CBT-100-V CORPORATION BUSINESS TAX—PAYMENT VOUCHER

- - - - -

For the period beginning ______, 20 ____ and ending ______, 20 ____

_ _ _ _ _ _ _ _ _ _ _ _ _

| Federal Employer I.D. Number | | Corporation Number | Return this voucher with your payment. Make checks payable to: State of New Jersey – CBT Write the Federal ID number and tax year on the check. |
|-------------------------------------|-------|--------------------|---|
| Corporation Name Mailing Address | | | Mail To: Corporation Business Tax PO Box 666 Trenton, NJ 08646-0666 Enter amount of payment here: |
| City | State | Zip Code | |
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