



DO NOT ENTER \$ signs, commas, or decimals.

\*2502111\*

Name(s) as shown on Form 1040ME

Your Social Security Number

REFUND DUE

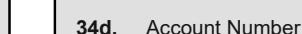
**IF YOU WOULD LIKE YOUR REFUND SENT DIRECTLY TO YOUR BANK ACCOUNT (\$20,000 or less), see page 5 of the instructions and fill in the lines below.**

Check here if this refund will go to an account outside the United States.

34c. Routing Number



34d. Account Number

34e. Type of Account:  Checking  Savings

TAX DUE

**35. Total Amount Due.** (Add lines 29, 30, 30a, 31, and 32.) - **Note:** If line 28 is greater than zero and the total of lines 30, 30a, 31, and 32 is greater than line 28, enter the difference as an amount due on this line (Pay in full with your return). 35. .00

**Maine TAX PORTAL** at [revenue.maine.gov](http://revenue.maine.gov) or **ENCLOSE CHECK** payable to: **Treasurer, State of Maine. DO NOT SEND CASH.**

**IMPORTANT NOTE**

If taxpayer is **deceased**,  
enter **date of death**.

(Month) (Day) (Year)

If spouse is **deceased**,  
enter **date of death**.

(Month) (Day) (Year)

**Third Party**

**Designee** Do you want to allow another person to discuss this return with Maine Revenue Services?  Yes (complete the following).  No. (See page 5 of the instructions.)

Designee's name: Phone no.: Personal identification #: 

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**SIGN HERE**  
Keep a copy of this return for your records.

Your signature



Date signed



Your occupation



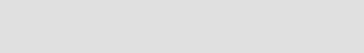
Spouse's signature (If joint return, both must sign)



Date signed



Spouse's occupation



Your email address



Paid  
Preparer's  
Use  
Only

Preparer's signature



Date signed



Preparer's phone number



Print preparer's name and name of business

Preparer's SSN or PTIN

DO NOT SEND PHOTOCOPIES OF RETURNS

Payment  
Plan

Injured  
Spouse