

2005 Declaration of Estimated Tax – 2nd Quarter Statement Due By 7/31/2005

City of Fairfield

Income Tax Division
5350 Pleasant Avenue
Fairfield, OH 45014-3597
(513) 867-5327

Account, Social Security or Federal ID #: _____

Annual Estimate: \$ _____

Name _____

Amount Paid this Quarter: \$ _____

Address _____

If paying by charge card, please circle one: MASTERCARD VISA and fill in below.

ACCT NO. _____ EXPIRATION DATE ____/____

SIGNATURE _____

Please indicate any name or address changes

To determine if this transaction will be treated as a cash advance when paid to CITY OF FAIRFIELD TAX, please check with your credit card issuing company.

Amended Annual Estimate: \$ _____

2005 Declaration of Estimated Tax – 3rd Quarter Statement Due By 10/31/2005

City of Fairfield

Income Tax Division
5350 Pleasant Avenue
Fairfield, OH 45014-3597
(513) 867-5327

Account, Social Security or Federal ID #: _____

Annual Estimate: \$ _____

Name _____

Amount Paid this Quarter: \$ _____

Address _____

If paying by charge card, please circle one: MASTERCARD VISA and fill in below.

ACCT NO. _____ EXPIRATION DATE ____/____

SIGNATURE _____

Please indicate any name or address changes

To determine if this transaction will be treated as a cash advance when paid to CITY OF FAIRFIELD TAX, please check with your credit card issuing company.

Amended Annual Estimate: \$ _____

2005 Declaration of Estimated Tax – 4th Quarter Statement Due By 1/31/2006

City of Fairfield

Income Tax Division
5350 Pleasant Avenue
Fairfield, OH 45014-3597
(513) 867-5327

Account, Social Security or Federal ID #: _____

Annual Estimate: \$ _____

Name _____

Amount Paid this Quarter: \$ _____

Address _____

If paying by charge card, please circle one: MASTERCARD VISA and fill in below.

ACCT NO. _____ EXPIRATION DATE ____/____

SIGNATURE _____

Please indicate any name or address changes

To determine if this transaction will be treated as a cash advance when paid to CITY OF FAIRFIELD TAX, please check with your credit card issuing company.

Amended Annual Estimate: \$ _____

2nd quarter bill due by 7/31/2005 --

Note: It is the taxpayer's responsibility to file the declaration and make payments by the specified due dates.

Failure to meet the **90% requirements by January 31, 2006** will result in the assessment of a \$50 penalty.

3rd quarter bill due by 10/31/2005 --

Note: It is the taxpayer's responsibility to file the declaration and make payments by the specified due dates.

Failure to meet the **90% requirements by January 31, 2006** will result in the assessment of a \$50 penalty.

4th quarter bill due by 1/31/2006 --

Note: It is the taxpayer's responsibility to file the declaration and make payments by the specified due dates.

Failure to meet the **90% requirements by January 31, 2006** will result in the assessment of a \$50 penalty.