



2355 W Pinnacle Peak Rd.
Phoenix, AZ 85027-1261
OneAZcu.com
1.844.663.2928

Period End Date

02/29/24

Member #

XXXXXXXX8471

Home Equity

Maximize your home's value.



Fixed Rate Home Equity Loan or Line of Credit Options Available

Learn More at OneAZcu.com/HELOC

Equal Housing Lender NMLS 6074567

BOWIE FIRE DEPARTMENT
PO BOX 241
BOWIE AZ 85605

Statement Summary

| Deposit Accounts | | Total Balance: \$8,415.10 | | |
|---------------------------------|------------------|----------------------------------|-------------|----------------|
| Account Type | Previous Balance | Deposits | Withdrawals | Ending Balance |
| BUS SAVINGS ACCT (XXXXXXXX7100) | 5.43 | 0.00 | 0.00 | 5.43 |
| Small Business (XXXXXXXX1706) | 7,186.03 | 11,000.00 | 9,776.36 | 8,409.67 |

BUS SAVINGS ACCT (XXXXXXXX7100)

Period 02-01-2024 - 02-29-2024

| Previous Balance: \$5.43 | | | |
|---------------------------------|------|--------------------------------|-------|
| Ending Balance: \$5.43 | | | |
| Deposits | 0.00 | Dividends | 0.00 |
| Withdrawals | 0.00 | Dividends Earned YTD | 0.00 |
| Fees | 0.00 | Annual Percentage Yield Earned | 0.00% |

Small Business (XXXXXXXX1706)

Period 02-01-2024 - 02-29-2024

| Previous Balance: \$7,186.03 | | | | |
|-------------------------------------|--|-------------|------------------------|-------------------|
| Date | Description | Deposits | Withdrawals | Ending Balance |
| 02-01 | Check 5535 | | -1,301.52 ✓ | 5,884.51 |
| 02-06 | Check 5536 | | -524.43 ✓ | 5,360.08 |
| 02-08 | External Withdrawal PAYROLL - PAYROLL 17837395 | | -578.13 ✓ | 4,781.95 |
| 02-08 | External Withdrawal PAYROLL - PAYROLL 17837395 | | -1,856.72 ✓ | 2,925.23 |
| 02-15 | Check 5538 | | -1,361.00 ✓ | 1,564.23 |
| 02-21 | Deposit | ✓ 11,000.00 | | 12,564.23 |
| 02-22 | External Withdrawal INTUIT 22788153 - PAYROLL 17837395 | | -578.13 ✓ | 11,986.10 |
| 02-22 | External Withdrawal INTUIT 22788153 - PAYROLL 17837395 | | -1,856.73 ✓ | 10,129.37 |
| 02-27 | Check 5539 | | -1,719.70 ✓ | 8,409.67 |
| | | | Ending Balance: | \$8,409.67 |

Cleared Items This Period

| Date | Check # | Amount | Date | Check # | Amount | Date | Check # | Amount |
|-------|---------|------------|-------|---------|------------|------|---------|--------|
| 02-01 | 5535 | 1,301.52 ✓ | 02-15 | *5538 | 1,361.00 ✓ | | | |
| 02-06 | 5536 | 524.43 ✓ | 02-27 | 5539 | 1,719.70 ✓ | | | |

* Indicates a break in check number sequence



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Phoenix, AZ 85027-1261
OneAZcu.com
1.844.663.2928

Period End Date

02/29/24

Member #

XXXXXXXX8471

| | | | |
|-------------|-----------|--------------------------------|------|
| Deposits | 11,000.00 | Dividends | .00 |
| Withdrawals | 9,776.36 | Dividends Earned YTD | 0.00 |
| Fees | .00 | Annual Percentage Yield Earned | .00% |

Bowie Fire District

50001 OneAZ, Period Ending 02/29/2024

RECONCILIATION REPORT

Reconciled on: 03/11/2024

Reconciled by: Elizabeth DeSpain

Any changes made to transactions after this date aren't included in this report.

