



DETACH ALONG THIS LINE AND MAIL VOUCHER WITH YOUR FULL PAYMENT



40ES 2024

VENDOR CODE

Alabama Department of Revenue (2)
Estimated Income Tax Payment Voucher



PRIMARY TAXPAYER'S
FIRST NAME
MAILING
ADDRESS

SPOUSE'S
FIRST NAME

LAST
NAME

CITY

STATE

ZIP

DAYTIME
TELEPHONE NUMBER

CHECK IF FISCAL YEAR

Beginning Date: _____

Ending Date: ● _____

Primary Taxpayer's SSN: ● _____

Spouse's SSN: ● _____

Amount Paid With Voucher: \$ ● _____

MAIL TO: Alabama Department of Revenue, Individual Estimates,
P.O. Box 327485, Montgomery, AL 36132-7485

