

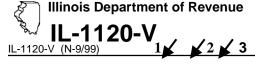
SCAN LINE FIELDS

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1.	Form	Code -	Always	11208	(5)

- 2. Liability Period mmyy (4)
- 3. Form Code, Liability Period Check Digit (1)
- 4. Federal Employer Identification Number (9)
- 5. Sequence Number Normally 000 (3)
- 6. FEIN, Sequence Number Check Digit (1)
- 7. Payment Amount includes cents(11)

FORM FIELDS 🖌

- 1. Federal Employer Identification Number
- 2. Sequence Number Normally 000
- 3. FEIN, Sequence Number Check Digit
- 4. Tax Year Ending Month
- 5. Tax Year Ending Year
- 6. Illinois Business Tax Number
- 7. Business Name and Address



Payment Voucher for Corporation Income and Replacement Tax

1999

Mail to Illinois Department of Revenue, P.O. Box 19008, Springfield, IL 62794-9008

FEIN 26-3948363 000 1

IBT 9999-9999 **¥**6

L 7

Anybody's Plumbing and Heating 9999 Where Blvd

Anywhere, IL 99999

Make sure the BusinessName, FEIN, and Payment amount are correct.

Tax year ending

4 12 5 99

Month Year

Print your payment amount on this line.

WRITE YOUR FEIN ON YOUR CHECK

112081299 2 263948363 000 1 00000000000







Preparers Phone Number_____





Forms Developers

Printing Specifications for <u>IL-1120-V</u> Payment Voucher (Rev 10/99)

Form Layouts

- The format and layout must be similar to our vouchers.
- The vouchers must be 3.625 inches high and 8.5 inches wide.
- The vouchers must be printed on one side only.
- Vouchers must be printed at the bottom of the page.

Paper stock

- The paper used for the vouchers must be at least 20 pound stock.
- The paper used must be the same size and color as our form.

Printing requirements

- Vouchers must contain, at a minimum, the following:
 - 1) Business name
 - 2) Business address
 - 3) Federal employer identification number (FEIN).
 - 4) A mailing address for the voucher and payment of:

ILLINOIS DEPARTMENT OF REVENUE P O BOX 19008 SPRINGFIELD IL 62794-9008

IL-1120-V scan line printing

- The scan line must be on the bottom part of the form and start 3.5 inches from the left edge.
- There must be at least .25 inches but not more than .375 inches of blank space between the bottom of the form and the bottom of the scan line.
- The scan line must be printed at 10 characters per inch in OCR-A font.
- There must be at least a .25 inch clear band, the width of the form, above and below the scan line and there cannot be any printing on the same line as the scan line.
- All scan line printing must be done on a laser printer with black, non-reflective, non-magnetic ink.

IL-1120-V scan line content

The IL-1120-V scan line consists of 39 positions.

POS 6-9 LIABILITY PERIOD

POS 10 SPACE

POS 11	FORM CODE/LIABILITY PERIOD CHECK DIGIT
POS 12	SPACE
POS 13-21	FEIN
POS 22	SPACE
POS 23-25	SEQUENCE NUMBER
POS 26	SPACE
POS 27	FEIN/SEQUENCE NUMBER CHECK DIGIT
POS 28	SPACE
POS 29-39	PAYMENT AMOUNT

- The form code is always 11208.
- The liability period is the last month and the last two digits of the year of the business accounting period.
- The Form Code/Liability Period check digit is calculated using the formula in these specifications.
- Federal Employer Identification Number (FEIN).
- The Sequence Number is a three digit number (usually 000) that follows the FEIN on department printed forms.
- The FEIN/Sequence Number check digit is calculated using the formula in these specifications.

Form Code/Liability Period check digit formula for IL-1120-V forms

 Multiply the leftmost digit by 10, the next digit to the right by 9, etc., until all digits have a product.

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Example: 1 1 2 0 8 1 2 9 9

Multiply by 10 9 8 7 6 5 4 3 2

= 10 9 16 0 48 5 8 27 18
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- Add the products together.
 10+9+16+0+48+5+8+27+18=141
- Divide the total by 11. If the remainder is greater than 1, subtract the remainder from 11 to obtain the check digit. If the remainder is 0 or 1, no subtraction is necessary, the remainder is the check digit.

141 divided by 11 = 12 with a remainder of 9. 11 - 9 = 2. 2 is the check digit.

FEIN and Sequence Number check digit formula for <u>IL-1120-V</u> forms

- Beginning at the left, multiply each digit alternately by 2 then 1.
- The calculation of the check digit for the FEIN should include the Sequence number.

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Example: FEIN and Sequence Number 2 6 3 9 4 8 3 6 3 0 0 0

Multiply by 2 1 2 1 2 1 2 1 2 1 2 1 2 1
= 4 6 6 9 8 8 6 6 6 0 0 0
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- Add any two digit numbers in the sum together to obtain 1 digit.
- Add the digits together.

4+6+6+9+8+8+6+6+6+0+0+0=59

 Subtract the units position from 10. If the units position of the sum is a zero, no subtraction is necessary, zero is the check digit.

10 - 9 = 1. 1 is the check digit.

Testing

- A minimum of 16 test documents must be provided for testing.
- The documents must contain data in the scan line that simulates production data, with different fein numbers.

Illinois Department of Revenue Approval

- Normally, testing should require no more than 7 days from receipt of the documents by the department.
- Upon approval of a form by the department, a four digit identification number will be issued to the producer of the form. This identification number should be placed near the form and revision date on the form as: ID: 9999.
- If you have any questions or want to submit forms for testing, please contact us at either of the addresses below:

Gary T. Wilson
Publications Mgmt. 5-400
Illinois Dept. of Revenue
101 West Jefferson
Springfield, IL 62702

217 782-4641 217 524-0513 FAX gawilson@revenue.state.il.us Publications Mgmt. 5-400 Illinois Dept. of Revenue 101 West Jefferson Springfield, IL 62702

217 557-3017 217 524-0513 FAX trichards@revenue.state.il.us

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