

PA-40 Payment Voucher (PA-V)

Use the 2014 form PA-V with your payment if you owe tax with your 2014 PA-40, Individual Income Tax Return. Do not use this voucher for any other purpose. Follow the instructions below.

Social Security Number (SSN)

- SSN - enter your nine-digit SSN without the hyphens.
- SSN - enter your spouse's nine-digit SSN without the hyphens.

Check Digit

Print the first two letters of the last name of the taxpayer.

Name of Taxpayer and Spouse

- Print the last name, first name and middle initial of the taxpayer and spouse.

Address

- First and Second Line of Address – Print the taxpayer's complete street address. If the address has an apartment, suite or RR number, enter after the street address. If only one line is needed, use the First Line of Address.
- City – Print the name of the city. For foreign addresses, the bottom line of the address should show only the country name, written in full (no abbreviations) and in capital letters.
- State – Print the two-digit state abbreviation.
- ZIP – Print the five-digit ZIP Code.

Taxpayer's Phone Number

Print the taxpayer's 10-digit phone number with area code including hyphens.

Payment

Carefully enter the amount of your payment.

Make the check or money order payable to the PA DEPT. OF REVENUE. Please write on your check or money order:

- The last four digits of the primary taxpayer's SSN;
- "2014 PA-40"; and
- Daytime telephone number of the taxpayer(s).

If the check or money order does not include the primary taxpayer's name, the department will also need the name of the primary taxpayer as well as the information requested above. In the event the check becomes separated from the PA-V, the department will need this information to accurately apply the payment.

Mailing Address

If you are filing a paper return, please remit payment with your return.

If you are filing using Fed/State e-file, PA Free File or PA Free Fillable Forms please use the following address:

**PA DEPARTMENT OF REVENUE
PAYMENT ENCLOSED
1 REVENUE PLACE
HARRISBURG PA 17129-0001**

▼ DETACH HERE ▼

2014 PA-V PA PAYMENT VOUCHER

PRIMARY SSN

CHECK DIGIT SPOUSE'S SSN

LAST NAME		FIRST NAME	MI
SPOUSE'S LAST NAME		FIRST NAME	MI
FIRST LINE OF ADDRESS			
SECOND LINE OF ADDRESS			
CITY	STATE	ZIP	PHONE NUMBER

PAYMENT AMOUNT

Make check or money order payable to the Pennsylvania Department of Revenue

DEPARTMENT USE ONLY