	STAMP DLN HERE
Partnership Income Tax — Extension Request	O
or Fiscal Year Beginning M M D D 2007, Ending M M D D Y Y Y Y Y	STAMP DLN HERE AND STAND OF ST
Federal Employer Identification Number	
Partnership Name	
	
Address (Newsberg and Objects on Board Boards)	
Address (Number and Street or Rural Route)	\neg
	」 ¬
City or Town State Zip Code	
Reason for Extension:	
If approved, this extension will be for 3 months. If you would like to request an additional 3 month extension (total 6 month extension) check here:	
Total estimated tax liability for 2007	1
2 2007 Fetimeted Poyments	
2. 2007 Estimated Payments	
3. If line 1 is larger than line 2 enter amount of tax due. (Make check payable to: Treasurer, City of Detroit)	▶3
Under penalty of perjury, I declare that I have examined this return (including accompanying schedules and statements) and to is true, correct and complete. If prepared by a person other than taxpayer, the declaration is based on all information of which	
Signature of preparer other than	taxpayer Date
Partner's Signature Date Title Address	I.D. number
MAILING INSTRUCTIONS: Due Date: This return is due April 30, 2008 or at the end of the fourth month after the close of your t MAIL TO: TREASURER, CITY OF DETROIT Refund and	ax year. I all others: DETROIT CITY INCOME TAX
P.O. BOX 673553 Detroit, Michigan 48267-3553	P.O. Box 553171 Detroit, Michigan 48255-3171
-	· •
For office use only.	
Denied ▶ □	
Reason:	