

DELAWARE DIVISION OF REVENUE
FORM 200-ES DECLARATION OF ESTIMATED INCOME TAX
RETURN WITH INSTALLMENT DUE

0091-01

DO NOT WRITE OR STAPLE IN THIS AREA
DORET

TAXPAYER SOC. SEC. NO.	SPOUSE SOC. SEC. NO.	TAXABLE YEAR
------------------------	----------------------	--------------

ENTER LAST NAME, FIRST NAME, SPOUSE NAME & ADDRESS

Last Name First Name

Spouse's Last Name Spouse's First Name

Street Address

City State Zip Code

(Revised 09/2018)

1. Amount of this installment	\$
2. Amount of unused overpayment credit, if any, applied to this installment (see instructions)	\$
3. Amount of this installment payment (line 1 less line 2)	\$

RETURN THIS COPY WITH YOUR CHECK PAYABLE TO:

DIVISION OF REVENUE
P.O. BOX 830, WILMINGTON, DELAWARE 19899-0830
File Online at www.revenue.delaware.gov - It's Quick and Easy!



DF64019019999

Cut Here