

HP-1040 • ES
2012

PAYABLE TO:
AND MAIL TO:

"TREASURER, CITY OF HIGHLAND PARK"
INCOME TAX, 3401 EVALINE
HAMTRAMCK, MICHIGAN 48212

Voucher 2

(Calendar Year - Due June 30, 2012)

YOUR SOCIAL SECURITY NO.

SPOUSES SOCIAL SECURITY NO.

IF CORPORATION OR PARTNERSHIP
FEDERAL I.D. NUMBER

LAST NAME, FIRST & MIDDLE INT. AND ADDRESS OF BOTH SPOUSES IF JOINT PAYMENT

PAYMENT IS
FOR
YEAR
ENDING _____

MONTH YEAR

**CITY OF HIGHLAND PARK
ESTIMATED
TAX PAYMENT**

TOTAL
ESTIMATE
AMOUNT OF
THIS PAYMENT \$ _____

(TO BE USED FOR MAKING PAYMENT)

RETURN THIS VOUCHER WITH CHECK OR MONEY ORDER

PLEASE TYPE OR PRINT

HP-1040 • ES
2012

PAYABLE TO:
AND MAIL TO:

"TREASURER, CITY OF HIGHLAND PARK"
INCOME TAX, 3401 EVALINE
HAMTRAMCK, MICHIGAN 48212

Voucher 1

(Calendar Year - Due April 30, 2012)

YOUR SOCIAL SECURITY NO.

SPOUSES SOCIAL SECURITY NO.

IF CORPORATION OR PARTNERSHIP
FEDERAL I.D. NUMBER

LAST NAME, FIRST & MIDDLE INT. AND ADDRESS OF BOTH SPOUSES IF JOINT PAYMENT

PAYMENT IS
FOR
YEAR
ENDING _____

MONTH YEAR

**CITY OF HIGHLAND PARK
ESTIMATED
TAX PAYMENT**

TOTAL
ESTIMATE
AMOUNT OF
THIS PAYMENT \$ _____

(TO BE USED FOR MAKING PAYMENT)

RETURN THIS VOUCHER WITH CHECK OR MONEY ORDER

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PAYABLE TO:
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"TREASURER, CITY OF HIGHLAND PARK"
INCOME TAX, 3401 EVALINE
HAMTRAMCK, MICHIGAN 48212

Voucher **4**

(Calendar Year - Due January 31, 2013)

YOUR SOCIAL SECURITY NO.

SPOUSES SOCIAL SECURITY NO.

IF CORPORATION OR PARTNERSHIP
FEDERAL I.D. NUMBER

LAST NAME, FIRST & MIDDLE INT. AND ADDRESS OF BOTH SPOUSES IF JOINT PAYMENT

PAYMENT IS
FOR
YEAR
ENDING

MONTH YEAR

CITY OF HIGHLAND PARK
ESTIMATED
TAX PAYMENT

TOTAL
ESTIMATE
AMOUNT OF
THIS PAYMENT

\$

(TO BE USED FOR MAKING PAYMENT)

RETURN THIS VOUCHER WITH CHECK OR MONEY ORDER

PLEASE TYPE OR PRINT

HP-1040 • ES
2012

PAYABLE TO:
AND MAIL TO:

"TREASURER, CITY OF HIGHLAND PARK"
INCOME TAX, 3401 EVALINE
HAMTRAMCK, MICHIGAN 48212

Voucher **3**

(Calendar Year - Due September 30, 2012)

YOUR SOCIAL SECURITY NO.

SPOUSES SOCIAL SECURITY NO.

IF CORPORATION OR PARTNERSHIP
FEDERAL I.D. NUMBER

LAST NAME, FIRST & MIDDLE INT. AND ADDRESS OF BOTH SPOUSES IF JOINT PAYMENT

PAYMENT IS
FOR
YEAR
ENDING

MONTH YEAR

CITY OF HIGHLAND PARK
ESTIMATED
TAX PAYMENT

TOTAL
ESTIMATE
AMOUNT OF
THIS PAYMENT

\$

(TO BE USED FOR MAKING PAYMENT)

RETURN THIS VOUCHER WITH CHECK OR MONEY ORDER

PLEASE TYPE OR PRINT