

Virginia Department of Taxation

Substitute Forms Specifications

VM2V – Vending Machine Dealer’s Sales Tax Voucher

Special Notes

- Document ID – 232
- Barcode – No
- Rounding – No; the length of 15 for numeric fields includes the 2 places for the cents.
- Due Date – 20th of the month following end of period
- Neither the OCR Line nor the Account Number field may contain dashes or hyphens (-).
- Review the instructions provided via the [main Forms page](#) when computations are required and/or when amount/numbers must be transferred to/from another form.

Use the [Check Digit Calculator](#) to determine the correct digit used in the applicable section of the OCR Line.

OCR Table

Example – 16XXXXXXXXX1###D 232VVVV 1YYMM

Section	Length	Position	Format / Data	Description / Details
Tax Code	2	Col. 6, Row 52	Numeric	16
FEIN	9		Numeric	XXXXXXXXX = 9 digits or V with 8 digits
External ID Type	1		Numeric	1 = indicates the 9 digits before it as the FEIN
Account Suffix	3		Numeric	### = 3-digit Account Suffix, Ex. 001, 002, 003
Check Digit (for Account Number)	1		Numeric	D = Check Digit Calculator result
Blank Space	1		N/A	
Doc ID	3		Numeric	232
Vendor ID	4		Numeric	VVVV = 4 digits of the NACTP Vendor ID code
Blank Space	1		N/A	
Filing Period	5		Date (1YYMM)	Ending date of the Filing Period 1 = Century, YY = Tax Year, MM = Month
Check Digit (for Filing Period)	1		Numeric	D = Check Digit Calculator

Form Table

Field	Length	Justified / Position	Format	Negative Allowed?	Description / Details
OCR Line	31	Col. 6, Row 52	Numeric	N/A	See OCR Table for details
Filing Period	7	Left	Date	N/A	MM/YYYY
Due Date	10	Left	Date	N/A	MM/DD/YYYY
Account Number	15	Left	Alphanumeric	N/A	16XXXXXXXXXF### 16 = Tax Code, XXXXXXXXXXX = FEIN, F### = ID Type & Account Suffix
Name	40	Left	Alphanumeric	N/A	Name of customer
Address (Number & Street)	80	Left	Alphanumeric	N/A	Street address of customer
City, State & ZIP Code	52	Left	Alphanumeric	N/A	City, State Abbreviation & ZIP Code of customer
Total Amount Due	15	Right Col. 60, Row 60	Numeric	No	Amount

5 1 5 2 5 3 5 4 5 5 5 6 5 7 5 8

0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

5 5 10 5 20 5 30 5 40

Form VM-2V Virginia Vending Machine Dealer's Sales Tax Voucher
 (Doc ID 232)

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Preparation of Voucher (VM-2V)

If paying by check, enter the total amount due from Form VM-2 on the voucher, Form VM-2V, and enclose this voucher and your check with your return. Make your check payable to the Department of Taxation.

Mailing Address: Department of Taxation
 P.O. Box 26627
 Richmond VA 23261-6627

Total Amount Due From Form VM-2

5	6	7	8
5	0	5	0

Form VM-2V 2601193 Rev. 03/13	Filing Period (MM-YYYY)	Due Date
	Account Number	
	Name	
	Address	
	City, State, ZIP	

5 1 5 2 5 3 5 4 5 5 0 5 0 5 0 5 0