

Customer Relations
Kansas Department of Revenue
915 SW Harrison St.
Topeka, KS 66625



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Outside Topeka toll free: 1-877-526-7738
FAX (785) 291-3614
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Internet Address: www.ink.org/public/kdor

RETAILERS -- REFUND FORM B
Application For Refund of Kansas Sales Tax Paid On
The Purchase Or Repair Of Grain Storage Facilities

QUESTIONS TO BE ANSWERED BY KANSAS RETAILERS WHO SOLD MATERIALS OR SUPPLIES FOR USE IN BUILDING OR REPAIRING A GRAIN STORAGE FACILITY. THIS FORM SHOULD ALSO BE USED BY CONTRACTORS AND SUBCONTRACTORS TO REQUEST A REFUND OF TAXES PAID ON THEIR LABOR SERVICES.

1.(a) Is a copy of Refund Form A attached to this refund form? Yes ____ No ____ .

(b) Are copies of your sales invoices attached? Yes ____ No ____ .

Retailers and contractors should not process refunds requests unless the invoices and a completed copy of Refund Form A are attached.

2. What is the total amount of sales tax that you collected from this refund applicant, as shown by the attached invoices? ____ During what reporting period did you remit the sales tax to the state? ____

3. Please state your business name and registration number, as they appear on your sales tax registration certificate. *This section must be completed.*

Name: _____

Kansas Taxpayer Account Number: _____

4. Have you already paid the refund that is being requested to owner, repairman, contractor, or subcontractor? Yes ____ No ____ . If you answer "yes," a credit will be issued to your account. If you answered "no," to what party and you should the refund check be made payable? _____

If you have not remitted the tax refund to the owner, repairman, contractor, or subcontractor who presented you with the refund request, the department will issue a joint refund check made payable to you and the owner, repairman, contractor, or subcontractor. You must specify whose name should be on the refund check in addition to yours.

Signature of retailer, contractor, or subcontractor: _____

Telephone number, with area code: _____

PLEASE SEND THE COMPLETED FORM AND ATTACHMENTS TO: CUSTOMER RELATIONS,
KANSAS DEPARTMENT OF REVENUE, 915 SW HARRISON ST., TOPEKA, KS 66625