

Monthly Contribution Transmittal

City of _____ **April** _____
Due Date **05/15/** _____
Payment Amount _____
ACH Date _____

Please Note:

Submit this **Monthly Contribution Transmittal Form** along with your payment for the total of all combined employee and employer contributions due for all payroll dates that occur during the calendar month.

Contribution payments are due in the MFPRSI office within **15 calendar days** of the end of each calendar month. If you cannot submit the payment within this period of time, please request an extension by contacting MFPRSI at 515-254-9200 before the due date.

If you wish to make more than one contribution deposit for each month, please copy the appropriate month transmittal form and submit with your deposit.