	For I	Interna	ı	Use O	nly		-

Page	1	of	2
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**QUARTERLY WAGE REPORT & UNEMPLOYMENT TAX RETURN** 

K-CNS 100 Web (Rev. 2-16)

SEE INSTRUCTIONS ON PAGE 2. To avoid a penalty this return must be postmarked or electronically submitted by the last day of the month after the quarter ending date. This report must be filed if you have

## FILE ONLINE: www.KansasEmployer.gov

MAIL TO: Kansas Department of Labor, P.O. Box 400, Topeka, KS 66601-0400

iness		2. Em	ployer					3. Quar							
ne ial Security Number 5. Employee Last Name	5. Employee Last Name First Name	MI								7. E	xcess V		aid This	Quarter	
					Dol	llars			Cents			Do	llars		Ce
															-
															$\vdash$
															1
															$\vdash$
liber of continuation sheets attached	otal Wages for THIS page —	<b>→</b>													
e Instructions)	11. For each month, report the	number o	of covered	l worke	rs who					7					
CS CODE Internal Use Only)	worked during or received includes the 12th of the mo	pay for tl					Month	1		Montl	n 2			Month 3	
	includes the 12th of the mol	ntn.										Do	llars		
	2. Total Wages	rom <b>AL</b> l	<b>L</b> pages.	If NO	Wage	s were	paid, r	mark <b>X</b> h	iere						
<b>rtify</b> that the information on this return is true, correct and complete,	13. Total Excess V	Nages	from <b>ALI</b>	L Pages	3										
ne best of my knowledge and belief.	14. Compute Tax					item 1	3)								
nature	15. Unemployme							Tax Rate	· =						
						,		alty Rate							
ted me	16. SUTA Penalty						1011	any Raio	+						
	10 Internal or La					,			+						-
ne	18. Interest on Lo		ment (S	ee instr	uction	s)			+						-
	19. Prior Amount														-
e	•	-								<u> </u>					_
M M D D Y Y Y Y	21. Total Due. If	tax is S	\$5 or m	ore, p	ay to	Kans	sas Em	ployme	ent						1

## Continuation sheet \_\_\_\_\_ of \_

## Mail: Kansas Dept. of Labor P.O. Box 400

Topeka, KS 66601-0400

## **CONTINUATION SHEET – QUARTERLY WAGE REPORT & UNEMPLOYMENT TAX RETURN**

K-CNS 101 Web (Rev. 1-14)

Quarterly Wage Report & Unemployment Tax Return, K-CNS 100, must accompany this continuation sheet.

Business Name	2. Emp Seri	oloyer al N <u>ur</u>	nber				3. Quo End	irter ing									
	5. Employee Last Name	First Name	MI		tal Wages	Paid Dol	This Q <b>lars</b>	(uarter		Cents	7.	Exces	s Wage	es Pai	d This	Quarter	Cen
																	ļ