



# State of Georgia Department of Revenue



**KEEP THESE INSTRUCTIONS AND WORKSHEET WITH YOUR RECORDS**

## Instructions

1. Download (free) the latest version of Adobe Reader.  
<http://www.adobe.com/products/acrobat/readstep2.html>
2. Complete the worksheet below to automatically create your payment voucher.
3. Click the "Print" button to print a completed CR-ES.
4. Cut the payment voucher along the dotted line and mail the voucher and your payment only to the address on the voucher.

**DO NOT** fold, staple or paper clip items being mailed.

**DO NOT** mail in the worksheet, keep this for your records.

CR ES Worksheet					
1. FEI Number:					
2. Name: .....					
3. Street Address Line 1:					
4. Street Address Line 2:					
5. City:		6. State:		7. Zip:	-
8. Telephone Number : .....					
9. Please Check All That May Apply:	Name Change <input type="checkbox"/>	Address Change <input type="checkbox"/>	Tax Year Change <input type="checkbox"/>		
10. Tax Year Ending: .....					
11. Due Date: .....					
12. Amount Paid: .....					

# GENERAL INSTRUCTIONS

As an alternative to withholding on nonresident partners, shareholders or members, the Partnership, S Corporation or Limited Liability Company may file a composite return. Permission is not required. Please see the IT-CR for more information.

- Estimates are required if the composite tax exceeds \$500 for the year. If the entity qualifies for an underestimated tax penalty exception, please see Form IT-CR UET.
- **Due Dates:** All due dates for estimated tax are the same as those for individual filers. **A fiscal year entity should adjust its estimated tax due dates as if it is an individual filing a fiscal year end return.**
- **Forms:** Additional forms may be obtained by visiting our website at <https://etax.dor.ga.gov> or calling 1-877-423-6711.

**PLEASE DO NOT mail this entire page. Please cut along dotted line and mail only coupon and payment.  
PLEASE DO NOT STAPLE. PLEASE REMOVE ALL CHECK STUBS.**

----- Cut along dotted line -----

**CR ES** (Rev. 10/12)  
**Composite Return Estimated Tax**  
Telephone No. 1-877-423-6711



1301804011

**MAIL TO:**  
Processing Center  
Georgia Department of Revenue  
P O Box 740238  
Atlanta, GA 30374-0238

**2013**

Name Change     Address Change     Tax Year Change

FEI Number	Tax Year Ending	Due Date	Qtr	Vendor Code <b>040</b>
I declare under the penalties of perjury that this information has been examined by me and to the best of my knowledge and belief is true and correct. Georgia Public Revenue Code Section 48-2-31 stipulates that taxes shall be paid in lawful money of the United States free of any expense to the State of Georgia.		<b>NAME AND ADDRESS</b>		
Signature _____		Title _____		
Telephone _____		Date _____		

**PLEASE DO NOT STAPLE. REMOVE ALL CHECK STUBS.**

**Amount Paid \$**