



Comptroller of Maryland

Payment Voucher and Instructions for IFTA Returns Filed Electronically

IFTA-100-V

Who must use this form?

You **must** submit this voucher with your payment if you file a balance-due return, Form IFTA-100, using IFTA E-file.

Mailing Instructions -

Attach check or money order payable to **COMPTROLLER OF MARYLAND**





Include on your check or money order your identification number, **Form IFTA-100-V**, and period covered by this payment.

Detach and mail your voucher along with your payment to this address:

**COMPTROLLER OF MARYLAND
MOTOR FUEL TAX BUREAU
PO BOX 22100
ALBANY, NY 12201-2100**

The Comptroller's Office will accept the Internal Revenue Service's position in Notice 97-26 relating to the "**timely mailing as timely filing/paying**" rule for the filing of returns and payment of income tax. This **DOES NOT** include the use of private delivery services (PDS) designated by the Secretary of the Treasury that will not honor post office boxes for delivery.

Need help?

-  Telephone assistance is available from 8 am to 5 pm (eastern time), Monday through Friday.
IFTA Return Information 1-888-784-0141 (Toll free in MD) or 410-260-7138
 -  Hearing and speech impaired (telecommunications device for the deaf (TTY) callers only); 1-800-735-2258 from 8 am to 5 pm (eastern time), Monday through Friday.
 -  Internet access: <http://compnet.comp.state.md.us/mftd/default.asp> (for forms, publications, information)
 -  Persons with disabilities: In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, please call 410-260-7131.
- If you need to write, address your letter to: Comptroller of Maryland, Motor Fuel Tax Bureau, P.O. Box 1751, Annapolis, MD 21404.

▼ Detach along the dotted line and submit bottom portion with payment ▼



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Licensee IFTA identification number	Period	Due Date
Taxpayer name		
Amount due	Remittance Amount \$	

Jurisdiction
Maryland

For office use only