

The Name and Address shown below are as they appear on our records. Please make necessary corrections.

ACCT. NUMBER: _____ SS#/FID#: _____

Calendar Year Due Date July 15, 2010 or Fiscal Date

CHECK THIS BOX IF THIS IS AN AMENDED DECLARATION

- 1. 2010 NET ESTIMATED TAX \$ _____
- 2. LESS PREVIOUS PAYMENTS TO DATE \$ _____
- 3. BALANCE 2010 ESTIMATED TAX DUE (line 1 less line 2) \$ _____

AMOUNT OF THIS QUARTERLY INSTALLMENT (Not less than 1/3 of line 3) \$ _____

Return This Voucher & Make Payable to:

City of Pickerington
Division of Taxation
100 Lockville Rd.
Pickerington, OH 43147

TO PAY BY CREDIT CARD ONLINE OR BY PHONE



Visit www.pickerington.net

Paymentus, the service provider, charges a nominal fee for this service

The Name and Address shown below are as they appear on our records. Please make necessary corrections.

ACCT. NUMBER: _____ SS#/FID#: _____

Calendar Year Due Date October 15, 2010 or Fiscal Date

CHECK THIS BOX IF THIS IS AN AMENDED DECLARATION

- 1. 2010 NET ESTIMATED TAX \$ _____
- 2. LESS PREVIOUS PAYMENTS TO DATE \$ _____
- 3. BALANCE 2010 ESTIMATED TAX DUE (line 1 less line 2) \$ _____

AMOUNT OF THIS QUARTERLY INSTALLMENT (Not less than 1/2 of line 3) \$ _____

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The Name and Address shown below are as they appear on our records. Please make necessary corrections.

ACCT. NUMBER: _____ SS#/FID#: _____

Calendar Year Due Date December 15, 2010 or Fiscal Date

CHECK THIS BOX IF THIS IS AN AMENDED DECLARATION

- 1. 2010 NET ESTIMATED TAX \$ _____
- 2. LESS PREVIOUS PAYMENTS TO DATE \$ _____
- 3. BALANCE 2010 ESTIMATED TAX DUE (line 1 less line 2) \$ _____

AMOUNT OF THIS QUARTERLY INSTALLMENT (PAY BALANCE SHOWN ON LINE 3) \$ _____

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