

HP-1040 • ES

2026PAYABLE TO:
AND MAIL TO:CITY OF HIGHLAND PARK
ESTIMATED TAX PAYMENT
P.O. BOX 239
EATON RAPIDS, MI 48827-0239

YOUR SOCIAL SECURITY NO.

SPOUSES SOCIAL SECURITY NO.

FIRST & LAST NAME AND ADDRESS OF BOTH SPOUSES IF JOINT PAYMENT

Voucher**4**

(Calendar Year - Due January 31, 2027)

IF CORPORATION OR PARTNERSHIP
FEDERAL I.D. NUMBERPAYMENT IS
FOR
YEAR
ENDING _____ MONTH _____ YEAR**CITY OF HIGHLAND PARK**
ESTIMATED
TAX PAYMENTTOTAL
ESTIMATE
AMOUNT OF
THIS PAYMENT \$ _____
(TO BE USED FOR MAKING PAYMENT)**RETURN THIS VOUCHER WITH CHECK OR MONEY ORDER**

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AND MAIL TO:CITY OF HIGHLAND PARK
ESTIMATED TAX PAYMENT
P.O. BOX 239
EATON RAPIDS, MI 48827-0239

YOUR SOCIAL SECURITY NO.

SPOUSES SOCIAL SECURITY NO.

FIRST & LAST NAME AND ADDRESS OF BOTH SPOUSES IF JOINT PAYMENT

Voucher**3**

(Calendar Year - Due Sept. 30, 2026)

IF CORPORATION OR PARTNERSHIP
FEDERAL I.D. NUMBERPAYMENT IS
FOR
YEAR
ENDING _____ MONTH _____ YEAR**CITY OF HIGHLAND PARK**
ESTIMATED
TAX PAYMENTTOTAL
ESTIMATE
AMOUNT OF
THIS PAYMENT \$ _____
(TO BE USED FOR MAKING PAYMENT)**RETURN THIS VOUCHER WITH CHECK OR MONEY ORDER**

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YOUR SOCIAL SECURITY NO.

SPOUSES SOCIAL SECURITY NO.

FIRST & LAST NAME AND ADDRESS OF BOTH SPOUSES IF JOINT PAYMENT

Voucher**2**

(Calendar Year - Due June 30, 2026)

IF CORPORATION OR PARTNERSHIP
FEDERAL I.D. NUMBERPAYMENT IS
FOR
YEAR
ENDING _____ MONTH _____ YEAR**CITY OF HIGHLAND PARK**
ESTIMATED
TAX PAYMENTTOTAL
ESTIMATE
AMOUNT OF
THIS PAYMENT \$ _____
(TO BE USED FOR MAKING PAYMENT)**RETURN THIS VOUCHER WITH CHECK OR MONEY ORDER**

HP-1040 • ES

2026PAYABLE TO:
AND MAIL TO:CITY OF HIGHLAND PARK
ESTIMATED TAX PAYMENT
P.O. BOX 239
EATON RAPIDS, MI 48827-0239

YOUR SOCIAL SECURITY NO.

SPOUSES SOCIAL SECURITY NO.

FIRST & LAST NAME AND ADDRESS OF BOTH SPOUSES IF JOINT PAYMENT

Voucher**1**

(Calendar Year - Due April 30, 2026)

IF CORPORATION OR PARTNERSHIP
FEDERAL I.D. NUMBERPAYMENT IS
FOR
YEAR
ENDING _____ MONTH _____ YEAR**CITY OF HIGHLAND PARK**
ESTIMATED
TAX PAYMENTTOTAL
ESTIMATE
AMOUNT OF
THIS PAYMENT \$ _____
(TO BE USED FOR MAKING PAYMENT)**RETURN THIS VOUCHER WITH CHECK OR MONEY ORDER****PLEASE TYPE OR PRINT****PLEASE TYPE OR PRINT****PLEASE TYPE OR PRINT****PLEASE TYPE OR PRINT**