

Payment Voucher is at bottom of page.
Be sure to cut where indicated.

▼ CUT HERE ▼

Form 2-PV Massachusetts Fiduciary Income Tax Payment Voucher

2007

STAPLE CHECK HERE	Name of estate or trust	U.S. taxpayer number
	Name of fiduciary Title	Payment for the year ending: MONTH / DAY / YEAR
	Mailing address of fiduciary	Amount enclosed \$
	City/Town State Zip	<input type="checkbox"/> Check if name/address changed since 2006

Mail to: **Massachusetts Department of Revenue, PO Box 7018, Boston MA 02204.**
Make check payable to: Commonwealth of Massachusetts.

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