

FR-127 Extension of Time to File a DC Income Tax Return



1 6 1 2 7 0 1 1 0 0 0 0

Official Use Only Vendor ID# 0000

Important: Print in CAPITAL letters using black ink.

Amount of payment (dollars only)

\$

.00

Your social security number (SSN)

Spouse's/registered domestic partner's SSN

Your daytime telephone number

Your first name

M.I.

Last name

Spouse's/registered domestic partner's first name

M.I.

Last name

Home address (number, street and suite/apartment number if applicable)

City

State

Zip Code +4