

	<p align="center">KANSAS REAL ESTATE COMMISSION Three Townsite Plaza 120 SE 6th Avenue, Suite 200 Topeka, Kansas 66603-3511 www.krec.ks.gov (785)296-3411 Fax: (785)296-1771 krec@ks.gov</p>	<p align="center">LICENSEE NAME OR CONTACT CHANGE REL-100</p>
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THIS FORM IS FILLABLE ONLINE

LICENSEE INFORMATION

License Number	Licensee Name as shown on license
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CHANGE MY NAME

New Last Name	New Expiration Date (see chart attached)	Old Expiration Date
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- Enclosed is my original wall license. Alternatively, enclosed is a copy of my original wall license which has been marked "Cancelled" signed and dated by my Supervising/Branch Broker.
- Enclosed is my fee for the number of months my expiration date is *extended* at \$5 per month for Salespersons or \$7 per month for Brokers. If the new expiration date is *sooner* than the old expiration date, a prorated refund will be issued.

CHANGE MY RESIDENCE ADDRESS

Address line 1			
Address line 2			
City	State	Zip	County

CHANGE MY EMAIL ADDRESS TO: OR I no longer maintain an email address

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PHONE NUMBERS

- Change my residence phone to: OR I no longer maintain a residence phone

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- Change my cell phone to:

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- Change my business phone to:

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- Change my business fax to:

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LICENSEE SIGNATURE

SIGNATURE _____

DATE SIGNED _____

<p>KREC USE ONLY</p> <p>Date Entered: _____ Fee: \$ _____ Initials: _____</p>
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LICENSE EXPIRATION DATES

First Letter of Last Name:

- "B"
- "C"
- "D" and "E"
- "F" and "G"
- "H"
- "I," "J," "K" and "L"
- "M"
- "N," "O" and "P"
- "Q" and "R"
- "S"
- "T," "U" and "V"
- "W," "X," "Y," "Z" and "A"

Expiration Date:

- December 31 of each even-numbered year
- February 28 of each odd-numbered year
- April 30 of each odd-numbered year
- June 30 of each odd-numbered year
- August 31 of each odd-numbered year
- October 31 of each odd-numbered year
- December 31 of each odd-numbered year
- February 28 of each even-numbered year
- April 30 of each even-numbered year
- June 30 of each even-numbered year
- August 31 of each even-numbered year
- October 31 of each even-numbered year

CREDIT CARD PAYMENT INFORMATION

For name changes resulting in an **extension** of the license expiration date

\$5.00 per month for Salespersons, or \$7.00 per month for Brokers, plus a nominal credit card processing fee

Licensee Name:	Card Holder: <small>(if different than licensee)</small>	Email Address: <small>(optional/for electronic receipt)</small>
Card Number:	Expiration Date:	Zip Code:
Card Type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover		

Submit to the Kansas Real Estate Commission by:

Email: krec@ks.gov or Fax: 785-296-1771

After processing your payment, this document will be shredded.

If you prefer to provide your credit card information by phone, call 785-296-3411.