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PAYMENT VOUCHER FOR MAINE INCOME TAX WITHHELD

Maine Revenue Services
P.O. Box 9101
Augusta, ME 04332-9101



99

Form 900ME

1106510

Withholding Account Number: 99 9999999999

1. Amount Remitted: 9 999 999 .99

Business

Name: XXXXXXXXXXXXXXXXXXXXXXXXXXXX

2. Quarter Begin Date: 99 99 9999

Quarter End Date: 99 99 9999

3. Date Wages/Non-wages Paid Amount Withheld

Date Wages/Non-wages Paid	Amount Withheld
_____	_____
_____	_____
_____	_____

Contact Person

Contact Person's Telephone Number

MAKE CHECK PAYABLE TO TREASURER, STATE OF MAINE

DO NOT STAPLE OR TAPE CHECK TO YOUR FORM. DO NOT CUT FORM. DO NOT SEND PHOTOCOPIES OF FORMS.

THIS FORM IS NOT REQUIRED IF PAYMENT WAS MADE ELECTRONICALLY.