

Dealer # \_\_\_\_\_ Folder# \_\_\_\_\_

Dealership Name \_\_\_\_\_

Dealer Address: \_\_\_\_\_

**Kansas Department of Revenue  
Dealer Licensing Bureau  
Auction Monthly Sales Reports**

Total New Sales \_\_\_\_\_

Monthly Report for: (Check One)    January - February - March - April - May - June - July - August - September - October - November - December

	Date Sold	Name of Seller Complete Address of Seller	Seller's D #	Vehicle Year	Make Style	Vehicle ID Number from MSO/Title	Name & Address of Purchaser	Purchaser D #	Odometer Reading	Temporary Permit #
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										

By my signature, I swear or affirm that this is a true and correct statement. I am aware that law provides severe penalties for making false statements.

Name \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_

# **Instructions**

- \* All reports must be completed in full and signed.
- \* Reports are due no later than the 20th of the following month.
- \* **A SEPARATE REPORT MUST BE SUBMITTED FOR EACH MONTH.** If no sales, enter, "NO SALES"
- \* Enter each temporary 30-day permit number issued, if applicable.
- \* The **TOTAL NUMBER** of sales (vehicles) must be recorded, on the Sales Report Form and the Cover Sheet.
- \* The **TOTAL TAXABLE SALES** (excluding wholesale and ST8's) must be recorded.
- \* **YOUR COVER SHEET** must accompany all sales reports (please place on top of reports).
- \* You must retain a copy of this report for 5 years.

## **REMINDER**

**Late Monthly Sales Reports will delay any 30-Day Permit orders and renewal of your dealers license.**

**MAIL MONTHLY REPORTS TO:**

**Dealer Licensing Bureau  
Post Office Box 2369  
Topeka, Kansas 66601-2369**