		Origin Post Office/DMU		64.497		
E64		Destination NDC		45.372		
E65		Destination ADC		41.123		
E66		Destination FSS		23.822		
E67		Destination SCF		23.822		
E68	FSS Scheme Pallet	Origin NDC		53.984		
E69		Origin ADC		53.984		
E70		Origin SCF		53.984		
E71		Origin Post Office/DMU		53.984		
E72		Destination NDC		34.876		
E73		Destination ADC		30.628		
E74		Destination FSS		6.664		
E75		Destination SCF		13.327		
E76	5-Digit Pallet	Origin NDC		80.494		
E77		Origin ADC		80.494		
E78		Origin SCF		80.494		
E79		Origin Post Office/DMU		80.494		
E80		Destination NDC		61.355		
E81		Destination ADC		57.107		
E82		Destination SCF		39.806		

Periodicals - One Issue or One Edition - Outside-County

Part E - Continued

Check box at left if prices are populated in this section.

Outside-County - Pallet Prices

Container Level	Entry	Pallets	Price	Total Postage
E83	Carrier Route Pallet	Origin NDC	\$59.711	
E84		Origin ADC	59.711	
E85		Origin SCF	59.711	
E86		Origin Post Office/DMU	59.711	
E87		Destination NDC	40.572	
E88		Destination ADC	36.324	
E89		Destination SCF	19.023	
E90		DDU	3.046	

E91	Part E Pallet Total (Add lines E43-E90)		
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Part E Total (add lines E42 and E91)

Part F

Ride-Along Price (Outside-County Only)

Check box at left if prices are populated in this section.

Ride-Along Price

(Must equal the number of copies, not number of addressed pieces)

		Total Copies	Addressed Pieces	Price	Total Postage
F1	Ride-Along Pieces			\$0.175	

Part F Total (Line F1)



Cal Trib

This form may be generated as the output of address matching processing using CASS-Certified™ software in conjunction with current USPS® address database files. Any facsimile must contain the same information in the same format as the printed form

CASS™ Summary Report

See DMM® Section 708 for more information

A. Software		
1. CASS Certified Company Name Melissa Data	2. CASS Certified Software Name & Version AddressObject version 9.10.00.N	3. Configuration STD
4. Z4Change Certified Company Name	5. Z4Change Certified Software Name & Version	6. Configuration
7. DirectDPV™ Certified Company Name	8. DirectDPV Certified Software Name & Version	9. Configuration
10. eLOT® Certified Company Name Melissa Data	11. eLOT Certified Software Name & Version AddressObject version 9.10.00.N	12. Configuration STD
1. MASS™ Certified Company Name	2. MASS Certified Software Name, Version & Model No.	3. Configuration
		4. MLOCR Serial No.

B. List		
1. List Processor's Name	2. Data List Processed	3. Date of Database Product Used
	a. Master File 06/01/2016	a. ZIP + 4® File 04/15/2016
	b. Z4Change	b. Z4Change
	c. DirectDPV	c. DirectDPV
	d. eLOT 06/01/2016	d. eLOT 4/15/2016
e. CRIS	e. CRIS	
4. List Name or ID No. (If using ID No., number must start with ID#) CAL TRIB 6-2-16.dbf	5. Number of Lists 1	6. Total Records Submitted for Processing 878

C. Output							
Output Rating	1. Total Coded	2. Validation Period		Output Rating	1. Total Coded	2. Validation Period	
a. ZIP+4/DPV Confirmed	876	From	To	d. 5-Digit Coded	876	From	To
			06/01/2016, 11/28/2016				06/01/2016, 06/01/2017
b. Z4Change Processed				e. CRRT Coded	876	From	To
							06/01/2016, 08/30/2016
c. DirectDPV		From	To	f. eLOT Assigned	876	From	To
							06/01/2016, 08/30/2016

D. Mailer		3. Name and Address of Mailer	
I certify that the mailing submitted with this form has been coded (as indicated above) using CASS-certified software meeting all of the requirements listed in DMM Section 708.		HEALDSBURG PRINTING, INC.	
		PO BOX 980	
		HEALDSBURG, CA 95448	
1. Mailer's Signature 	2. Date Signed 6-2-16		

E. Qualitative Statistical Summary (QSS)						
For Informational Purposes Only: QSS is solely made available for the list processor's review and analysis. This information is not to be considered by the Postal Service personnel in determining rate eligibility under any circumstances. See reverse for a detailed explanation.						
High Rise Default	High Rise Exact	RR Default	RR Exact	LacsLink®	EWS	SuiteLink®
4	72	0	0	0	0	0