Summary

| | USD |
|---|------------------|
| Statement beginning balance | 7,186.03 |
| Checks and payments cleared (8) | -9,776.36 |
| Deposits and other credits cleared (1) | 11,000.00 |
| Statement ending balance | <u>8,409.67</u> |
| Uncleared transactions as of 02/29/2024 | -9,896.01 |
| Register balance as of 02/29/2024 | -1,486.34 |
| Cleared transactions after 02/29/2024 | 0.00 |
| Uncleared transactions after 02/29/2024 | -3,795.84 |
| Register balance as of 03/11/2024 | <u>-5,282.18</u> |

Details

Checks and payments cleared (8)

| DATE | TYPE | REF NO. | PAYEE | AMOUNT (USD) |
|--------------|---------------|---------|--------------------------|------------------|
| 01/30/2024 | Check | 5535 | Cochise County Treasurer | -1,301.52 |
| 01/31/2024 | Check | 5536 | AZ Dept of Revenue | -524.43 |
| 02/08/2024 | Payroll Check | DD | Martin C. Minnick | -1,856.72 |
| 02/08/2024 | Payroll Check | DD | Elizabeth E. DeSpain | -578.13 |
| 02/08/2024 | Payroll Check | 5538 | John D. Novak | -1,361.00 |
| 02/22/2024 | Payroll Check | DD | Martin C. Minnick | -1,856.73 |
| 02/22/2024 | Payroll Check | DD | Elizabeth E. DeSpain | -578.13 |
| 02/26/2024 | Check | 5539 | Cochise County Treasurer | -1,719.70 |
| Total | | | | -9,776.36 |

Deposits and other credits cleared (1)

| DATE | TYPE | REF NO. | PAYEE | AMOUNT (USD) |
|--------------|---------|---------|-------|------------------|
| 02/29/2024 | Deposit | | | 11,000.00 |
| Total | | | | 11,000.00 |

Additional Information

Uncleared checks and payments as of 02/29/2024

| DATE | TYPE | REF NO. | PAYEE | AMOUNT (USD) |
|--------------|--------------------|---------|-------|------------------|
| 06/30/2018 | Journal | 7 | | -3.89 |
| 06/30/2023 | Payroll Adjustment | | | -7,464.60 |
| 07/13/2023 | Payroll Adjustment | | | -1,853.61 |
| 07/13/2023 | Payroll Adjustment | | | -573.91 |
| Total | | | | -9,896.01 |

Uncleared deposits and other credits as of 02/29/2024

| DATE | TYPE | REF NO. | PAYEE | AMOUNT (USD) |
|--------------|-------------|---------|-------------------------|--------------|
| 11/01/2023 | Tax Payment | | AZ DES-Unemployment Tax | 0.00 |
| Total | | | | 0.00 |

Uncleared checks and payments after 02/29/2024

| DATE | TYPE | REF NO. | PAYEE | AMOUNT (USD) |
|------------|---------------|---------|----------------------|--------------|
| 03/07/2024 | Payroll Check | 5540 | John D. Novak | -1,360.99 |
| 03/07/2024 | Payroll Check | DD | Martin C. Minnick | -1,856.72 |
| 03/07/2024 | Payroll Check | DD | Elizabeth E. DeSpain | -578.13 |
| Total | | | | -3,795.84 |

From: QuickBooks Online Payroll
Sent: Wednesday, February 21, 2024 7:51 PM
To: bowiefiredist@vtc.net
Subject: Payroll direct deposit receipt for Bowie Fire District



Payroll direct deposit receipt

Your direct deposit for Bowie Fire District.

Total amount

\$2434.86

| | |
|-----------------------------|----------------------------------|
| Withdrawn on | 02/22/2024 |
| Paid to employees on | 02/22/2024 |
| From account ending |1706 |
| Transaction ID | 8aa2f2e08dca80dd018dccffe5a9673c |

To Employees

Martin C. Minnick
Elizabeth E. DeSpain

No transfer fees or taxes apply

Direct deposit services brought to you by:

From: QuickBooks Online Payroll
Sent: Wednesday, February 7, 2024 8:08 PM
To: bowiefiredist@vtc.net
Subject: Payroll direct deposit receipt for Bowie Fire District



Payroll direct deposit receipt

Your direct deposit for Bowie Fire District.

