New York State Department of
Taxation and Finance

Payment Document

If name or address shown is incorrect or has changed, enter correct information and return this **entire** payment document.

E-027487543-8
SIMON-CLAUDE A
71 TONJES RD
CALLICOON NY 12723-5729

Instructions - Use the coupon below to pay your outstanding liability(ies).
- Mark an **X** in the appropriate box(es) and enter the amount to be applied and the payment amount enclosed in the spaces provided.
- If you entered a name or address change above, return this **entire** payment document; **otherwise,** detach the coupon below and return it with your payment.

DTF-968.11 (8/13)

Amount to be applied

- ☐ Payment for **Case ID:** E-027487543-8 $ _____
- ☐ Payment for other outstanding liabilities; enter **Taxpayer ID:** _____ $ _____

Make your check or money order payable to ***Commissioner of Taxation and Finance.*** Include your Taxpayer ID number on your payment.

If you prefer to pay by credit card or directly from your bank account, visit our Web site at *www.tax.ny.gov* and select ***Make a payment.***

Enter amount enclosed ► $

For office use only

Form track number	•
Amount received	•
Payment effect/rec'd dates	•

Mail to the address below

NYS ASSESSMENT RECEIVABLES
PO BOX 4127
BINGHAMTON NY 13902-4127

DTF-968.11 (8/13)

E0274875438 00000000000000