VOUCHER INSTRUCTIONS

EXTENSION REQUEST VOUCHER:

To be used by a corporation for requesting an automatic six (6) month extension of time for filing a Rhode Island Corporation Tax Return RI-1120 or RI-1120 S.

TO BE EFFECTIVE:

- 1. Payment of the full amount of the tax reasonably estimated to be due must be submitted with the request.
- 2. This form must be completed and filed before the date prescribed for payment of the tax.
- 3. This form must be signed by a person authorized to represent the corporation in this matter.

NOTE:

The extension of time is limited to:

- 1. The date requested, or
- 2. The date on which a certificate of good standing is required to be issued whichever is earlier.



STATE OF RHODE ISLAND

DIVISION OF TAXATION * ONE CAPITOL HILL STE 9, PROVIDENCE, RI 02908-5811

AUTOMATIC SIX MONTH EXTENSION REQUEST



DO NOT FILE THIS COPY WITH R.I. DIV. OF TAXATION

WITH R.I. DIV. OF TAXATION	
AXPAYER IDENTIFICATION #]

I declare, under the penalties of perjury, that this document has been examined by me and, to the best of my knowledge and belief, is true, and complete.

Signature of Officer or Agent.

For Calendar Year Or Taxable Year Beginning	And E	inding	
ESTIMATED TAX CURRENT YEAR	\$		0 0
AMOUNT PAID AND CREDITED TO DATE	\$		0 0
AMOUNT DUE WITH EXTENSION	\$		0 0
AMOUNT ENCLOSED	\$		00



STATE OF RHODE ISLAND

DIVISION OF TAXATION * ONE CAPITOL HILL STE 9, PROVIDENCE, RI 02908-5811

AUTOMATIC SIX MONTH EXTENSION REQUEST

7004

7004

Or Taxable Year Beginning	
ESTIMATED TAX CURRENT YEAR	\$ 0 0
AMOUNT PAID AND CREDITED TO DATE	0 0
AMOUNT DUE WITH EXTENSION	0 0

AMOUNT \$ 00

FAXPAYER IDENTIFICATION #
declare, under the penalties of perjury, that this document has been examined by ne and, to the best of my knowledge and belief, is true, and complete.
Signature of Officer or Agent.