

Maine Revenue Services

PV
SPT TeleFile Payment Voucher



Taxpayer Name Preprinted **Account Number** **XXXXXXX**

Payment Amount: \$

Period Start Date:

Month Day Year

Period End Date:

Month Day Year

DO NOT SEND THIS ORIGINAL FORM

MAKE COPIES TO SEND WITH EACH PAYMENT

MAIL THIS VOUCHER WITH YOUR PAYMENT TO:
MAINE REVENUE SERVICE
P. O. BOX 9101
AUGUSTA, ME 04332-9101

MAKE CHECK PAYABLE TO:
TREASURER, STATE OF MAINE

BE SURE TO WRITE YOUR ACCOUNT NUMBER ON YOUR CHECK.