



**DELAWARE** 2023  
DIVISION OF REVENUE F O R M  
PIT-VCH  
ELECTRONIC FILER PAYMENT VOUCHER



1	YOUR TAXPAYER ID	2	SECONDARY TAXPAYER ID (if joint return)	3	AMOUNT OF THE PAYMENT
	<input type="text"/>		<input type="text"/>		\$ <input type="text"/>
4	YOUR FIRST NAME	YOUR LAST NAME			
	<input type="text"/>	<input type="text"/>			
5	SECONDARY FIRST NAME	SECONDARY LAST NAME			
	<input type="text"/>	<input type="text"/>			
6	STREET ADDRESS				
	<input type="text"/>				
	CITY	STATE	ZIP CODE		
	<input type="text"/>	<input type="text"/>	<input type="text"/>		

Make your check or money order payable to  
"Delaware Division of Revenue".  
Do not send cash.



**Mail completed form to:**  
Delaware Division of Revenue  
PO Box 830  
Wilmington, DE 19899-0830



DO NOT CUT THIS PAGE

