

I-1040ES-EFT

IONIA
ESTIMATED INCOME TAX EFT PAYMENT VOUCHER
FIRST QUARTER - PAYMENT DUE APRIL 30, 2020

2020 EST 01Q

Taxpayer Name: [] Bank Routing Number: []
Social Security No: [] Bank Account Number: []
Due on or Before: 04/30/2020, for tax year 2020 Type of Bank Account [] Checking [] Savings
Payment: \$ [] Elective Withdrawal Date: []

Payment Method: DO NOT SEND CASH OR ANY OTHER FORM OF PAYMENT WITH PAYMENT VOUCHER BELOW.
The payment voucher is authorization for the City of Ionia to directly withdrawal your payment from your bank account.

Additional Information: The spouse of a joint filing taxpayer may use this payment voucher to make estimated income tax payments under his or her own social security number by listing their name and social security number as the taxpayer on this payment voucher.

Address for Payment: City of Ionia Income Tax Division
PO Box 512
Ionia, MI 48846

Taxpayer Records: Amount Paid: _____
Date Mailed: _____

KEEP TOP PORTION FOR YOUR RECORDS. SEND BOTTOM PORTION WITH YOUR BANK INFORMATION
V DETACH HERE V

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FIRST QUARTER ESTIMATED INCOME TAX EFT PAYMENT VOUCHER

2020 EST 01Q

NACTP # [] EFIN # [] PAYMENT VOUCHER 1 Due Date: 04/30/2020
Table with fields: Taxpayer's first name, initial, last name; Taxpayer's SSN; Bank routing number; Type of account; Checking; Savings; If joint return spouse's first name, initial, last name; If joint payment, spouse's SSN; Bank account number; Elective withdrawal date; Present home address (Number and street); Apt. no.; Notes; Address line 2 (P.O. Box address for mailing use only); Signature; City, town or post office; State; Zip code; Foreign country name, province/county, postal code; Amount of estimated tax you are authorizing the City of Ionia to deduct from your bank account; Round to nearest dollar.

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IONIA
ESTIMATED INCOME TAX EFT PAYMENT VOUCHER
SECOND QUARTER - PAYMENT DUE JUNE 30, 2020

2020 EST 02Q

Taxpayer Name: [] Bank Routing Number: []
Social Security No: [] Bank Account Number: []
Due on or Before: 06/30/2020, for tax year 2020 Type of Bank Account: [] Checking [] Savings
Payment: \$ [] Elective Withdrawal Date: []

Payment Method: DO NOT SEND CASH OR ANY OTHER FORM OF PAYMENT WITH PAYMENT VOUCHER BELOW.
The payment voucher is authorization for the City of Ionia to directly withdrawal your payment from your bank account.

Additional Information: The spouse of a joint filing taxpayer may use this payment voucher to make estimated income tax payments under his or her own social security number by listing their name and social security number as the taxpayer on this payment voucher.

Address for Payment: City of Ionia Income Tax Division
PO Box 512
Ionia, MI 48846

Taxpayer Records: Amount Paid: _____
Date Mailed: _____

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SECOND QUARTER ESTIMATED INCOME TAX EFT PAYMENT VOUCHER

2020 EST 02Q

NACTP # [] EFIN # [] PAYMENT VOUCHER 2 Due Date: 06/30/2020
Table with fields: Taxpayer's first name, initial, last name; Taxpayer's SSN; Bank routing number; Type of account; Checking; Savings; If joint return spouse's first name, initial, last name; If joint payment, spouse's SSN; Bank account number; Elective withdrawal date; Present home address (Number and street); Apt. no.; Notes; Address line 2 (P.O. Box address for mailing use only); Signature; City, town or post office; State; Zip code; Foreign country name, province/county, postal code; Amount of estimated tax you are authorizing the City of Ionia to deduct from your bank account; Round to nearest dollar .00

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IONIA

2020 EST 03Q

ESTIMATED INCOME TAX EFT PAYMENT VOUCHER
THIRD QUARTER - PAYMENT DUE SEPTEMBER 30, 2020

Taxpayer Name: [] Bank Routing Number: []
Social Security No: [] Bank Account Number: []
Due on or Before: 09/30/2020, for tax year 2020 Type of Bank Account: [] Checking [] Savings
Payment: \$ [] Elective Withdrawal Date: []

Payment Method: DO NOT SEND CASH OR ANY OTHER FORM OF PAYMENT WITH PAYMENT VOUCHER BELOW.
The payment voucher is authorization for the City of Ionia to directly withdrawal your payment from your bank account.

Additional Information: The spouse of a joint filing taxpayer may use this payment voucher to make estimated income tax payments under his or her own social security number by listing their name and social security number as the taxpayer on this payment voucher.

Address for Payment: City of Ionia Income Tax Division
PO Box 512
Ionia, MI 48846

Taxpayer Records: Amount Paid: _____
Date Mailed: _____

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IONIA

2020 EST 03Q

THIRD QUARTER ESTIMATED INCOME TAX EFT PAYMENT VOUCHER

NACTP # [] EFIN # [] PAYMENT VOUCHER 3 Due Date: 09/30/2020
Table with fields: Taxpayer's first name, initial, last name; Taxpayer's SSN; Bank routing number; Type of account; Checking; Savings; If joint estimated paymnet, spouse's first name, initial, last name; If joint payment, spouse's SSN; Bank account number; Elective withdrawal date; Present home address (Number and street); Apt. no.; Notes; Address line 2 (P.O. Box address for mailing use only); Signature; City, town or post office; State; Zip code; Foreign country name, province/county, postal code; Amount of estimated tax you are authorizing the City of Ionia to deduct from your bank account; Round to nearest dollar .00

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ESTIMATED INCOME TAX EFT PAYMENT VOUCHER
FOURTH QUARTER - PAYMENT DUE JANUARY 31, 2021

2020 EST 04Q

Taxpayer Name: [] Bank Routing Number: []
Social Security No: [] Bank Account Number: []
Due on or Before: 01/31/2021, for tax year 2020 Type of Bank Account: [] Checking [] Savings
Payment: \$ [] Elective Withdrawal Date: []

Payment Method: DO NOT SEND CASH OR ANY OTHER FORM OF PAYMENT WITH PAYMENT VOUCHER BELOW.
The payment voucher is authorization for the City of Ionia to directly withdrawal your payment from your bank account.

Additional Information: The spouse of a joint filing taxpayer may use this payment voucher to make estimated income tax payments under his or her own social security number by listing their name and social security number as the taxpayer on this payment voucher.

Address for Payment: City of Ionia Income Tax Division
PO Box 512
Ionia, MI 48846

Taxpayer Records: Amount Paid: _____
Date Mailed: _____

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IONIA
FOURTH QUARTER ESTIMATED INCOME TAX EFT PAYMENT VOUCHER

2020 EST 04Q

NACTP # [] EFIN # [] PAYMENT VOUCHER 4 Due Date: 01/31/2021
Table with fields: Taxpayer's first name, initial, last name; Taxpayer's SSN; Bank routing number; Type of account; Checking; Savings; If joint return spouse's first name, initial, last name; If joint payment, spouse's SSN; Bank account number; Elective withdrawal date; Present home address (Number and street); Apt. no.; Notes; Address line 2 (P.O. Box address for mailing use only); Signature; City, town or post office; State; Zip code; Foreign country name, province/county, postal code; Amount of estimated tax you are authorizing the City of Ionia to deduct from your bank account; Round to nearest dollar .00