

Iowa Department of Revenue

IA 1120ES

Corporate Estimate Tax Payment Voucher

INSTALLMENT 1

Due Date: Last day of the 4th month of the calendar or fiscal year

Corporation Name: _____

FEIN:

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Address: _____

Period Ending:

--	--	--	--	--

City, State ZIP: _____

Payment Amount:

--	--	--	--	--	--	--	--	--	--

Phone: _____

Mail to:

Iowa Department of Revenue
PO Box 10466
Des Moines IA 50306-0466

Make checks payable to:

Treasurer, State of Iowa

When you pay by check, you authorize the Department of Revenue to convert your check to a one-time electronic banking transaction. 45-004 (06/17/15)



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Iowa Department of Revenue

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INSTALLMENT 2

Due Date: Last day of the 6th month of the calendar or fiscal year

Corporation Name: _____

FEIN:

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Address: _____

Period Ending:

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City, State ZIP: _____

Payment Amount:

--	--	--	--	--	--	--	--	--	--

Phone: _____

Mail to:

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Des Moines IA 50306-0466

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INSTALLMENT 3

Due Date: Last day of the 9th month of the calendar or fiscal year

Corporation Name: _____

FEIN:

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Address: _____

Period Ending:

--	--	--	--	--

City, State ZIP: _____

Payment Amount:

--	--	--	--	--	--	--	--	--	--

Phone: _____

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Due Date: Last day of the 12th month of the calendar or fiscal year

Corporation Name: _____

FEIN:

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Address: _____

Period Ending:

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City, State ZIP: _____

Payment Amount:

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Phone: _____

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