

2019

FORM 1120B-ES/ME



99

MAINE ESTIMATED TAX  
PAYMENT VOUCHER FOR

**FINANCIAL INSTITUTIONS**

**VOUCHER 1 - DUE APRIL 17**  
(or 15th day of the fourth month for fiscal year taxpayers)

\*1134310\*

Enter beginning and ending dates for the entire tax year (NOT the quarter dates)

If this payment is for a short year period, enter the next filing period below

to

to

MM DD YYYY

MM DD YYYY

MM DD YYYY

MM DD YYYY

.00

Financial Institution Name

Amount of Payment

Address

Federal Employer ID Number

City, Town, or Post Office

State

ZIP Code

Contact Phone Number



Detach this voucher and make check payable to TREASURER, STATE OF MAINE.  
Mail check and voucher to: Maine Revenue Services, P.O. Box 9101, Augusta, ME 04332-9101

**PLEASE DO NOT STAPLE OR TAPE CHECK TO YOUR FORM. INCLUDE THE ORIGINAL DOWNLOADABLE VERSION OF THIS FORM WITH YOUR PAYMENT. THIS FORM IS NOT REQUIRED IF PAYMENT WAS MADE ELECTRONICALLY.**

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MAINE ESTIMATED TAX  
PAYMENT VOUCHER FOR

**FINANCIAL INSTITUTIONS**

**VOUCHER 2 - DUE JUNE 17**  
(or 15th day of the sixth month for fiscal year taxpayers)

\*1134310\*

Enter beginning and ending dates for the entire tax year (NOT the quarter dates)

If this payment is for a short year period, enter the next filing period below

to

to

MM DD YYYY

MM DD YYYY

MM DD YYYY

MM DD YYYY

.00

Financial Institution Name

Amount of Payment

Address

Federal Employer ID Number

City, Town, or Post Office

State

ZIP Code

Contact Phone Number



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**FINANCIAL INSTITUTIONS**

**VOUCHER 3 - DUE SEPTEMBER 16**  
(or 15th day of the ninth month for fiscal year taxpayers)

\*1134310\*

Enter beginning and ending dates for the entire tax year (NOT the quarter dates)

If this payment is for a short year period, enter the next filing period below

<input type="text"/>	to	<input type="text"/>		<input type="text"/>	to	<input type="text"/>
MM DD YYYY		MM DD YYYY		MM DD YYYY		MM DD YYYY

<input type="text"/>	<input type="text"/>
Financial Institution Name	Amount of Payment .00

<input type="text"/>	<input type="text"/>
Address	Federal Employer ID Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
City, Town, or Post Office	State	ZIP Code	Contact Phone Number



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MAINE ESTIMATED TAX  
PAYMENT VOUCHER FOR

**FINANCIAL INSTITUTIONS**

**VOUCHER 4 - DUE DECEMBER 16**  
(or 15th day of the twelfth month for fiscal year taxpayers)

\*1134310\*

Enter beginning and ending dates for the entire tax year (NOT the quarter dates)

If this payment is for a short year period, enter the next filing period below

<input type="text"/>	to	<input type="text"/>		<input type="text"/>	to	<input type="text"/>
MM DD YYYY		MM DD YYYY		MM DD YYYY		MM DD YYYY

<input type="text"/>	<input type="text"/>
Financial Institution Name	Amount of Payment .00

<input type="text"/>	<input type="text"/>
Address	Federal Employer ID Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
City, Town, or Post Office	State	ZIP Code	Contact Phone Number



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