

**IMPORTANT NOTICE**

Taxpayers who file electronically and owe additional Louisiana individual income tax for 2019 must complete the payment voucher at the bottom of this form, detach the voucher, and mail it by **May 15, 2020**, in order to avoid the assessment of penalties and interest. The top portion of this form should also be completed and retained by the taxpayer as a record of payment.

- **DO NOT SEND CASH.**
- Complete and retain this portion as a record of payment.
- You can make payments electronically at [www.revenue.louisiana.gov/latap](http://www.revenue.louisiana.gov/latap)

|                                |       |     |
|--------------------------------|-------|-----|
| Your Name                      |       |     |
| If Joint Return, Spouse's Name |       |     |
| Address                        |       |     |
| City                           | State | ZIP |

**Enter in order as listed on tax return**

|                                 |
|---------------------------------|
| Your Social Security Number     |
| Spouse's Social Security Number |

|                   |
|-------------------|
| Amount of payment |
| Check Number      |
| Date Sent         |

**Detach and submit the voucher below with your payment by May 15, 2020.**

**INDIVIDUAL INCOME TAX ELECTRONIC FILING PAYMENT VOUCHER**

**2019**

**E**

|                                |       |     |
|--------------------------------|-------|-----|
| Your Name                      |       |     |
| If Joint Return, Spouse's Name |       |     |
| Address                        |       |     |
| City                           | State | ZIP |

**Enter in order as listed on tax return.**

|                                 |
|---------------------------------|
| Your Social Security Number     |
| Spouse's Social Security Number |

**Make payment to:**  
Louisiana Department of Revenue  
P. O. Box 3550  
Baton Rouge, LA 70821-3550

Amount of payment **(DO NOT SEND CASH)**

**\$**

**Please include the last four digits of your Social Security Number on your payment**



**Mail date**

|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |
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**For office use only**

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