Report: USPS Qualification Report
 Entry: CALISTOGA, CA 94515
 Sort: Periodicals, DMM 707.23
 File: CAL TRIB 6-2-16.dbf
 Publication Name: CALISTOGA TRIBUNE
 Presort Object (Build 3325) ZAP ZC-20140401

Mailer:
 Mail ID:
 Date: 06/02/2016
 Page 1 of 1
 Publication No: 20698
 Presort Version 9.02.00.P

Sack #	Sack Lvl	Sack ZIP	Pkg Dest	Zone	Copies	Rates							Running Total	Mailed To	Act Div	Res Div	Per	
						WS	HD	CR	5D	SD	3D	BS						AD
1	CRD	94515		C001	ICD	86			86								86	
2	CRD	94515		C002	ICD	116			116								202	
3	CRD	94515		C003	ICD	90			90								292	
4	CRD	94515		C004	ICD	90			90								382	
5	CRD	94515		R001	ICD	103			103								485	
6	CRD	94515		R003	ICD	125			125								610	
7	CR5	94515		B001	ICD	6			6								616	
				B002		7			7								623	
				B003		8			8								631	
				B004		6			6								637	
				B005		8			8								645	
				B008		6			6								651	
				B009		7			7								658	
				B010		9			9								667	
Totals						0	0	667	0	0	0	0	0	0	0	0	0	667

Rate Summary
 Saturation(WS): Pieces 0
 High Density(HD): 0
 Basic(CR): 667
 5-Digit(5D): 0
 FSS (SD): 0
 3-Digit(3D): 0
 Basic(BS): 0
 ADC(AD): 0
 MADC(MD): 0
 TOTAL Reg. Nonauto. 667

Outside County		Outside County	
Container Summary	Total Nbr	Bundle Summary	Total Nbr
5digit/Scheme	0	5digit/Scheme	0
3digit/SCF	0	3digit/Scheme	0
ADC	0	ADC	0
OMX/MADC	0	OMX/MADC	0
TOTAL	0		0

Presort Object (Build 3325)
 Presort Version 9.02.00.P

Mailing Summary
 Sort: (CALISTOGA, CA) DDU Enhanced CRRT WS/HD/LOT Flats
 Entry: CALISTOGA, CA 94515
 Job Number: 1

Cntr #	Cntr Lvl	Pkg Num	Zip	Group Dest	Container Destination	Pieces	Cntr Total					
1	CRD	1	94515	C001	CALISTOGA CA 94515	48	86					
		2		C001		38						
2	CRD	3	94515	C002	CALISTOGA CA 94515	48	116					
		4		C002		48						
		5		C002		20						
3	CRD	6	94515	C003	CALISTOGA CA 94515	48	90					
		7		C003		42						
4	CRD	8	94515	C004	CALISTOGA CA 94515	48	90					
		9		C004		42						
5	CRD	10	94515	R001	CALISTOGA CA 94515	48	103					
		11		R001		7						
		12		R001		48						
6	CRD	13	94515	R003	CALISTOGA CA 94515	48	125					
		14		R003		29						
		15		R003		6						
7	CR5	16	94515	B001	CALISTOGA CA 94515	7	57					
		17		B002		8						
		18		B003		6						
		19		B004		8						
		20		B005		6						
		21		B008		7						
		22		B009		9						
		23		B010								
		Total Containers:				7						
		Total Packages:				23						
Total Pieces:			667									

Report: USPS Qualification Report
 Entry: CALISTOGA CA 94515
 Sort: Periodicals, DMM 707.23
 File: CAL TRIB 6-2-16.dbf
 Publication Name: CALISTOGA TRIBUNE
 Presort Object (Build 3325) ZAP ZC-20140401

Mailer:
 Mail ID:
 Date: 06/02/2016
 Page 1 of 1
 Publication No: 20698
 Presort Version 9.02.00.P

Sack #	Sack Lvl	Sack ZIP	Pkg Dest	Zone	Copies	WS	HD	Rates				BS	AD	MD	Running Total	Mailed To	Act Dlv	Res Dlv Per
1	CR3	945	94574 C001 94574 R001	IC	7 10			CR	5D	SD	3D							
								7	10									
Totals						0	0	17	0	0	0	0	0	0	17			

Rate Summary
 Saturation(WS):
 High Density(HD):
 Basic(CR):
 5-Digit(5D):
 FSS (SD):
 3-Digit(3D):
 Basic(BS):
 ADC(AD):
 MADC(MD):
 TOTAL Reg. Nonauto.

