

STATE OF HAWAII - DEPARTMENT OF TAXATION
REFERRAL NOTICE OF DELINQUENCY
(FINAL NOTICE OF INTENT TO LEVY AND FILE A TAX LIEN)

PAYMENT DUE DATE: 07/21/04

[REDACTED]

Case No: [REDACTED]
SSN/FBIN: [REDACTED]

[REDACTED]
Kihei HI [REDACTED]

Billing Code: 999994
Date of Notice: 07/09/04

IMPORTANT INFORMATION. Please disregard this notice if you have paid your outstanding balance in full or an installment plan agreement request form was submitted. We would appreciate your immediate attention in resolving your outstanding liability to avoid collection actions by paying your outstanding balance in full or contacting the Oahu District Office.

If we do not hear from you or receive full payment by the payment due date above, your account will be referred to a field collector or a private collection agency. This is your FINAL NOTICE before we begin collection actions against your property and/or rights to property. These actions may include but are not limited to, serving a levy, filing a civil suit, garnishing of applicable wages, and seizure and foreclosure proceedings. A State Tax Lien may also be filed in order to protect the State's interest.

If you cannot pay the balance in full by the payment due date, you may be eligible to make monthly payments through our Installment Plan Agreement Program by completing Form D-100.

Department of Taxation
Oahu District Office
Attn: Taxpayer Services Branch
P.O. Box 259
Honolulu, HI 96809-0259

Telephone: 808-587-4242
Fax: 808-587-1488
For Neighbor Islands and Continental U.S.:
Toll Free: 1-800-222-3229

CURRENT SUMMARY OF TAXES DUE

TAX TYPE	AMOUNT DUE
INDIVIDUAL NET INCOME	\$5,926.21
TOTAL AMOUNT DUE (See Payment Voucher)	\$5,926.21

TO MAKE A PAYMENT:

1. Mail payment voucher in the enclosed envelope with your check or money order in U. S. dollars payable to **HAWAII STATE TAX COLLECTOR**.
2. Mail to: **State Tax Collector**
P.O. Box 259
Honolulu, HI 96809
3. Write your Taxpayer ID. Number, as shown above, on your check or money order.
4. **Note: Do not mail this page with your payment.** If payment voucher is not enclosed with your payment, payments received will be applied to the earliest delinquency period. Payments are applied first to fees, then to interest, penalty, and finally to tax. Interest will continue to accrue until account balance is paid in full.
5. **You may also pay this bill using an electronic check or credit card through our Internet website at www.ehawaii.gov/efile.**

Forms and other tax information may be downloaded from the Department's website at: www.state.hi.us/tax. On Oahu, forms may be ordered by calling the Department's Forms Request Line at 587-7572. Persons who are calling from the neighbor islands or Continental U.S. may call toll-free at 1-800-222-7572 to receive forms by mail or by fax.

KEEP THIS PORTION FOR YOUR RECORDS

Case No: [Redacted]
 Billing Code: [Redacted]
 Date of Notice: 07/09/04
 Payment Due Date: 07/21/04

DETAIL OF ACCOUNT - INDIVIDUAL INCOME TAX

DATE	TAX PERIOD	TAX LIABILITY	UNDER-PAYMENT PENALTY / PENALTY	INTEREST TO 07/20/04	FEE CHARGED	TOTAL	CREDITS & PAYMENTS	AMOUNT DUE
06/16/03	1997	4,004.00	1,001.00	2,489.17	85.00	7,579.17	1,652.96	5,926.21
Total		\$4,004.00	\$1,001.00	\$2,489.17	\$ 85.00	\$7,579.17	\$1,652.96	\$5,926.21

↓ Please cut on dotted line and return the bottom portion with your payment. ↓

DO NOT WRITE OR STAPLE IN THIS AREA

STATE OF HAWAII - DEPARTMENT OF TAXATION
 INDIVIDUAL INCOME TAX PAYMENT VOUCHER (CBV)

[Redacted]

DATE OF NOTICE: 07/09/04
 PAYMENT DUE DATE: 07/21/04
 CASE NO: [Redacted]
 LOCATION CODE: 000002
 BILLING CODE: [Redacted]

TOTAL AMOUNT DUE: \$5,926.21

THIS SPACE FOR DATE RECEIVED STAMP

AMOUNT ENCLOSED:	\$
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You may also pay this bill using an electronic check or credit card through our Internet website at www.ehawaii.gov/e-file.

DOWNLOADED FROM:

***Sovereignty Education and Defense Ministry
(SEDM) Website***

<http://sedm.org>

