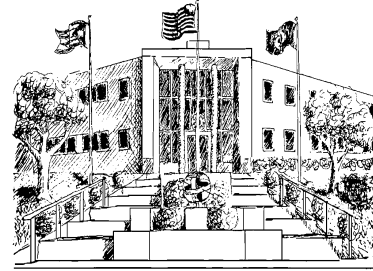


# CITY OF PARMA – DIVISION OF TAXATION

6611 RIDGE ROAD  
PARMA, OH 44129

MON-FRI  
8:30 AM TO 4:30 PM

PHONE: (440) 885-8045 – FAX: (440) 885-8044



**Michael P. Mason**  
Tax Commissioner

**ESTIMATE OF QUARTERLY TAX DUE**  
Quarterly Billing for **Estimated** Parma Income Tax for Year \_\_\_\_\_ Quarter \_\_\_\_

Account Number	FID Number	SSN Number	Due Date	Amount Due

Estimated Tax for The Year	\$
Estimated Parma Tax Due:	\$
Less Amount Previously Paid:	(-) \$
Balanced Due:	\$

**PENALTY AND INTEREST MUST BE ASSESSED WHEN FILING ANNUAL RETURN  
IF 80% OF TAX OWED WAS NOT PAID ON DECLARATION BY DECEMBER 31<sup>ST</sup>.**

RETAIN THIS UPPER PORTION FOR YOUR RECORDS. DETACH AND RETURN THE FORM BELOW  
WITH YOUR PAYMENT IN THE ENCLOSED ENVELOPE

**D** **ESTIMATE OF QUARTERLY TAX DUE**  
Quarterly Billing for **Estimated** Parma Income Tax for Year \_\_\_\_\_ Quarter \_\_\_\_

Account Number	FID Number	SSN Number	Due Date	Estd Tax For the Year _____	Amount Due

Make Check Payable To: CITY OF PARMA DIV OF TAX

Mail Check To: CITY OF PARMA  
PO BOX 94734  
CLEVELAND, OH 44101-4734

IF YOU HAVE MOVED GIVE US THE DATE \_\_\_\_\_ AND YOUR NEW ADDRESS