QUARTER-MONTHLY PAYMENT OF CONVENTION AND TOURISM TAX FOOD ESTABLISHMENT

City of Kansas City, Missouri
Revenue Division
Free E-filing: http://www.kcmo.org/cttax

Phone
(816) 513-1120

[redacted]

RD-137
(09/09)

Period From: Period To:

Legal Name:

FEIN/SSN Number:

Mailing Address:

Account ID:

DBA Name:

Due Date:

Business Address:

For changes to name, address or FEIN/SSN, please contact us at revenue@kcmo.org or (816) 513-1135.

PAYMENT COUPON

Payment Amount: DOLLARS | CENTS

Make check payable to: CITY TREASURER/REVENUE DO NOT SEND CASH Mail payment to P.O. Box 803137, Kansas City 64180-3137

Taxpayer Signature	Print Name	Title	Date	Phone
Preparer's Signature (if other than taxpayer)	Print Name	Title	Date	Phone

Note: A quarter-monthly payment is required at the end of each period. Payments must be remitted three (3) banking days after the end of each period.

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