



COUNTY EMPLOYEES' RETIREMENT FUND

COUNTY FEES TRANSMITTAL FORM

FUNDS COLLECTED FOR THE MONTH OF _____, 20____

(Funds Due CERF on or Before the 20th of the Month Following Collection)

COUNTY OF _____

County No. _____

KEYBANK ACCOUNT NO. XXXXXXXX17785

\$ _____	Collector Delinquent Fee
\$ _____	Assessor Late Declaration Fee
\$ _____	Recorder Document Fee
\$ _____	Collector Merchant License Fee
\$ _____	Employee Payroll Withholding (<i>Employee</i> Contributions/Buyback Payments Only)
\$ _____	County Interest
\$ _____	County Contributions (<i>County</i> Contributions Only, if any)
\$ _____	TOTAL REMITTANCE

Signature

Mail To:

KeyBank
Attn: Betty Morris, OH 01-27-1401
127 Public Square, 14th Floor
Cleveland, OH 44114