Pieces
 0
 0
 17
 0
 0
 0
 0
 0
 0
 17

Outside County
 Container Summary
 5digit/Scheme
 3digit/SCF
 ADC
 OMX/MADC
 TOTAL

Total Nbr
 0
 0
 0
 0
 0

Outside County
 Bundle Summary
 5digit/Scheme
 3digit/Scheme
 ADC
 OMX/MADC

Total Nbr
 0
 0
 0
 0
 0

Presort Object (Build 3325)
Presort Version 9.02.00.P
Mailing Summary
Sort: Enhanced CRRT WS/HD/LOT Flats
Entry: CALISTOGA CA 94515
Job Number: 2

Page 1 of 1
Date: 06/01/2016
File: CAL TRIB 6-2-16.dbf

Cntr #	Cntr Lvl	Pkg Num	Zip	Group Dest	Container Destination	Pieces	Cntr Total
1	CR3	1 2	945	C001 R001	OAKLAND CA 945	7 10	17
Total Containers:			1				
Total Packages:			2				
Total Pieces:			17				

Report: USPS Qualification Report
 Entry: CALISTOGA CA 94515
 Sort: Periodicals, DMM 705.9
 File: CAL TRIB 6-2-16.dbf
 Publication Name: CALISTOGA TRIBUNE
 Presort Object (Build 3325) ZAP ZC-20140401

Mailer:
 Mail ID:
 Date: 06/02/2016
 Page 1 of 1
 Publication No: 20698
 Presort Version 9.02.00.P

Sack #	Sack Lvl	Sack ZIP	Pkg Dest	Zone	Copies	SB	5B	3B	BB	Rates			5D	SD	3D	BS	AD	MD	Running Total
									AB	MB									
1	5DG	94574	94574	IC	26		26												26
2	3DG	945	945	M	21			21											47
			94515	IC	8		8												55
			94558	IC	12		12												67
			S94559	IC	7		7												74
3	3DG	954	954	1&2	21			21											95
			S95405	95404	1&2	14													103
				95405			1												104
				95409			5												109
4	SCF	945	945	IC	1														110
			946	1&2	2														110
			948	1&2	2														112
5	OMX	945	A940	M	17														114
			M945	1&2	1					17									131
			M945	M	22													1	132
			A950	1&2	9														154
			A956	1&2	8					8									163
6	MADC	945	M945	M	23														171
																			194

Totals 0 67 42 0 34 49 0 0 0 1 0 1 194

Rate Summary Pieces

Basic(CR): 0

Automation FSS(SB): 0

Automation 5-Digit(5B): 67

Automation 3-Digit(3B): 42

Automation ADC(AB): 34

Automation MADC(MB): 49

Automation Basic(BB): 0

Total Automation 192

Non-Automation 5-Digit(5D): 0

Non-Automation FSS (SD): 0

Non-Automation 3-Digit(3D): 0

Non-Automation ADC(AD): 0

Non-Automation MADC(MD): 1

Non-Automation Basic(BS): 1

Total Non-Automation 2

Outside County Container Summary

5digit/Scheme 0

3digit/SCF 3

ADC 0

OMX/MADC 2

TOTAL 5

Outside County Bundle Summary

5digit/Scheme 1

3digit/Scheme 3

ADC 3

OMX/MADC 5

12

Presort Object (Build 3325)
 Presort Version 9.02.00.P
 Mailing Summary
 Sort: PER Co-Sacked Auto/Nonauto Flats
 Entry: CALISTOGA CA 94515
 Job Number: 3

Page 1 of 1
 Date: 06/01/2016
 File: CAL TRIB 6-2-16.dbf

Cntr #	Cntr Lvl	Pkg Num	Zip	Group Dest	Container Destination	Pieces	Cntr Total
1	5DG	1	94574	94574			
2	3DGS	2	945	945	SAINT HELENA CA 94574	26	26
		3		94515	OAKLAND CA 945	21	
		4		94558		8	
		5		94559		12	
3	3DGS	6	954	954	NORTH BAY CA 954	7	48
		7		95405		21	
4	3DG	8	945	945	SCF OAKLAND CA 945	14	35
		9		946		1	
		10		948		2	
5	MADC	11	945	A940	OMX OAKLAND CA 945	2	5
		12		M945		17	
		13		M945		1	
		14		A950		22	
		15		A956		9	
6	MADC	16	945	M945	MXD OAKLAND CA 945	8	57
						23	23
Total Containers:				6			
Total Packages:				16			
Total Pieces:				194			