

# QUARTERLY ESTIMATED TAX PAYMENT RECEIPT

Official Record of Tax Payment

---

## TAXPAYER INFORMATION

Taxpayer Name

SSN / FEIN

Mailing Address

City, State, Zip

---

## FLING INFORMATION

Tax Year

Receipt Date

Receipt Number

Agency/Jurisdiction

---

## TAX PERIOD (QUARTER)

1st Quarter (Due April 15)

2nd Quarter (Due June 15)

3rd Quarter (Due September 15)

4th Quarter (Due January 15)

---

## PAYMENT TRANSACTION DETAILS

PAYMENT METHOD	REFERENCE / CONFIRMATION NO.	DATE PROCESSED	AMOUNT PAID

---

Authorized Agency Representative / Digital Signature Confirmation

Taxpayer Signature (If filing manually)