DETACH F	IERE
----------	------

2022 Form M-8736

Massachusetts Fiduciary Extension Payment Voucher

Payment for period end date (mm/dd/yyyy)	Tax type	Voucher type	ID type	Vendor code	
	049	18	004	0001	
Name		Federal Identification number		Type of form you plan to file	
				☐ Form 2 ☐ Form 2G	
Mailing address					
City/Town		State	Zip	Amount enclosed	
				\$	

Pay online at mass.gov/masstaxconnect. Or, return this voucher with check or money order payable to: Commonwealth of Massachusetts. Mail to: Massachusetts Department of Revenue, PO Box 7062, Boston, MA 02204.



AREA RESERVED For 2-d barcode