



## Specifications for Individual Vouchers (8/19)

- Ink Color:** Black 100%
- Voucher Size:** 8 1/2 in. wide x 3 2/3 in. high
- Font:** Calibri 10pt (or similar sans-serif) unless otherwise indicated. **Copy example exactly.**
- Voucher Payment Type Title:**
  - Calibri 12pt bold
  - See table on page 2 for voucher types
- Your 4-Digit Vendor ID:**
  - Last digit: 3 1/2 in. from right edge
  - Baseline: 3 in. from bottom
- Preparer Tax Identification Number:**
  - Must be nine digits (may have leading character)
  - Colon required after title: 2 in. from right edge
  - Last digit: 1/2 in. from right edge
  - Baseline: 2 1/2 in. from bottom
- Social Security Number:**
  - Must be nine digits
  - Colon required after title: 2 in. from right edge
  - Last digit: 1/2 in. from right edge
  - Baseline: 2 in. from bottom
- Spouse's Social Security Number:**
  - Must be nine digits
  - Colon required after title: 2 in. from right edge
  - Last digit: 1/2 in. from right edge
  - Baseline: 1 3/4 in. from bottom
- Tax-Year End:**
  - Must be 6 digits
  - Colon required after title: 2 in. from right edge
  - Calendar or fiscal year end (mmddyy)
  - Last digit: 1/2 in. from right edge
  - Baseline: 1 1/2 in. from bottom
- Amount of Check:**
  - Courier or Courier New 12pt
  - Colon required after title: 2 in. from right edge
  - Last cents field: 1/2 in. from right edge with one space separating cents from dollars
  - Baseline: 1 in. from bottom
  - No commas or decimals
- Scan Line:**
  - Must be 66 digits
  - **NEW!** Courier or Courier New 12pt
  - Starts: 7 3/4 in. from right edge
  - Baseline: 1/2 in. from bottom
  - See additional scan line specs
- Graphics:** Graphics available from our website at [www.revenue.state.mn.us](http://www.revenue.state.mn.us).
- Send samples to:**
  - Email (PDF): [Efile.FormApproval@state.mn.us](mailto:Efile.FormApproval@state.mn.us)
  - Mail: Minnesota Department of Revenue  
Tax Operations - Form Approval  
Mail Station 4100  
600 N. Robert St.  
St. Paul, MN 55146-4100

Cut carefully along this line to detach.		
Your check authorizes us to make a one-time electronic fund transfer from your account.		3 1/4 in.
1234		3 in.
<b>m DEPARTMENT OF REVENUE</b>	Preparer Tax Identification Number:	P23456789
<b>Voucher Title</b>		2 1/2 in.
TAXPAYER NAME	Social Security Number (required):	123456789
NAME 2	Spouse's Social Security Number:	987654321
ADDRESS	Tax-Year End :	mmddyy
CITY, STATE ZIP CODE	Amount of Check :	00000000 00
Make check payable to: Minnesota Revenue Voucher type address		1 in.
00102000000000000000000012311930001234567891300098765432110000001234		1/2 in.
8 in.	7 3/4 in.	0
	4 1/2 in.	
	3 1/2 in.	
	2 in.	
	3/4 in.	
	1/2 in.	

## Individual Income Tax Voucher Types

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The table below lists all Individual Income Tax voucher types with fields that are specific to the voucher type. Any fields not listed on this table remain constant for all individual vouchers.

Voucher Title	Voucher Mailing Address	Scan Line Tax Type	Scan Line Extension
Income Tax Extension Payment	P.O. Box 64058, St. Paul, MN 55164-0058	001	01
Individual Estimated Tax Payment	P.O. Box 64037, St. Paul, MN 55164-0037	001	00
Income Tax Return Payment	P.O. Box 64054, St. Paul, MN 55164-0054	001	02
Amended Income Tax Return Payment	Mail Station 1060, St. Paul, MN 55145-1060	001	03

## Required Voucher Approval Scenarios

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You must receive approval before reproducing vouchers.

Submit 3 samples **for each voucher listed on the table above** with fictitious names, Social Security numbers, tax-year end dates, check amounts and scan lines for testing.

Required scenarios:

- Only Taxpayer Social Security number is entered; no Spouse's Social Security number.
- Both Taxpayer Social Security number and Spouse's Social Security number begin with a leading zero.

Fictitious information must be different on each sample.

Please test and verify that invalid data cannot be entered. Make sure the scan line cannot have an invalid tax-year end, or blank space for the ID field.

**Note: Form must be placed at bottom of 8½ x 11 inch page with instructions at the top.  
SUBMIT CONTENT OF ENTIRE PAGE. See the sample form on page 4.**



## Income Tax Return Payment

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### Pay by Check

- Make your check payable to “Minnesota Revenue.”
- Print the last four digits of your Social Security number in the memo line of your check.
- Mail your payment and the voucher below to the address on the voucher.

**Note:** Your payment may be delayed if your voucher information is missing or incorrect. When printing the voucher, set your printer to “Actual size” (not “Shrink oversized pages”).

### Scan Line

The scan line is the most important part of the voucher. When submitting your voucher make sure the scan line:

- Is printed with 66 digits – characters, symbols, or masking are unacceptable.
- Is not cut off or missing.

### Pay Electronically

- Pay electronically from your bank account. Go to **www.revenue.state.mn.us** and type **make a payment** into the Search box or call our automated system at 1-800-570-3329. We do not charge for this service.
- Pay by credit card or debit card. Go to **www.paystatetax.com/mn** or call 1-855-947-2966. Value Payment Systems processes these payments and charges you a fee for this service.
- Pay by ACH credit transfer through your financial institution. Go to **www.revenue.state.mn.us** and type **ACH Credit** into the Search box.

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Cut carefully along this line to detach.  
Your check authorizes us to make a one-time electronic fund transfer from your account.

1234

### Income Tax Return Payment

TAXPAYER NAME  
NAME 2  
ADDRESS  
CITY, STATE ZIP CODE

Make check payable to:  
Minnesota Revenue  
P.O. Box 64054, St. Paul, MN 55164-0054

Preparer Tax Identification Number:	P23456789
Social Security Number (required):	123456789
Spouse’s Social Security Number:	987654321
Tax-Year End:	123119

Amount of Check: 00000000 00

00102000000000000000000012311930001234567891300098765432110000001234