## **VOUCHER IS LOCATED AT THE BOTTOM OF THIS PAGE**

K-150V (Rev 7/05)	FOR OFFICE USE ONLY		2005 KANSAS FRANCHISE TAX VOUCHER	
or taxable year beginning	, 20 ; ending _	, 20	Employer Identification Number	
Number and Street or Principal Office			Name or Address Change	
City, Town, or Post Office	State	Zip Code		Extension Payment
Name of Contact Person		Phone Number	_	
Make check or money order payable to: Kansas Franchise Tax DO NOT SUBMIT PHOTOCOPIES OF THIS FORM			PAYMENT \$	
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