If you filed your return:	Mail to:
On paper or electronically	PO Box 14555 Salem OR 97309-0940
With a 2-D barcode	PO Box 14720 Salem OR 97309-0463

Complete the form below using your computer.

After you have printed it, cut along the dotted line and mail to the Department of Revenue at the addresses shown above.

Note:

If, when typing, you see a solid box instead of letters or numbers, adjust the view size to 100%. If the letters or numbers still are not visible, press the tab key.

Clear Form

Detach Here

Detach Here

OREGON INCOME TAX PAYMENT VOUCHER

150-101-172 (Rev. 12-05) Web

FORM **40-V**

Department of Revenue Use Only

Fiscal Year Ending ____|____|____

● **Payment Type** (check only one):

☐ **2005** Return ☐ Amended—Tax Year: _____ ☐ Prior Tax Year: _____

☐ Check if filing Form MNR

☐ First time filer ☐ New name/address Telephone number _____

Enter Payment Amount

$. 0 0

Last name	First name and initial	SSN or BIN
Spouse's last name if joint payment	Spouse's first name and initial	Spouse's SSN if joint payment

Current mailing address	City	State	ZIP code