## **D-40P PAYMENT VOUCHER**

Detach at perforation and mail the voucher, with payment attached, to the Office of Tax and Revenue, PO Box 96169, Washington DC 20090-6169.

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	D-40P Payment Voucher fo Individual Income T	AX 1 9 0 4 0 P 1 1 0 0 2
This is a FILL-IN format. Please do not handwr	ite any data on this form other than your signature.	Official Use Only Vendor ID# 0002
Amount of payment \$	00 To avoid pe	enalties and interest, your payment must be postmarked n 15, 2020.
Your first name	M.I. Last name	
Spouse's/registered domestic partner's first nan	ne M.I. Last name	
Your taxpayer identification number (TIN)	Spouse's/registered domestic partner's TIN	Taxpayer daytime telephone number
Home address (number, street and suite/apartn	ent number if applicable)	
City		State Zip Code + 4
Revised 05/19	D-40P Payment Voucher fo	or   100101   1010   1011   1011   1011   101   101   1011
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