DELAWARE 2023 FORM
DIVISION OF REVENUE CMP-SCH

COMPOSITE PERSONAL INCOME TAX SCHEDULE

RESET PRINT

Name of Business: CMP REFUND - TEST 4C

Employer Identification Number or Taxpayer ID:

TPID	NAME	% OF OWNERSHIP	INCOME	ESTIMATED TAX PAID
222222224	E. EDWARDS	50.000000 %	$ 100 .00	$ 5 .00
222222244	D. DAVIS	50.000000 %	$ 200 .00	$ 20 .00
		%	$ .00	$ .00
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		%	$ .00	$ .00
		%	$ .00	$ .00
TOTAL			$ 300 .00	$ 25 .00

TOTAL INCOME (To Be Reported on Line 1 of CMP-TAX)

TOTAL ESTIMATED TAX PAID (To Be Reported on Line 5 of CMP-TAX)