

# K-120V

(Rev. 8/04)

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"/>
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## 2004 KANSAS CORPORATE INCOME TAX VOUCHER



For the taxable year beginning \_\_\_\_\_, 20\_\_\_\_; ending \_\_\_\_\_, 20\_\_\_\_

Employer Identification Number

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	

Amended Payment  Extension Payment

PAYMENT AMOUNT \$

Make check or money order payable to: Kansas Corporate Income Tax

**DO NOT SUBMIT PHOTOCOPIES OF THIS FORM**



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