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Cut Here



NC-5PX (SD)
8-25-03

Amended Withholding Payment Voucher
North Carolina Department of Revenue

Enter Date Compensation Paid

Account ID Tax Year
176453458 0000

MM DD YYYY

ALEXANDER K MCALLISTER
MICHELLE Q MCALLISTER
5121 VALDEZ CTXXXXXXXXXXXXXXXX35MAX
RALEIGHXXXXXXXX20MAX NC 27605

1. Additional Tax ► 00000000.00
2. Interest 00000000.00
3. Total Due \$ 00000000.00

Signature: _____ Date: _____

I certify that, to the best of my knowledge, this return is accurate and complete.

Title: _____ Phone: () _____

Mail to: NCDOR, PO Box 25000, Raleigh, NC 27640-0050

20052 999999999X 0000000 9999X

30801XX011



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