Total amount

\$2434.85

| | |
|-----------------------------|----------------------------------|
| Withdrawn on | 02/08/2024 |
| Paid to employees on | 02/08/2024 |
| From account ending |1706 |
| Transaction ID | 8aa2f5028d59e3b4018d84fb8c4a3e0a |

To Employees

Elizabeth E. DeSpain
Martin C. Minnick

No transfer fees or taxes apply

Direct deposit services brought to you by:



SAFFORD

21 Feb 2024 10:24 AM

Branch: 1009

Seq #: 654

Teller Number: 1307

Check Total \$11,000.00

\$11,000.00 Avail Date: 02-21-24

Bowie Fire Department

Acct #: *****1706

Small Business Checking

Deposit

Amt: \$11,000.00

Curr Bal:

Avail Bal:

Thank you for your membership.

CASH ONLY IF ALL CheckLock™ SECURITY FEATURES LISTED ON BACK INDICATE NO TAMPERING OR COPYING

Bowie Fire District
P.O. Box 241
Bowie AZ 85605
520-847-2553

ARIZONA STATE CU
280 W. Main ST.
Safford, AZ 85546
91-7249/3221

5535

1-30-24

PAY TO THE ORDER OF

Cochise County Treasurer

\$ 1,301.52

One Thousand Three Hundred One + 52/100

DOLLARS

PROTECTED AGAINST FRAUD



MEMO

941 taxes for Jan 2024
Payroll Liabilities

Beth DeSpain
Mant

⑆ [REDACTED] 5535

1120 ✓

BOWIE FIRE DISTRICT / WARRANT
P.O. BOX 241
BOWIE, AZ 85605

0112

DATE 1-30-24

91-2/122

PAY TO THE ORDER OF

One AZ Credit Union

\$ 4,292.06

Four Thousand Two Hundred Ninety Two + 06/100

DOLLARS

CHASE
JPMorgan Chase Bank, N.A.
www.Chase.com

VOID AFTER ONE YEAR
PAYABLE THROUGH COCHISE COUNTY
SERVICING BANK TO COUNTY TREASURER

FOR

Card ending 3935

Beth DeSpain
Mant

⑆ 01201120 ⑆ [REDACTED]

CASH ONLY IF ALL CHECKS BACK TO SECURITY FEATURES LISTED ON BACK INDICATE NO TAMPERING OR COPYING

5535

ARIZONA STATE CU
280 W. MAIN ST.
SAFFORD, AZ 85546
(91-72) 9321

Bowie Fire District
P.O. BOX 241
Bowie, AZ 85605
520-847-2553

1-30-24

\$1,301.52

DOLLARS

PAY TO THE ORDER OF Cochise County Treasurer 52/100

One Thousand Three Hundred One

(PROTECTED AGAINST FRAUD)



Bowie Fire District
MEMO

gift taxes for Jan 2024
Payroll liabilities

5535

CHASE

Deposit cash or checks
at most Chase ATMs.
An image of your check can
be printed on your receipt.

My Transaction Summary

| | |
|---------------------------|------------|
| Transaction #60 | |
| Account Number Ending In: | 8493 |
| Checking Deposit | \$1,301.52 |

Further review may result in delayed
availability of this deposit

JPMorgan Chase Bank, N.A.
Safford, Branch 000009
1-800-935-9935
Your satisfaction matters. Share your
feedback at: chase.com/sendusfeedback

Member FDIC, Equal Housing Lender
Please keep your receipt
01/31/2024 10:48

Business Date 01/31/2024
Session #27

Thank you - Linda
Cashbox #04

CASH ONLY IF ALL CheckLock™ SECURITY FEATURES LISTED ON BACK INDICATE NO TAMPERING OR COPYING

5535

Bowie Fire District
P.O. Box 241
Bowie, AZ 85605
520-347-2553

ARIZONA STATE CU
280 W. Main ST.
Safford, AZ 85546
91-7249/3221

1-30-24

PAY TO THE
ORDER OF

Cochise County Treasurer

\$ 1,301.52

One Thousand Three Hundred One & 52/100

DOLLARS

PROTECTED AGAINST FRAUD



MEMO

941 Taxes for Jan 2024
Payroll Liabilities

Beth D. Sp...
M... M...



