

**Kansas General Information**

County of residence \_\_\_\_\_ [1]  
School district number \_\_\_\_\_ [2]  
Mark if name or address has changed \_\_\_\_\_ [3]

**Use Tax**

Use Tax due but receipts or records not available \_\_\_\_\_ [4]  
Purchases Subject to Use Tax, receipts or records are available

**City/county****Amount**

City/county	Amount
_____	_____ [5]
_____	_____
_____	_____

**Contributions****Enter the amount of charitable contributions you wish to make to:**

Chickadee Checkoff	_____ [6]
Senior Citizens Meals On Wheels Contribution Program	_____ [7]
Breast Cancer Research Fund	_____ [8]
Military Emergency Relief Fund	_____ [9]
Kansas Hometown Heroes Fund	_____ [10]
Kansas Creative Arts Industry Fund	_____ [11]
School District Contribution Fund	_____ [12]
School district headquarters county	_____ [13]
School district number	_____ [14]

**Part-year Resident Information****If you were a part-year resident during the tax year, enter the dates you lived in Kansas**

Part-year residency dates:

From	_____ [15]
To	_____ [16]

**NOTES/QUESTIONS:**