# CT-10U

(Rev. 7/03)

**Kansas Consumers' Compensating Use Tax Return**

FOR OFFICE USE ONLY

432003

Business Name: DEAN BROWN

Mailing Address: 101 MAIN

City: GOODLAND | State: KS | Zip Code: 67735

Tax Account Number: 006-K12345678F-01

EIN:

Due Date: 08/25/03

| Tax Period | MM | DD | YY |
|---|---|---|---|
| Period Beginning Date | 07 | 01 | 03 |
| Period Ending Date | 07 | 31 | 03 |

Date Business Closed: ☐ Amended Return: ☐ Additional Return: ☐ Name or Address Change: ☐

## Part I

| | | |
|---|---|---|
| 1. Total Tax (From Part II), line 9 | 70.15 | 1 |
| 2. Estimated Tax Due For Next Month (See instructions) | . | 2 |
| 3. Estimated Tax Paid Last Month (See instructions) | . | 3 |
| 4. Total Tax (Add lines 1 and 2, and subtract line 3) | 70.15 | 4 |
| 5. Credit Memo (See instructions) | . | 5 |
| 6. Subtotal (Subtract line 5 from line 4) | 70.15 | 6 |
| 7. Penalty | . | 7 |
| 8. Interest | . | 8 |
| 9. Total Amount Due (Add lines 6, 7 and 8) | 70.15 | 9 |

SAMPLE

I certify this return is correct.

Signature Dean Brown

Do Not Detach This Voucher

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(Rev. 7/03)

**Kansas Consumers' Compensating Use Tax Voucher**

FOR OFFICE USE ONLY

Business Name: DEAN BROWN

Mailing Address: 101 MAIN

City: GOODLAND | State: KS | Zip Code: 67735

Tax Account Number: 006-K12345678F-01

EIN:

Due Date: 08/25/03

| Tax Period | MM | DD | YY |
|---|---|---|---|
| Period Beginning Date | 07 | 01 | 03 |
| Period Ending Date | 07 | 31 | 03 |

Amount from line 2, above: .

Subtract line 2 from line 9 and enter here: .

Payment Amount: $ 70.15

# CT-10U

(Rev. 7/03)

Part II

## Kansas Consumers' Compensating Use Tax Return

432103

Business Name: DEAN BROWN

Tax Account Number: 006-K12345678F-01

EIN:

| | MM | DD | YY |
|---|---|---|---|
| Period Beginning Date | 07 | 01 | 03 |
| Period Ending Date | 07 | 31 | 03 |

| Taxing Jurisdiction City/County | (1) Code | (2) Total Taxable | (3) Combined Tax Rate % | (4) Net Tax | (5) Tax Paid in Another State | (6) Tax Due |
|---|---|---|---|---|---|---|
| GOODLAND/ SHERMAN | 6005H | 1,300 .00 | 6.55 | 85 .15 | 15 .00 | 70 .15 |
| | | . | | . | . | . |
| | | . | | . | . | . |
| | | . | | . | . | . |
| | | . | | . | . | . |
| | | . | | . | . | . |
| | | . | | . | . | . |
| | | . | | . | . | . |
| | | . | | . | . | . |
| | | . | | . | . | . |
| | | . | | . | . | . |
| | | . | | . | . | . |

SAMPLE

Total Number of supplemental pages included with this return.

7. Total Tax Due (Part II). 70 .15

8. Sum of additional Part II supplemental pages. .

9. Total Tax (Add lines 7 and 8. Enter result here and on line 1, Part I). 70 .15