DELAWARE DIVISION OF REVENUE

WITHHOLDING TAX RETURN

FORM W1A 9301



DF60018019999

W8

(Rev 09/2018)

FOR OFFICE USE ONLY ACCOUNT NUMBER TAX PERIOD ENDING

STATE OF DELAWARE DIVISION OF REVENUE P.O. BOX 830 1. DELAWARE INCOME TAX WITHHELD 2. AMOUNT REMITTED		GES MUST BE MADE ON THE REQUEST FOR CHANG CHECK THE BOX IF YOU ARE FILING A CHANGE FOR			
Mail This Form With Remittance Payable To: P.O. BOX 830 WILMINGTON, DE 19899-8330 2. AMOUNT REMITTED If Line 2 does not equal Line 1, indicate the Tax Period End for which an adjustment is being made and write an explanation on the back of this form TELEPHONE NUMBER:	all (302) 311-0119.	STATE OF DELAWARE	1. DELAWARE INCOME		
for which an adjustment is being made and write an explanation on the back of this form	Mail This Form With Remittance Payable To:	P.O. BOX 830	2. AMOUNT REMITTED		
EMAILADDRESS: DATE: WM DD YY				ite the lax Fellou Lifu	
			for which an adjustment is being mad	e and write an explanation on	the back of this form.
	X	TURE I declare under penalties of perjury that this is	for which an adjustment is being mad	e and write an explanation on	the back of this form.

CUT ABOVE AND RETURN