CITY OF WALKER

ESTIMATED INCOME TAX PAYMENT VOUCHER

W-1120ES Calendar Year - Due April 30, 2024 **2024**

FIRST QUARTER **VOUCHER 1**

CORPORATION NAME	CORPORATION'S FEIN	CONTACT PHONE NUMBER
DBA	CONTACT NAME	
MAILING ADDRESS (NUMBER AND STREET)	AMOUNT OF ESTIMATED TAX YOU ARE PAYING	$ .00
CITY, TOWN OR POST OFFICE STATE ZIP CODE	**MAKE CHECK PAYABLE TO: WALKER CITY TREASURER OR COMPLETE BANK ACCOUNT INFORMATION FOR DIRECT WITHDRAWAL**	

ROUTING NUMBER ☐☐☐☐☐☐☐☐☐ ACCOUNT TYPE: CHECKING ☐ SAVINGS ☐

ACCOUNT NUMBER ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ EFFECTIVE DATE OF WITHDRAWAL

MAIL TO: CITY OF WALKER INCOME TAX DEPARTMENT, P.O. BOX 153, GRAND RAPIDS MI 49501-0153

CITY OF WALKER

ESTIMATED INCOME TAX PAYMENT VOUCHER

W-1120ES Calendar Year - Due July 1, 2024 **2024**

SECOND QUARTER **VOUCHER 2**

CORPORATION NAME	CORPORATION'S FEIN	CONTACT PHONE NUMBER
DBA	CONTACT NAME	
MAILING ADDRESS (NUMBER AND STREET)	AMOUNT OF ESTIMATED TAX YOU ARE PAYING	$ .00
CITY, TOWN OR POST OFFICE STATE ZIP CODE	**MAKE CHECK PAYABLE TO: WALKER CITY TREASURER OR COMPLETE BANK ACCOUNT INFORMATION FOR DIRECT WITHDRAWAL**	

ROUTING NUMBER ☐☐☐☐☐☐☐☐☐ ACCOUNT TYPE: CHECKING ☐ SAVINGS ☐

ACCOUNT NUMBER ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ EFFECTIVE DATE OF WITHDRAWAL

MAIL TO: CITY OF WALKER INCOME TAX DEPARTMENT, P.O. BOX 153, GRAND RAPIDS MI 49501-0153

CITY OF WALKER

ESTIMATED INCOME TAX PAYMENT VOUCHER

W-1120ES
THIRD QUARTER

Calendar Year - Due September 30, 2024

2024
VOUCHER 3

CORPORATION NAME	CORPORATION'S FEIN	CONTACT PHONE NUMBER
DBA	CONTACT NAME	
MAILING ADDRESS (NUMBER AND STREET)	AMOUNT OF ESTIMATED TAX YOU ARE PAYING	$ .00
CITY, TOWN OR POST OFFICE / STATE / ZIP CODE	**MAKE CHECK PAYABLE TO: WALKER CITY TREASURER OR COMPLETE BANK ACCOUNT INFORMATION FOR DIRECT WITHDRAWAL**	

ROUTING NUMBER ☐☐☐☐☐☐☐☐☐ ACCOUNT TYPE: CHECKING ☐ SAVINGS ☐

ACCOUNT NUMBER ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ EFFECTIVE DATE OF WITHDRAWAL ☐

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CITY OF WALKER

ESTIMATED INCOME TAX PAYMENT VOUCHER

W-1120ES
FOURTH QUARTER

Calendar Year - Due January 31, 2025

2024
VOUCHER 4

CORPORATION NAME	CORPORATION'S FEIN	CONTACT PHONE NUMBER
DBA	CONTACT NAME	
MAILING ADDRESS (NUMBER AND STREET)	AMOUNT OF ESTIMATED TAX YOU ARE PAYING	$ .00
CITY, TOWN OR POST OFFICE / STATE / ZIP CODE	**MAKE CHECK PAYABLE TO: WALKER CITY TREASURER OR COMPLETE BANK ACCOUNT INFORMATION FOR DIRECT WITHDRAWAL**	

ROUTING NUMBER ☐☐☐☐☐☐☐☐☐ ACCOUNT TYPE: CHECKING ☐ SAVINGS ☐

ACCOUNT NUMBER ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ EFFECTIVE DATE OF WITHDRAWAL ☐

MAIL TO: CITY OF WALKER INCOME TAX DEPARTMENT, P.O. BOX 153, GRAND RAPIDS MI 49501-0153