

RETURN WITH PAYMENT

INDIVIDUAL QUARTERLY ESTIMATE 20__

MAKE CHECK OR MONEY ORDER TO: CITY OF READING PAID CHECK WILL BE YOUR RECEIPT DO NOT REMIT CASH BY MAIL	MAIL TO: CITY OF READING EARNINGS TAX ACCOUNT LOCATION 0863 CINCINNATI OH 45264-0863 Phone 513-733-0300 Fax 513-842-1016	AMOUNT ENCLOSED \$
		Check No: _____ Quarter 20__

ESTIMATED TAX DECLARED	TOTAL UNDER PAID ESTIMATE PENALTY	TOTAL AMOUNT CREDITED	AMOUNT OF UNPAID BALANCE	QUARTERLY INSTALLMENT DUE

NAME **DUE ON OR BEFORE**

AND

ADDRESS

TAX ID

NOTIFY INCOME TAX DEPARTMENT OF ANY CHANGE IN EMPLOYMENT, OWNERSHIP AND ADDRESS SHOW ABOVE
IF THIS STATEMENT DOES NOT REFLECT PAYMENT RECENTLY MADE, PLEASE ADVISE INCOME TAX OFFICE PROMPTLY

KEEP FOR YOUR RECORDS

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CREDIT CARD AUTHORIZATION:

VISA MASTERCARD

Print Name: _____

Signature: _____

Account Number

□□□□ □□□□ □□□□ □□□□

Expiration Date: ____ / ____

CVC ____ 3 digit security code on back of card