5535

Jan P Tax

Fed Incom Tax 404.48

SS 727.02 / 363.51

SS Employer \ 363.51

Med 170.02 / 85.01

Med Employer \ 85.01

1301.52

Bowie Fire District

5535

Deposit in County Tx acct

EFTPS before 2-15

658200

P



01/30/2024

Cochise County Treasurer

**1,301.52

One thousand three hundred one and 52/100*****

Cochise County Treasurer
P O Box 1778
Bisbee, AZ 85603-2778

941 taxes for January 2024

It may surprise you to receive this letter from me, since there has been no previous correspondence between us. There is an unclaimed "permanent life insurance policy" held by our deceased client.

The transaction pertains to an unclaimed "Payable-on-Death" ("POD") savings monetary deposit in the sum of Thirteen Million Thirty Thousand United States Dollars (\$13,030,000) with a Reputable Bank. The policy holder was one of our clients, Mr. Alan Gates, who worked with Energy Company in Canada. He died in an accident in Toronto Canada over nine years ago. Since His death no one has come forward for the claim and all our efforts to locate His relatives have proved unsuccessful.

The insurance company code stipulates that "insured permanent policies" not claimed must be turned over to the abandoned property division of the state after 10 years.

Therefore, I ask for your consent to be in partnership with me for the claim of this policy benefit, in view of the fact that you share the same last name and nationality with the deceased. If you permit me to add you name to the policy, all proceeds will be processed on your behalf. I wish to point out that I want 10% of the money to be shared among charity organizations while the remaining 90% will be shared between us.

This is 100% risk free; I do have all necessary documentation to expedite the process in a highly professional and confidential manner. I will provide all the relevant documents to substantiate your claim as the beneficiary. This claim requires a high level of confidentiality and it may take up to thirty (30) business days, from the date of receipt of your consent. Kindly provide a reachable contact number, for faster communication.

Contact me via email: JERRY@WETZELSLAWCA.COM

COPY: JERRYWETZELJD@GMAIL.COM, for more details on how to proceed further.

Your earliest response to this matter would be highly appreciated.



Jerry Wetzel JD
Attorney at Law

From: EFTPS
Sent: Thursday, February 8, 2024 11:38 AM
To: bowiefiredist@vtc.net
Subject: IRS EFTPS Confirmation of Scheduled Transaction



Confirmation of Scheduled Transaction

You have scheduled a transaction. The following IRS EFTPS transaction is scheduled to be debited from your account:

| | |
|----------------------------|---------------------------|
| Confirmation Number | 270-4439-1087-6181 |
|----------------------------|---------------------------|

We are processing your request.

This is an auto generated email and is not monitored by the IRS. Please do not respond to this email. If you would like to check the status of your transaction, you can view your transaction history by logging into your account on the EFTPS home page.

If you have questions about this email, visit the "Help and Information" link on the EFTPS home page.

Thank you for using IRS EFTPS!



Electronic Federal Tax Payment System

- HOME
- ENROLLMENT
- MY PROFILE
- PAYMENTS
- HELP & INFORMATION
- CONTACT US
- LOGOUT

TAXPAYER NAME: BOWIE FIRE DEPARTMENT

TIN: xxxxx9510

Deposit Confirmation

Your payment has been accepted.

Payment Successful

An EFT Acknowledgement Number has been provided for this payment. Please keep this number for your records.

REMINDER: REMEMBER TO FILE ALL RETURNS WHEN DUE!

| | |
|------------------------------------|-----------------|
| EFT ACKNOWLEDGEMENT NUMBER: | 270443910876181 |
|------------------------------------|-----------------|

PLEASE NOTE

Any amounts represented in the subcategories of Social Security, Medicare, and Income Tax Withholding are for informational purposes only.

| Payment Information | Entered Data |
|--------------------------|---------------------------|
| Taxpayer EIN | xxxxx9510 |
| Tax Form | 941 Employers Federal Tax |
| Tax Type | Federal Tax Deposit |
| Tax Period | Q1/2024 |
| Payment Amount | \$1,301.52 |
| Settlement Date | 02/08/2024 |
| Subcategories: | |
| 1 Social Security | \$727.02 |
| 2 Medicare | \$170.02 |
| 3 Tax Withholding | \$404.48 |
| Account Number | xxxxx8493 |
| Account Type | CHECKING |

Feedback

Bowie Fire District

P.O. Box 241

Bowie AZ 85605

520-847-2553

ARIZONA STATE CU

280 W. Main ST

Safford AZ 85546

91-7249/3221

5536

1-31-24

PAY TO THE ORDER OF

AZ Department of Revenue

\$ 524.43

Five Hundred Twenty Four and 43/100

DOLLARS

PROTECTED AGAINST FRAUD



AZ Income tax for

Qtr 4

Booth DeSpain

MT M

MEMO

EIN# 86-0589510

5536

Bowie Fire District

5536

Bowie Fire District

5536

PAYMENT RECORD



DO NOT file more than one original A1-QRT per EIN per quarter.

