DELAWARE 2024

DIVISION OF REVENUE

FORM PIT-VCH

ELECTRONIC FILER PAYMENT VOUCHER

1 YOUR TAXPAYER ID

2 SECONDARY TAXPAYER ID (if joint return)

3 $ AMOUNT OF THE PAYMENT

4 YOUR FIRST NAME

YOUR LAST NAME

5 SECONDARY FIRST NAME

SECONDARY LAST NAME

6 STREET ADDRESS

CITY · STATE · ZIP CODE

Make your check or money order payable to "Delaware Division of Revenue". Do not send cash.

Mail completed form to:
Delaware Division of Revenue
PO Box 830
Wilmington, DE 19899-0830

DO NOT CUT THIS PAGE