

2021

FORM 1120ES-ME

MAINE ESTIMATED TAX
PAYMENT VOUCHER FOR **CORPORATIONS**



99

VOUCHER 1 - DUE APRIL 15

1300210

(or 15th day of the fourth month for fiscal year taxpayers)

Enter beginning and ending dates for the entire tax year.

If this payment is for a short year period, enter the next filing period below.

to

to

MM DD YYYY

MM DD YYYY

MM DD YYYY

MM DD YYYY

Corporation Name

Amount of Payment

.00

Address

Federal Employer ID Number

City, Town, or Post Office

State

ZIP Code

Contact Phone Number

**Make check payable to TREASURER, STATE OF MAINE. Mail check and this voucher to:
Maine Revenue Services, P.O. Box 9101, Augusta, ME 04332-9101**

- Do not staple or tape check to your form.
- Include the original full sheet of this form with your payment.

This form is not required if payment was made electronically.

2021

FORM 1120ES-ME

MAINE ESTIMATED TAX
PAYMENT VOUCHER FOR **CORPORATIONS**



99

VOUCHER 2 - DUE JUNE 15

1300210

(or 15th day of the sixth month for fiscal year taxpayers)

Enter beginning and ending dates for the entire tax year.

If this payment is for a short year period, enter the next filing period below.

MM DD YYYY

MM DD YYYY

MM DD YYYY

MM DD YYYY

Corporation Name

Amount of Payment

Address

Federal Employer ID Number

City, Town, or Post Office

State

ZIP Code

Contact Phone Number

**Make check payable to TREASURER, STATE OF MAINE. Mail check and this voucher to:
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PAYMENT VOUCHER FOR **CORPORATIONS**



99

VOUCHER 3 - DUE SEPTEMBER 15
(or 15th day of the ninth month for fiscal year taxpayers)

1300210

Enter beginning and ending dates for the entire tax year.

If this payment is for a short year period, enter the next filing period below.

MM DD YYYY

MM DD YYYY

MM DD YYYY

MM DD YYYY

Corporation Name

Amount of Payment

Address

Federal Employer ID Number

City, Town, or Post Office

State

ZIP Code

Contact Phone Number

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FORM 1120ES-ME

MAINE ESTIMATED TAX
PAYMENT VOUCHER FOR **CORPORATIONS**



99

VOUCHER 4 - DUE DECEMBER 15
(or 15th day of the twelfth month for fiscal year taxpayers)

Enter beginning and ending dates for the entire tax year.

If this payment is for a short year period, enter the next filing period below.

MM DD YYYY

MM DD YYYY

MM DD YYYY

MM DD YYYY

Corporation Name

Amount of Payment

Address

Federal Employer ID Number

City, Town, or Post Office

State

ZIP Code

Contact Phone Number

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