Part 1 Taxpayer Information (Refer to the instruction before completing Part 1.)

| | |
|--|---|
| Business Name (As listed on the Arizona Joint Tax Application) Bowie Fire District | Employer Identification Number (EIN) 86-0589510 |
| Number and street or PO Box PO Box 241 | QUARTER AND YEAR 4 2023 |
| City or town, state and ZIP Code Bowie AZ 85605 | ↑ Enter Quarter (1, 2, 3 or 4) and four digits of year. See instructions. |
| Business telephone number (with area code) (520) 847-2553 | REVENUE USE ONLY. DO NOT MARK IN THIS AREA. 88 89 <input checked="" type="checkbox"/> |
| Check box if: A <input type="checkbox"/> Amended Return B <input type="checkbox"/> Address Change C <input type="checkbox"/> Final Return (CANCEL ACCOUNT) If this is your final return, the department will cancel your withholding account. Enter the date final wages were paid and complete Part 6 D <input type="checkbox"/> Check this box if this form is being filed by the surviving employer and the periods covered by this return are for less than three (3) months. Also enter the following: Predecessor Employer Name Predecessor Employer EIN..... | 81 PM 86 RCVD |

E Total Arizona payroll for this quarter..... \$ **22732 32**

F Total number of employees paid Arizona wages for this quarter..... **2**

Part 2 Tax Liability Schedule Include all withholding amounts from all sources (i.e. wages & salary, pensions & annuities, gambling winnings, etc.). See instructions.

~~A. Quarterly Deposit Schedule: Complete if prior 4 quarter average was not more than \$1,500.~~

A1 Tax Liability. Enter the total amount withheld during the quarter. Also enter this amount on Part 3, line 1..... A1 **524 43**

Complete Section A above **OR** Section B below; **DO NOT COMPLETE BOTH.**

~~B. Monthly or Semi-Weekly/Next Day Deposit Schedule: Complete if prior 4 quarter average was greater than \$1,500.~~

Semi-weekly depositors and taxpayers with a next-day tax deposit obligation during the quarter, CHECK THIS BOX and complete Part 4.

For lines B1 through B3, enter the total amount withheld for each month in the quarter.

| | | | |
|--|----|--|--|
| B1 Month 1 Liability..... | B1 | | |
| B2 Month 2 Liability..... | B2 | | |
| B3 Month 3 Liability..... | B3 | | |
| B4 Total. Enter this amount on Part 3, line 1..... | B4 | | |

Part 3 Tax Computation (See instructions.)

| | | | |
|---|---|-------------------------------------|-----------|
| 1 Liability: Enter the amount from line A1 or line B4..... | 1 | 524 43 | |
| 2 Payments made during this quarter. | 2 | 2486 31 | BD |
| 3 Total Amount Due: Subtract line 2 from line 1. Enter the difference. Use a minus sign to indicate a negative amount. | 3 | 524 43 1961 88 | BD |

Declaration: Under penalties of perjury, I declare that I have examined this return and to the best of my knowledge and belief, it is a true, complete and correct return.

