

**BE SURE TO DETACH VOUCHER WHERE INDICATED
FAILURE TO DO SO WILL RESULT IN DELAYS
PROCESSING YOUR PAYMENT**

DETACH HERE

2017 Form PV
Massachusetts Income Tax Payment Voucher



Payment for period end date (mm/dd/yyyy)	Tax type 053	Voucher type 01	ID type 005	Vendor code 0001
Name of taxpayer	Social Security number			
Name of taxpayer's spouse	Social Security number of taxpayer's spouse			
Street address				
City/Town	State	Zip	Amount enclosed \$	
Phone	E-mail		Fill in if name/address changed since 2016 <input type="checkbox"/>	

Pay online at mass.gov/masstaxconnect. Or, return this voucher with check or money order payable to: **Commonwealth of Massachusetts**.
Mail to: **Massachusetts Department of Revenue, PO Box 7062, Boston, MA 02204**.