

2022

Maine estimated tax payment voucher for

FRANCHISE TAX



99

FORM 1120B-ES/ME

Voucher 1 - Due April 15
(or 15th day of the fourth month for fiscal year taxpayers)

\*1134310\*

Enter beginning and ending dates for the entire tax year (NOT the quarter dates)

If this payment is for a short year period, enter the next filing period below

99 99 9999
MM DD YYYY

to

99 99 9999
MM DD YYYY

99 99 9999
MM DD YYYY

to

99 99 9999
MM DD YYYY

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Financial Institution Name

99999999 .00

Amount of Payment

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Address

99 9999999

Federal Employer ID Number

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

City, Town, or Post Office

XX

State

99999

ZIP Code

999 999 9999

Contact Phone Number



Detach this voucher and make check payable to Treasurer, State of Maine.
Mail check and voucher to: Maine Revenue Services, P.O. Box 9101, Augusta, ME 04332-9101.

- Do not staple or tape check to your form.
Do not mail this form if payment was made electronically.

Revised: December 2021

(cut along dotted line)

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FORM 1120B-ES/ME

Voucher 2 - Due June 15
(or 15th day of the sixth month for fiscal year taxpayers)

\*1134310\*

Enter beginning and ending dates for the entire tax year (NOT the quarter dates)

If this payment is for a short year period, enter the next filing period below

99 99 9999
MM DD YYYY

to

99 99 9999
MM DD YYYY

99 99 9999
MM DD YYYY

to

99 99 9999
MM DD YYYY

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Financial Institution Name

99999999 .00

Amount of Payment

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Address

99 9999999

Federal Employer ID Number

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

City, Town, or Post Office

XX

State

99999

ZIP Code

999 999 9999

Contact Phone Number



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Voucher 3 - Due September 15
(or 15th day of the ninth month for fiscal year taxpayers)

\*1134310\*

Enter beginning and ending dates for the entire tax year (NOT the quarter dates)

If this payment is for a short year period, enter the next filing period below

99 99 9999
MM DD YYYY

to

99 99 9999
MM DD YYYY

99 99 9999
MM DD YYYY

to

99 99 9999
MM DD YYYY

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Financial Institution Name

99999999 .00

Amount of Payment

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Address

99 9999999

Federal Employer ID Number

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

City, Town, or Post Office

XX

State

99999

ZIP Code

999 999 9999

Contact Phone Number



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Voucher 4 - Due December 15
(or 15th day of the twelfth month for fiscal year taxpayers)

\*1134310\*

Enter beginning and ending dates for the entire tax year (NOT the quarter dates)

If this payment is for a short year period, enter the next filing period below

99 99 9999
MM DD YYYY

to

99 99 9999
MM DD YYYY

99 99 9999
MM DD YYYY

to

99 99 9999
MM DD YYYY

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Financial Institution Name

99999999 .00

Amount of Payment

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Address

99 9999999

Federal Employer ID Number

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

City, Town, or Post Office

XX

State

99999

ZIP Code

999 999 9999

Contact Phone Number



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