Use this form if NOT submitting payment with Form IN-111.

Income Tax Payment Voucher IN-116

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* 1 2 1 1 6 1 1 9 9 *

Taxpayer's So Security Numl		Spouse or CU Partner Social Security Number	
Taxpayer's Last Name		First Name	Initial
Spouse or CU Partner Last Name		First Name	Initial
Mailing Addre (Number and Road or PO E	Street/		
City/Town		State ZIP Code -	
5454	If you electronically filed, D	O NOT include a copy of the filed return with this payment.	
	VT Department of Taxes	Amount of this payment \$. 00
	PO Box 1779 Montpolior, VT, 05601, 1770	Maka chack payable to: VEDMONT DEDARTMENT OF TAYES	Form IN-116