

CITY OF ST. MARYS
DEPARTMENT OF TAXATION
106 EAST SPRING STREET
ST. MARYS, OHIO 45885-2363
(419) 394-3303 EXT 3198

NAME OF MUNICIPALITY _____
QUARTERLY ESTIMATED PAYMENT
1ST QUARTER 2018

VOUCHER 1

DATE DUE: 04-17-18

PAID CHECK WILL BE YOUR RECEIPT. DO NOT REMIT CASH BY MAIL.

NAME(S) AND ADDRESS:

SOCIAL SECURITY NUMBER OR FEDERAL TAX I.D. NUMBER:

TOTAL
ESTIMATED
TAX DECLARED: \$
FROM LINE 13 OF FORM EZ 2017 OR LINE 16 FORM B 2017

QUARTERLY
PAYMENT
ENCLOSED: \$

NOTIFY DEPARTMENT OF TAXATION PROMPTLY OF ANY CHANGE IN OWNERSHIP, NAME, OR ADDRESS.

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106 EAST SPRING STREET
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NAME OF MUNICIPALITY _____
QUARTERLY ESTIMATED PAYMENT
2ND QUARTER 2018

VOUCHER 2

DATE DUE: 06-15-18

PAID CHECK WILL BE YOUR RECEIPT. DO NOT REMIT CASH BY MAIL.

NAME(S) AND ADDRESS:

SOCIAL SECURITY NUMBER OR FEDERAL TAX I.D. NUMBER:

TOTAL
ESTIMATED
TAX DECLARED: \$
FROM LINE 13 OF FORM EZ 2017 OR LINE 16 FORM B 2017

QUARTERLY
PAYMENT
ENCLOSED: \$

NOTIFY DEPARTMENT OF TAXATION PROMPTLY OF ANY CHANGE IN OWNERSHIP, NAME, OR ADDRESS.

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NAME OF MUNICIPALITY _____
QUARTERLY ESTIMATED PAYMENT
3RD QUARTER 2018

VOUCHER 3

DATE DUE: 09-15-18

PAID CHECK WILL BE YOUR RECEIPT. DO NOT REMIT CASH BY MAIL.

NAME(S) AND ADDRESS:

SOCIAL SECURITY NUMBER OR FEDERAL TAX I.D. NUMBER:

TOTAL
ESTIMATED
TAX DECLARED: \$
FROM LINE 13 OF FORM EZ 2017 OR LINE 16 FORM B 2017

QUARTERLY
PAYMENT
ENCLOSED: \$

NOTIFY DEPARTMENT OF TAXATION PROMPTLY OF ANY CHANGE IN OWNERSHIP, NAME, OR ADDRESS.

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NAME OF MUNICIPALITY _____
QUARTERLY ESTIMATED PAYMENT
4TH QUARTER 2018

VOUCHER 4

DATE DUE: 01-15-19

PAID CHECK WILL BE YOUR RECEIPT. DO NOT REMIT CASH BY MAIL.

NAME(S) AND ADDRESS:

SOCIAL SECURITY NUMBER OR FEDERAL TAX I.D. NUMBER:

TOTAL
ESTIMATED
TAX DECLARED: \$
FROM LINE 13 OF FORM EZ 2017 OR LINE 16 FORM B 2017

QUARTERLY
PAYMENT
ENCLOSED: \$

NOTIFY DEPARTMENT OF TAXATION PROMPTLY OF ANY CHANGE IN OWNERSHIP, NAME, OR ADDRESS.