

<b>MAKE CHECK PAYABLE TO:</b> CITY OF MORaine 4200 DRYDEN RD MORaine, OH 45439  DO NOT REMIT CASH BY MAIL	<p style="text-align: center;"><b><u>QUARTERLY ESTIMATE-# 1</u></b> <b><u>CITY OF MORaine</u></b></p> VOICE (937) 535-1026                      FAX (937) 535-1281  WEBSITE- WWW.CI.MORaine.OH.US	<b>AMOUNT ENCLOSED \$</b> _____ CHECK # _____  <b>1st QUARTER 2018</b> DUE: APRIL 15, 2018
--	---	--

NAME \_\_\_\_\_

AND \_\_\_\_\_

ADDRESS \_\_\_\_\_

FEID # OR SSN # \_\_\_\_\_

THIS SPACE FOR OFFICAL USE ONLY

FORM-QI

<b>MAKE CHECK PAYABLE TO:</b> CITY OF MORaine 4200 DRYDEN RD MORaine, OH 45439  DO NOT REMIT CASH BY MAIL	<p style="text-align: center;"><b><u>QUARTERLY ESTIMATE-#2</u></b> <b><u>CITY OF MORaine</u></b></p> VOICE (937) 535-1026                      FAX (937) 535-1281  WEBSITE- WWW.CI.MORaine.OH.US	<b>AMOUNT ENCLOSED \$</b> _____ CHECK # _____  <b>2nd QUARTER 2018</b> DUE: JUNE 15, 2018
--	--	---

NAME \_\_\_\_\_

AND \_\_\_\_\_

ADDRESS \_\_\_\_\_

FEID # OR SSN # \_\_\_\_\_

THIS SPACE FOR OFFICAL USE ONLY

FORM-QI

<b>MAKE CHECK PAYABLE TO:</b> CITY OF MORaine 4200 DRYDEN RD MORaine, OH 45439  DO NOT REMIT CASH BY MAIL	<p style="text-align: center;"><b><u>QUARTERLY ESTIMATE-# 3</u></b> <b><u>CITY OF MORaine</u></b></p> VOICE (937) 535-1026                      FAX (937) 535-1281  WEBSITE- WWW.CI.MORaine.OH.US	<b>AMOUNT ENCLOSED \$</b> _____ CHECK # _____  <b>3rd QUARTER 2018</b> DUE: SEPTEMBER 15, 2018
--	---	--

NAME \_\_\_\_\_

AND \_\_\_\_\_

ADDRESS \_\_\_\_\_

FEID # OR SSN # \_\_\_\_\_

THIS SPACE FOR OFFICAL USE ONLY

FORM-QI

<b>MAKE CHECK PAYABLE TO:</b> CITY OF MORaine 4200 DRYDEN RD MORaine, OH 45439  DO NOT REMIT CASH BY MAIL	<p style="text-align: center;"><b><u>QUARTERLY ESTIMATE-# 4</u></b> <b><u>CITY OF MORaine</u></b></p> VOICE (937) 535-1026                      FAX (937) 535-1281  WEBSITE- WWW.CI.MORaine.OH.US	<b>AMOUNT ENCLOSED \$</b> _____ CHECK # _____  <b>4th QUARTER 2018</b> DUE: DECEMBER 15, 2018
--	---	---

NAME \_\_\_\_\_

AND \_\_\_\_\_

ADDRESS \_\_\_\_\_

FEID # OR SSN # \_\_\_\_\_

THIS SPACE FOR OFFICAL USE ONLY

FORM-QI