

KPTAI Quarterly Funds Remittance

County _____
Payment for month(s)* _____
Date Paid _____
Amount of Check _____

*** Please specify amount per month.**

✓ **Make checks payable to KPT&AI**

Please provide us with your e-mail address: _____

Mail form and payment to:
KPT&AI
1200 SW 10th Avenue
Topeka, KS 66604