

VOUCHER IS LOCATED AT THE BOTTOM

K-130V
(Rev. 6/10)

FOR OFFICE USE ONLY

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

2011 KANSAS PRIVILEGE TAX PAYMENT VOUCHER

For the taxable year beginning ___/___/___ ending ___/___/___

Corporation Name			
Corporation Address			
City, Town, or Post Office	State	Zip Code	Name or Address Change <input type="checkbox"/>
Name of Contact Person		Phone Number	

Employer Identification Number

Amended Payment

Extension Payment

PAYMENT AMOUNT \$

Please make check or money order payable to: Kansas Privilege Tax
DO NOT SUBMIT PHOTOCOPIES OF THIS FORM

179110