Please Sign Here: *Both D Spain* **1-31-24** **(520) 847-2553**
TAXPAYER'S SIGNATURE DATE BUSINESS TELEPHONE NUMBER

Paid Preparer's Use Only:
PAID PREPARER'S SIGNATURE: *Bowie Fire District* DATE: _____ PAID PREPARER'S PTIN: **86-0589510**
FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED): **Bowie Fire District** FIRM'S EIN:
FIRM'S STREET ADDRESS: **118 W. Kinchilla** FIRM'S TELEPHONE NUMBER: **520-847-2553**
CITY: **Bowie** STATE: **AZ** ZIP CODE: **85605**

▶ Payment by EFT may be required. See instructions.
▶ This form must be e-filed unless the taxpayer has a waiver or is exempt from e-filing. See instructions

Part 4 Semi-Weekly/Next Day Deposit Schedule

A. First Month of Quarter (Days of the Month)

| | | | | |
|----------------------------|-----------------------------|-----------------------------|-----------------------------|--|
| 1 <input type="checkbox"/> | 8 <input type="checkbox"/> | 15 <input type="checkbox"/> | 22 <input type="checkbox"/> | 29 <input type="checkbox"/> |
| 2 <input type="checkbox"/> | 9 <input type="checkbox"/> | 16 <input type="checkbox"/> | 23 <input type="checkbox"/> | 30 <input type="checkbox"/> |
| 3 <input type="checkbox"/> | 10 <input type="checkbox"/> | 17 <input type="checkbox"/> | 24 <input type="checkbox"/> | 31 <input type="checkbox"/> |
| 4 <input type="checkbox"/> | 11 <input type="checkbox"/> | 18 <input type="checkbox"/> | 25 <input type="checkbox"/> | Check a box only if you had a next-banking day deposit obligation. |
| 5 <input type="checkbox"/> | 12 <input type="checkbox"/> | 19 <input type="checkbox"/> | 26 <input type="checkbox"/> | |
| 6 <input type="checkbox"/> | 13 <input type="checkbox"/> | 20 <input type="checkbox"/> | 27 <input type="checkbox"/> | |
| 7 <input type="checkbox"/> | 14 <input type="checkbox"/> | 21 <input type="checkbox"/> | 28 <input type="checkbox"/> | |

Month 1 Liability: Enter total here and on Part 2, line B1..... \$

B. Second Month of Quarter (Days of the Month)

| | | | | |
|----------------------------|-----------------------------|-----------------------------|-----------------------------|--|
| 1 <input type="checkbox"/> | 8 <input type="checkbox"/> | 15 <input type="checkbox"/> | 22 <input type="checkbox"/> | 29 <input type="checkbox"/> |
| 2 <input type="checkbox"/> | 9 <input type="checkbox"/> | 16 <input type="checkbox"/> | 23 <input type="checkbox"/> | 30 <input type="checkbox"/> |
| 3 <input type="checkbox"/> | 10 <input type="checkbox"/> | 17 <input type="checkbox"/> | 24 <input type="checkbox"/> | 31 <input type="checkbox"/> |
| 4 <input type="checkbox"/> | 11 <input type="checkbox"/> | 18 <input type="checkbox"/> | 25 <input type="checkbox"/> | Check a box only if you had a next-banking day deposit obligation. |
| 5 <input type="checkbox"/> | 12 <input type="checkbox"/> | 19 <input type="checkbox"/> | 26 <input type="checkbox"/> | |
| 6 <input type="checkbox"/> | 13 <input type="checkbox"/> | 20 <input type="checkbox"/> | 27 <input type="checkbox"/> | |
| 7 <input type="checkbox"/> | 14 <input type="checkbox"/> | 21 <input type="checkbox"/> | 28 <input type="checkbox"/> | |

Month 2 Liability: Enter total here and on Part 2, line B2..... \$

C. Third Month of Quarter (Days of the Month)

| | | | | |
|----------------------------|-----------------------------|-----------------------------|-----------------------------|--|
| 1 <input type="checkbox"/> | 8 <input type="checkbox"/> | 15 <input type="checkbox"/> | 22 <input type="checkbox"/> | 29 <input type="checkbox"/> |
| 2 <input type="checkbox"/> | 9 <input type="checkbox"/> | 16 <input type="checkbox"/> | 23 <input type="checkbox"/> | 30 <input type="checkbox"/> |
| 3 <input type="checkbox"/> | 10 <input type="checkbox"/> | 17 <input type="checkbox"/> | 24 <input type="checkbox"/> | 31 <input type="checkbox"/> |
| 4 <input type="checkbox"/> | 11 <input type="checkbox"/> | 18 <input type="checkbox"/> | 25 <input type="checkbox"/> | Check a box only if you had a next-banking day deposit obligation. |
| 5 <input type="checkbox"/> | 12 <input type="checkbox"/> | 19 <input type="checkbox"/> | 26 <input type="checkbox"/> | |
| 6 <input type="checkbox"/> | 13 <input type="checkbox"/> | 20 <input type="checkbox"/> | 27 <input type="checkbox"/> | |
| 7 <input type="checkbox"/> | 14 <input type="checkbox"/> | 21 <input type="checkbox"/> | 28 <input type="checkbox"/> | |

