

TAXABLE YEAR

California Electronic Funds Withdrawal Payment Signature Authorization for Individuals and Fiduciaries

FORM

2018

8879 (PMT)

Name of taxpayer, estate, or trust; Spouse's/RDP's name or name and title of fiduciary; SSN, ITIN, or FEIN; Spouse's/RDP's SSN or ITIN

Part I Extension Payment Information for Taxable Year 2018

1 Electronic Funds Withdrawal (EFW) Amount; 2 Withdrawal Date (mm/dd/yyyy)

Part II Scheduled Estimated Tax Payments for Taxable Year 2019 These are NOT installments of the current amount you owe.

Table with 5 columns: Amount, First Payment, Second Payment, Third Payment, Fourth Payment

Part III Banking Information for Electronic Funds Withdrawals from Parts I and II

5 Routing number; 6 Account number; 7 Type of account: Checking Savings

Part IV Taxpayer or Fiduciary Declaration and Signature Authorization

I authorize an EFW on the date indicated on line 2 for the amount stated on line 1, plus EFWs for the estimated payments to be made on the dates indicated on line 4, for each amount stated on line 3, corresponding to the estimated payment date.

Taxpayer or fiduciary's PIN: check one box only

I authorize ERO firm name to enter my PIN; I will enter my PIN as my signature on my 2018 e-filed California EFW payment request.

Your signature; Date

Spouse's/RDP's PIN: check one box only

I authorize ERO firm name to enter my PIN; I will enter my PIN as my signature on my 2018 e-filed California EFW payment request.

Spouse's/RDP's signature; Date

Practitioner PIN Method Payments Only -- continue below

Part V Certification and Authentication — Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

Pin entry box

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the 2018 California EFW payment request for the taxpayer(s) or fiduciary indicated above.

ERO's signature; Date