# **VOUCHER INSTRUCTIONS**

## **EXTENSION REQUEST VOUCHER:**

To be used by a public service corporation for requesting an automatic six (6) month extension of time for filing a Rhode Island Public Service Corporation Gross Earnings Tax Return - Form T-72.

### TO BE EFFECTIVE:

- 1. Payment of the full amount of the tax reasonably estimated to be due must be submitted with this 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.

# **ONLINE PAYMENT**

Your extensiton payment can be made online. For more information, visit: https://www.ri.gov/taxation/business/index.php

If you make your payment online, you do not need to send in this extension request form.

T-72EXT	STATE OF RHODE ISLAND
	PUBLIC SERVICE CORPORATION - AUTOMATIC SIX MONTH EXTENSION REQUEST
	DIVISION OF TAXATION * ONE CAPITOL HILL SUITE 9, PROVIDENCE, RI 02908-5811

YOUR COPY		For Calendar Year Ending December 31,		
DO NOT FILE THIS COPY WITH R.I. DIV. OF TAXATION	<b>T-72</b>	ESTIMATED TAX CURRENT YEAR	\$ 00	
	<b>FVT</b>	AMOUNT PAID AND CREDITED TO DATE	\$ 00	
FEDERAL EMPLOYER IDENTIFICATION NUMBER	EXT	AMOUNT DUE WITH EXTENSION	\$ 00	
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.		AMOUNT ENCLOSED	\$ 00	



### STATE OF RHODE ISLAND PUBLIC SERVICE CORPORATION - AUTOMATIC SIX MONTH EXTENSION REQUEST DIVISION OF TAXATION \* ONE CAPITOL HILL SUITE 9, PROVIDENCE, RI 02908-5811

NAME		For Calendar Year Endi	ng December 31,	
ADDRESS	<b>T-72</b>	ESTIMATED TAX CURRENT YEAR		0 0
CITY, STATE, ZIP CODE	гут	AMOUNT PAID AND CREDITED TO DATE		0 0
FEDERAL EMPLOYER IDENTIFICATION NUMBER	EXI	AMOUNT DUE WITH EXTENSION		0 0
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.	Key #22	AMOUNT ENCLOSED	\$	0 0