

Instructions for Form FTB 3582

Payment Voucher for Electronically Transmitted Returns

General Information

Use form FTB 3582, Payment Voucher for Electronically Transmitted Returns, to pay your tax only if you:

- Filed your tax return electronically, and
- Have a balance due.

Note: You can pay the balance due with a check using this form. Or, you can have your payment automatically withdrawn from your bank account or use your credit card to pay the balance due. See the payment instructions in the tax booklet, or on our Website at www.ftb.ca.gov.

If you need additional copies, you (or your transmitter) can download California tax forms and publications from our Website at www.ftb.ca.gov.

Private Mailbox (PMB) Number

If you lease a private mailbox (PMB) from a private business, rather than a PO box from the United States Postal Service, include the box number in the field labeled "PMB no." in the address area.

Foreign Address

Enter the information in the following order: City, Province or state, and country. Follow the country's practice for entering the postal code. **Do not** abbreviate the country's name.

General Instructions

Is your form FTB 3582 preprinted with your information?

Yes. Go to number 1. **No.** Go to number 2.

1. Verify that the following information is correct before you write your check or money order:

- Name(s);
- Address;
- Social security number(s); and
- Amount of payment.

If you need to make a change, use a black or blue ink pen to draw a line through the incorrect information and clearly print the new information. Scanning machines may not be able to read other colors of ink or pencil. Then go to number 3.

2. If you have a balance due, complete the voucher at the bottom of this page. Print your name(s), address, social security number(s), and amount of payment in the space provided. Print all names and words in **CAPITAL LETTERS**. Use a black or blue ink pen. Scanning machines may not be able to read other colors of ink or pencil.

Verify that the following information is complete:

- Name(s);
- Address;
- Social security number(s); and
- Amount of payment.

The information on form FTB 3582 should match the information that was electronically transmitted to the Franchise Tax Board and the information printed on the paper copy of your 2004 Form 540, Form 540 2EZ, or the Long or Short Form 540NR.

3. Make your check or money order payable to "Franchise Tax Board." Write your social security number, tax year (2004), and form number (540, 540 2EZ, or the Long or Short Form 540NR) of the form that you electronically filed, on your check or money order.

4. Detach the payment voucher from the bottom of this page, only if an amount is owed. **Enclose, but do not staple, your payment with the voucher and mail to:**

FRANCHISE TAX BOARD
PO BOX 942867
SACRAMENTO CA 94267-0008

Note: Do not send the paper copy of your tax return to the FTB. Keep it for your records.

When to Make Your Payment

If you have a balance due on your 2004 return, send form FTB 3582 to the FTB with your payment for the full amount by April 15, 2005.

If you cannot pay the full amount you owe by April 15, 2005, pay as much as you can when you mail in this payment voucher to avoid additional charges. You may request to make monthly payments by getting and filing form FTB 3567, Installment Agreement Request. To order this form, use the Internet address shown above in "General Information" or call (800) 338-0505 and select "Personal Income Tax," then select "Order Forms and Publications." Enter code **949** when instructed.

Penalties and Interest

If you fail to pay the full amount you owe by April 15, 2005, a late payment penalty and interest will be added to your tax due.

✂ DETACH HERE — — — — — IF NO PAYMENT IS DUE, DO NOT MAIL THIS FORM — — — — — DETACH HERE ✂

TAXABLE YEAR **2004** **Payment Voucher for Electronically Transmitted Returns** Due April 15, 2005 CALIFORNIA FORM **3582 (e-file)**

Your first name	Initial	Last name	Your social security number
If joint payment, spouse's first name	Initial	Spouse's last name if different from yours	Spouse's social security number
Present home address – number and street, PO Box, or rural route			Apt. no.
			PMB no.
City, town or post office (If you have a foreign address, see instructions)			State
			ZIP Code

IF NO PAYMENT IS DUE, DO NOT FILE THIS FORM.
IF AN AMOUNT IS OWED,

MAIL TO: FRANCHISE TAX BOARD
PO BOX 942867
SACRAMENTO CA 94267-0008

Do not send a paper copy of your tax return with the payment voucher.

Amount of payment