Month 3 Liability: Enter total here and on Part 2, line B3..... \$

Part 5 Amended Form A1-QRT Return Information

If you checked the box "Amended Return" in Part 1, explain why an amended Form A1-QRT is being filed (include additional sheets, if necessary):

Part 6 Final Form A1-QRT

If you checked the box "Final Return" in Part 1, check the box that indicates why this is a final return:

- 1 Reorganization or change in business entity (example: from corporation to partnership).
- 2 Business sold.
- 3 Business stopped paying wages and will not have any employees in the future.
- 4 Business permanently closed.
- 5 Business has only leased or temporary agency employees.
- 6 Other (specify reason): _____
- 7 Check this box if records will be kept at a location different from the address shown in Part 1.
 Name: _____
 Number and Street: _____
 City: _____ State: _____ ZIP Code: _____
- 8 Check this box if there is a successor employer.
 Name: _____ EIN: _____
 Number and Street: _____
 City: _____ State: _____ ZIP Code: _____

Instructions for Filing Form A1-QRT

Quarterly Withholding Tax Return

File Form A1-QRT quarterly to report your withholding tax liability and payments.

To file

1. Review the account information on the completed form. To edit, go to your account settings.
2. Print your return.
3. Sign and date your return.
4. Write a check for the amount due, payable to: Arizona Department of Revenue. Include EIN on payment.
5. Mail the form and check to the agency using the address on the form. Or go to the agency website and follow their instructions.

You can view your submitted form in your **Archived forms**.

Your form and payment are due on 01/31/2024

Bowie Fire District

P.O. Box 241
Bowie, AZ 85605
520-847-2553

ARIZONA STATE CU
280 W. Main ST.
Safford, AZ 85548
91-7249/3221

5536

1-31-24

PAY TO THE
ORDER OF

AZ Department of Revenue

\$ 524.43

Five Hundred Twenty Four and ⁴³/₁₀₀

DOLLARS

PROTECTED AGAINST FRAUD



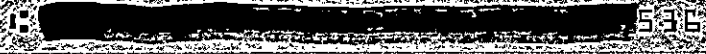
AZ Income tax for

Qtr 4

EIN# 86-0589510

Booth De Spa

MT M



Bowie Fire District

5536

Bowie Fire District

5536

PAYMENT
RECORD



1040R



104081



Rev 2/14

PAYMENT
RECORD



CASH ONLY IF ALL CheckLock™ SECURITY FEATURES LISTED ON BACK INDICATE NO TAMPERING OR COPYING

Bowie Fire District
P.O. Box 241
Bowie AZ 85605
520-847-2553

ARIZONA STATE CU
280 W. Main ST.
Safford, AZ 85546
91-7249/3221

5537

2-8-24

PAY TO THE ORDER OF

John D. Novak

\$ 1,361.00

One Thousand Three Hundred Sixty-One and ^{no}/₁₀₀ DOLLARS

PROTECTED AGAINST FRAUD



MEMO
pay period
1-8-24 to 2-7-24

Beth DeSpain
Ment Min

5537

this check deleted
2-13-24
new check printed # 5538

Check #
5538
Check #
5537
Deleted

PAYMENT
RECORD



Worksheet for paying Federal Withholding Taxes

You must make your Federal Tax Deposit electronically. Use the following information to complete your payment. You will also need your EFTPS Internet PIN and password to logon to EFTPS.

Go to www.eftps.gov and select "make a payment"

EMPLOYER IDENTIFICATION NUMBER (FEIN): 8 6 0 5 8 9 5 1 0

TYPE OF TAX: 941 944 940 943

TAX PERIOD Q1 Q2 Q3 Q4

TAX AMOUNT 1719.70

Tax Breakdown for 941/944/943 tax amount

| | |
|-------------------------------------|--------|
| • Social Security | 954.50 |
| • Medicare | 223.24 |
| • Tax Withholding | 541.96 |
| • Families First Coronavirus Credit | 0.00 |
| • Employee Retention Credit | 0.00 |

Your payment is due 03/15/2024

In most cases, you must approve your electronic payment 1 banking day before the due date.

