

# QUARTERLY ESTIMATE PAYMENT

FEDERAL EMPLOYER IDENTIFICATION NO.

TAXPAYER'S ACCOUNT NUMBER, NAME AND ADDRESS

## SECOND QUARTER

(DUE JUNE 15, 2016)

AMOUNT PAID

- CALENDAR YEAR \_\_\_\_\_ OR  
 FISCAL OR PART YEAR, MONTH BEGINNING \_\_\_\_\_  
AND MONTH ENDING \_\_\_\_\_

REMIT PAYMENT TO:

**CITY OF TROTWOOD INCOME  
TAX SUPPORT SERVICES**  
4 STRADER DRIVE  
TROTWOOD OH 45426-3395  
PHONE (937) 837-3415



FORM TQ-01

# QUARTERLY ESTIMATE PAYMENT

FEDERAL EMPLOYER IDENTIFICATION NO.

TAXPAYER'S ACCOUNT NUMBER, NAME AND ADDRESS

## THIRD QUARTER

(DUE SEPTEMBER 15, 2016)

AMOUNT PAID

- CALENDAR YEAR \_\_\_\_\_ OR  
 FISCAL OR PART YEAR, MONTH BEGINNING \_\_\_\_\_  
AND MONTH ENDING \_\_\_\_\_

REMIT PAYMENT TO:

**CITY OF TROTWOOD INCOME  
TAX SUPPORT SERVICES**  
4 STRADER DRIVE  
TROTWOOD OH 45426-3395  
PHONE (937) 837-3415



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# QUARTERLY ESTIMATE PAYMENT

FEDERAL EMPLOYER IDENTIFICATION NO.

TAXPAYER'S ACCOUNT NUMBER, NAME AND ADDRESS

## FOURTH QUARTER

(DUE DECEMBER 15, 2016)

AMOUNT PAID

- CALENDAR YEAR \_\_\_\_\_ OR  
 FISCAL OR PART YEAR, MONTH BEGINNING \_\_\_\_\_  
AND MONTH ENDING \_\_\_\_\_

REMIT PAYMENT TO:

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