Taxpayer Name:				
Social Security No:				
Due on or Before:	4/30/2021, due date of 2020	return*		
Payment:	\$			
Payment Method:	Make payment by check or money order payable to "City of Lansing." Include your social security number, daytime phone number, and "2020 L-1040PV" on your check or money order. DO NOT SEND CASH. To pay by credit card or direct debit, see income tax website of the City of Lansing. Not all cities accept credit card or direct debit payments.			
Paying with Return:	This payment voucher is not used when including payment with your tax return. When paying with your return, place the payment on top of the return in the envelope. Do not attach the check to the return.			
Address for Payment:	City of Lansing Income Ta	x Department		
·	PO Box 40752 Lansing, MI 48901			
* Due Date If the due of	date falls on a Saturday, S	Sunday or holiday, the	e due date is the next b	usiness day.
Taxpayer Records:	Amount Paid: Check Number: Date Mailed:			
KEEP TOP PO	RTION FOR YOUR REC		TOM PORTION WITH Y	OUR PAYMENT
		V DETACH HERE V LANSING		Revised: 12/8/20
L-1040PV	INCOME TA	LANSING XX RETURN PAYMENT	· VOUCHER	2020 RET RPV
2 10 101 1	Mail To:	Lansing Income Tax De	partment	2020 1121 111 7
		PO Box 40752		
NACTP# EFIN#		Lansing, MI 48901		
Taxpayer's first name, initial, last name		Taxpayer's SSN		
If joint return spouse's first name, initial, last name		If joint payment, spouse's SSN		
Present home address (Number and street) Apt. no.		{2D Barcode of scan line data}		
Address line 2 (P.O. Box address for m.	ailing use only)			
City, town or post office	State Zip code			
Foreign country name, province/county,	postal code	Amount of tax interest or	nd populty you are paying by	Round to nearest dollar

check or money order