Tips:

- To set up your QuickBooks to take care of your payroll tax payments and filings automatically or electronically, [click here](#) and follow the steps provided.

CASH ONLY IF ALL CheckLock™ SECURITY FEATURES LISTED ON BACK INDICATE NO TAMPERING OR COPYING

Bowie Fire District
P.O. Box 241
Bowie, AZ 85605
520-847-2553

ARIZONA STATE CU
280 W. Main ST.
Safford, AZ 85546
91-7249/3221

5539

2-26-24

PAY TO THE ORDER OF

Cochise County Treasurer

\$ 1,719.70

One Thousand Seven Hundred Nineteen + ⁷⁰/₁₀₀

DOLLARS

PROTECTED AGAINST FRAUD



MEMO

86-0589510

Bowie Fire District
Marty Smith

5539



Electronic Federal Tax Payment System

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TAXPAYER NAME: BOWIE FIRE DEPARTMENT

TIN: xxxxx9510

Deposit Confirmation

Your payment has been accepted.

Payment Successful

An EFT Acknowledgement Number has been provided for this payment. Please keep this number for your records.

REMINDER: REMEMBER TO FILE ALL RETURNS WHEN DUE!

| | |
|------------------------------------|------------------------|
| EFT ACKNOWLEDGEMENT NUMBER: | 270447420801628 |
|------------------------------------|------------------------|

PLEASE NOTE

Any amounts represented in the subcategories of Social Security, Medicare, and Income Tax Withholding are for informational purposes only.

| Payment Information | Entered Data |
|--------------------------|---------------------------|
| Taxpayer EIN | xxxxx9510 |
| Tax Form | 941 Employers Federal Tax |
| Tax Type | Federal Tax Deposit |
| Tax Period | Q1/2024 |
| Payment Amount | \$1,719.70 |
| Settlement Date | 03/14/2024 |
| Subcategories: | |
| 1 Social Security | \$954.50 |
| 2 Medicare | \$223.24 |
| 3 Tax Withholding | \$541.96 |
| Account Number | xxxxx8493 |
| Account Type | CHECKING |
| Routing Number | 122100024 |
| Bank Name | JPMORGAN CHASE BANK, NA |

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[USA.gov](#) [IRS.gov](#) [Treasury.gov](#)

Electronic Federal Tax Payment System® and EFTPS® are registered servicemarks of the U.S. Department of the Treasury's Bureau of the Fiscal Service.

From: EFTPS
Sent: Thursday, March 14, 2024 8:57 AM
To: bowiefiredist@vtc.net
Subject: IRS EFTPS Confirmation of Scheduled Transaction



Confirmation of Scheduled Transaction

You have scheduled a transaction. The following IRS EFTPS transaction is scheduled to be debited from your account:

| | |
|----------------------------|---------------------------|
| Confirmation Number | 270-4474-2080-1628 |
|----------------------------|---------------------------|

We are processing your request.

This is an auto generated email and is not monitored by the IRS. Please do not respond to this email. If you would like to check the status of your transaction, you can view your transaction history by logging into your account on the EFTPS home page.

If you have questions about this email, visit the "Help and Information" link on the EFTPS home page.

Thank you for using IRS EFTPS!

payroll
Feb taxes



Deposit cash or checks
at most Chase ATMs.
An image of your check can
be printed on your receipt.

My Transaction Summary

Transaction #90
Account Number Ending In: 8493
Checking Deposit \$1,719.70

Further review may result in delayed
availability of this deposit

JPMorgan Chase Bank, N.A.
Safford, Branch 000009
1-800-935-9935

Your satisfaction matters. Share your
feedback at: chase.com/sendusfeedback

Member FDIC, Equal Housing Lender
Please keep your receipt
02/26/2024 12:23

Business Date 02/26/2024
Session #33

Thank you - Linda
Cashbox #04

Feb 2024
payroll taxes
\$1,719.70

PAYMENT
RECORD



10408



104081



Rev 2/14

