

DI-2010 ESTIMATED FOSTORIA INCOME TAX VOUCHER
FOR CALENDAR YEAR 2010 OR FISCAL PERIOD

Voucher 1

CITY OF RESIDENCE _____
NAME OF EMPLOYER _____
NATURE OF BUSINESS _____

1. Estimated tax
 2. Deduct overpayment from
prior year to be carried forward
 3. Balance of declaration payable
 4. Amount enclosed (1/4 of line 3)
- (Credit card voucher on reverse side for your convenience.)
If this is an original declaration-voucher,
file even though line 3 is zero.

*Sign 

Your Signature

DI-2010 ESTIMATED FOSTORIA INCOME TAX VOUCHER
FOR CALENDAR YEAR 2010 OR FISCAL PERIOD

Voucher 2

CHECK THIS BOX IF THIS IS AN AMENDED DECLARATION

1. Estimated tax
 2. Deduct overpayment from
prior year to be carried forward
 3. Balance of declaration payable
 4. Amount enclosed (1/4 of line 3)
- (Credit card voucher on reverse side for your convenience.)
If this is an original declaration-voucher,
file even though line 3 is zero.

*Sign 

Your Signature

DI-2010 ESTIMATED FOSTORIA INCOME TAX VOUCHER
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Voucher 3

CHECK THIS BOX IF THIS IS AN AMENDED DECLARATION

1. Estimated tax
 2. Deduct overpayment from
prior year to be carried forward
 3. Balance of declaration payable
 4. Amount enclosed (1/4 of line 3)
- (Credit card voucher on reverse side for your convenience.)
If this is an original declaration-voucher,
file even though line 3 is zero.

*Sign 

Your Signature

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Voucher 4

CHECK THIS BOX IF THIS IS AN AMENDED DECLARATION

1. Estimated tax
 2. Deduct overpayment from
prior year to be carried forward
 3. Balance of declaration payable
 4. Amount enclosed (1/4 of line 3)
- (Credit card voucher on reverse side for your convenience.)
If this is an original declaration-voucher,
file even though line 3 is zero.

*Sign 

Your Signature

CREDIT CARD PAYMENT INFORMATION

   

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Credit card account number

Amount to be paid

Expiration date

Signature

Date

Print name as it appears on credit card

CREDIT CARD PAYMENT INFORMATION

   

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Credit card account number

Amount to be paid

Expiration date

Signature

Date

Print name as it appears on credit card

CREDIT CARD PAYMENT INFORMATION

   

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Credit card account number

Amount to be paid

Expiration date

Signature

Date

Print name as it appears on credit card

CREDIT CARD PAYMENT INFORMATION

   

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Credit card account number

Amount to be paid

Expiration date

Signature

Date

Print name as it appears on credit card