

RETURN WITH PAYMENT
QUARTERLY ESTIMATE

MAKE CHECK OR MONEY ORDER TO:
CITY OF CANFIELD

MAIL TO ▶

CITY OF CANFIELD
104 LISBON ST
CANFIELD OH 44406

AMOUNT ENCLOSED \$ _____

Check No: _____

PAID CHECK WILL BE YOUR RECEIPT

If receipt is desired, return both copies of this statement with a self-addressed stamped envelope.

Voice: 330-533-1101

Fax: 330-533-2668 Email: kdahlberg@canfield.gov

DO NOT REMIT CASH BY MAIL

____ Quarter 202_

ESTIMATED TAX DECLARED	CREDIT CARRY-FORWARD FROM PRIOR YRS RETURN	PRIOR ESTIMATED PAYMENTS MADE	AMOUNT OF UNPAID BALANCE	QUARTERLY INSTALLMENT DUE

Name _____

And _____

Address _____

AMENDED ESTIMATED TAX

DUE ON OR BEFORE

TAX ID: _____

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS SHOWN ABOVE. IF THIS STATEMENT DOES NOT REFLECT PAYMENT RECENTLY MADE, PLEASE ADVISE - INCOME TAX OFFICE - PROMPTLY