Provider Version of Form 80-106-10-3 Payment Voucher Individual Income Tax Return.

We have tried to include the changes for 2010 in this list, but we may have missed a few. Please check the form as well as this list.

Changes -

- 1) Updated the Barcode and dates.
- 2) Added Duplex or Photocopies will not be Accepted.
- 3) Updated the agency name State Tax Commission to Department of Revenue.

Photocopies or Duplex Forms NOT Acceptable

If you are filing a Fiduciary Return, enter the FEIN in the space provided.

Payment Voucher

At Bottom of Page

All Taxpayers are encouraged to file their return electronically. Mississippi allows returns to be filed electronically two ways:

- By using an approved e-file tax preparer, or
- On-line by using an approved on-line service provider

Returns are more accurate and refunds are much faster when you e-file.

Cut Along Dotted Line

Form 80-106-10-3-1-000 8010610310 Photocopies or Do	(Rev. 5/10) MS oo uplex Forms NOT Accepta	Payı Individ	SSISSIPPI ment Voucher dual Income Tax	2010	IIT
			[]	Taxpayer Social Securit	y Number
			1 []	Spouse Social Security	Number
<u></u>			1	Fiduciary FEIN	
Re	eturn this form with check/ oney order payable to: partment of Revenue.	Print Social Security Number on check. Include Spouse SSN if JOINT RETURN.	Mail to: Department of Revenue P. O. Box 23075 Jackson, MS 39225-3075	Total amount	of this payment

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Cut Along Dotted Line

Form 80-106-10-3-1		MS eptable	Paym	SISSIPPI nent Voucher ual Income Tax	2010	IIT
N1		N2	 	[N3	Taxpayer Social Securit	y Number
N4		N5			Spouse Social Security	Number
NIZ					 !	
Ä					Fiduciary FEIN	
C1	,C2	[C3	₁		i	
	Return this form with check money order payable to: Department of Revenue.	Number of Include S	ial Security on check. Spouse SSN RETURN.	Mail to: Department of Revenue P. O. Box 23075 Jackson, MS 39225-3075	Total amount	of this payment

Jackson, MS 39225-3075

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Payment Voucher

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Cut Along Dotted Line

Form 80-106-10-3-1-000 (Rev. 5/10)	2̄7/̄4 └──	MISSISSIPPI Payment Voucher Individual Income Tax	2010 IIT
6/9 to 25/9	27/9 to 51/9	53/9	Taxpayer Social Security Number
			66/10 to 75/10
		53/11	Spouse Social Security Number
6/13 to 50 /13			66/13 to 75/13
6/15 to 53/15			Fiduciary FEIN
			66/16 to 75/16
6/17 to20/17	23/17 27/17 to 35/17		
-	24/17	88.414	Total amount of this paym

Print Social Security

Number on check. Include Spouse SSN if JOINT RETURN.

Return this form with check/

money order payable to: Department of Revenue. Mail to:

Department of Revenue

Jackson, MS 39225-3075

P. O. Box 23075

71/20 to 79/20

Photocopies or Duplex Forms NOT Acceptable

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Payment Voucher

At Bottom of Page

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Form 80-106-10-3-1-000 (Rev. 5/10)

MS

MISSISSIPPI
Payment Voucher
Individual Income Tax

2010

IJТ

Photocopies or Duplex Forms NOT Acceptable

Doe John

Smith Jane

Estate of John Doe

1234 North St

Jackson MS 392151234

Taxpayer Social Security Number

1234567897

Spouse Social Security Number

3457893216

Fiduciary FEIN

4567891231

Total amount of this payment

Return this form with check/ money order payable to: **Department of Revenue**.

Print Social Security Number on check. Include Spouse SSN if JOINT RETURN. Mail to: Department of Revenue P. O. Box 23075 Jackson, MS 39225-3075

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4500

Key to the data fields for the Income Tax Payment voucher version for 2010. The form number is 80-106. This form must be approved by the Mississippi Department of Revenue.

Page 1:

C1

The top left corner of the barcode is located at position x=6, y=47 on the 10/6 grid.

The top right registration mark is located at the top right corner of grid box x=80, y=47.

The bottom left registration mark is located at lower left corner of grid box x=6, y=63, 1/2 inch from bottom of page.

"MS" to the left of the header must begin in grid space 27/47 and end in grid space 28/47 and be in an Courier 12 pt.

The "IIT" in the right hand corner should be at grids 70/49 to 72/49 and be in an Arial 18 pt.

The "2010" begins at grid 63/49 and ends at 67/49 and is in Arial 14 pt (bold).

Each Individual Income Tax Payment Voucher must be printed on a full page for approval.

The following is the labeling and the description of the items to be included in this form. The beginning and ending data position is included in one of the templates for the form. The field length is included in this key for each data position. Grid positioning given is from the first grid space to the last grid space included in a data field. (Example 22/9 to 29/9 is 8 grid spaces) You should use this information to position the data on the returns. Do not use a grid overlay to determine the positions from a printed paper form. The field length specified assumes using a **Courier 12 point font**, which is the required font. **The name and address fields should be left justified. All other fields should be right justified.** The money field should not contain any commas, cents, decimals or other formatting information except for the negative signs (-) as a leading indicator for any negative amount. Example -123456 Front (Page 1) of the form:

indicator for any negative amount. Example -123456 Front (Page 1) of the form:				
Field Name	Description			
Your Social Security Number		This is a numeric field. This is the taxpayer's Social Security Number. The last digit in this field is a check digit. Check digits should be calculated using Modulus 10 Self-check Digit Computation found in the Mississippi Guidelines for Provider of Substitute Forms. This field is 10 characters long.		
Spouse Social Security Number		This is a numeric field. This is the spouse's Social Security Number. The last digit in this field is a check digit. Check digits should be calculated using Modulus 10 Self-check Digit Computation found in the Mississippi Guidelines for Provider of Substitute Forms. This field is 10 characters long.		
Fiduciary FEIN		This is a numeric field. This is the Fiduciary's Federal Employer Identification Number. The last digit in this field is a check digit. Check digits should be calculated using Modulus 10 Self-check Digit Computation found in the Mississippi Guidelines for Provider of Substitute Forms. This field is 10 characters long.		
Amount of Payment		This is a numeric money field. This field is 9 characters long.		
•	•	This is an alpha field. This field is 20 characters long. This is an alpha field. This field is 25 characters long.		
N3 Taxp	N3 Taxpayer's middle initial. This is an alpha field. This field is 1 character long.			
N4 Spou				
	N5 Spouse's first name. This is an alpha field. This field is 25 characters long. This field should be completed if there is a spouse and left blank if there is no spouse.			
	Spouse's middle initial. This is an alpha field. This field is 1 character long. This field should be completed if there is a spouse and left blank if there is no spouse.			
	Fiduciary's name. This is an alpha field. This field is 45 characters long. This field should be completed if there is a fiduciary and left blank if there is no fiduciary.			
A Taxp	Taxpayer's current address. This is an alpha and numeric field. This field is 48 characters long.			

Taxpayer's city of residency. This is an alpha field. This field is 15 characters long.

- C2 Taxpayer's state of residency. This is an alpha field and contains the state two letter abbreviation of the taxpayer's residency. This field is 2 characters long.
- C3 Taxpayer's zip code. This is a numeric field and contains the taxpayer's zip code (Zip plus 4). If you do not have the plus 4, leave that portion blank and only enter the 5 digit Zip code. This field is 9 characters long.