

KANSAS Traffic Safety Resource OFFICE

Receipt of Child Safety Seat Order Fax Back Form

Your Agency's Name: _____

Your Agency's Phone #: _____

Contact Person: _____ Email: _____

Please complete this form as soon as you receive **ALL** the child safety seats from the order and **submit to:**

Attn: [Brenda Courtois](#)
 Fax: 785-233-1342
bcourtois@dcca.org

Failure to return this faxback form by [February 9, 2018](#) may disqualify you from participating in future seat orders.

Description	Style	# of Seats Received	Date Seats Received
Cosco APT50	Convertible w/Harness		
Maestro 3102198	High Back Booster		

If you have questions or have not received seats by [February 9, 2018](#) please contact the office.

Thank you!

Kansas Traffic Safety Resource Office: 2930 SW Wanamaker Dr., Ste. 100, Topeka, KS 66614
 800-416-2522 785-233-1342 Fax