

DELAWARE DIVISION OF REVENUE

0091-01

FORM 200-ES DECLARATION OF ESTIMATED INCOME TAX

SPOUSE SOC. SEC. NO.

ENTER LAST NAME, FIRST NAME, SPOUSE NAME & ADDRESS

	RETURN THIS COPY WITH YOUR O DIVISION OF REVEN P.O. BOX 830, WILMINGTON, DELAN File Online at <u>www.revenue.delaware.gov</u>	UE VARE 19899-0830
	 Amount of this installment payment (line 1 less line 2) 	
	 Amount of unused overpayment credit, if any, applied to this installment (see instructions) 	
	1. Amount of this installment	

DF64019019999

State Zip Code

First Name

Spouse's First Name

TAXABLE YEAR

City (Revised 09/2018)

Last Name

Spouse's Last Name

Street Address

TAXPAYER SOC. SEC. NO.

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