

**Form
NPF****KANSAS SECRETARY OF STATE
Notification to Sell Prearranged
Funeral Agreements, Contracts,
or Plans****Kansas Secretary of State, Audit Manager:**Memorial Hall, 1st Floor
120 S.W. 10th Avenue
Topeka, KS 66612-1594(785) 296-4564
audit@sos.ks.gov
www.sos.ks.gov

Directions: Before engaging in prearranged agreements, contracts, or plans, this form must be completed in full (typewritten or printed in ink) and signed. If additional space is needed in answering any questions, please attach the information to this form as an Exhibit.

Name of Legal Owner	E-mail Address	Phone		
Mailing Address	City	State	Zip	

Principal Place of Business	County		
Physical Address	City	State	Zip
		KS	

Branch Establishment 1	County		
Physical Address	City	State	Zip
		KS	

Branch Establishment 2	County		
Physical Address	City	State	Zip
		KS	

Financial Institution / Trustee 1	County		
Physical Address	City	State	Zip
		KS	

Financial Institution / Trustee 2	County		
Physical Address	City	State	Zip
		KS	

I do hereby certify under penalty of perjury and pursuant to the laws of the state of Kansas that the information contained in this report and supplied in any attachments thereto is true and correct.

Printed Name	Title			
Signature of Owner or Officer	Month	Day	Year	
X				