

Kentucky Emergency Management Association, Incorporated

P.O. Box 1293
Frankfort, KY 40602



www.kyema.org

INVOICE

Certified Kentucky Emergency Manager Program

Instructions: Fill out this invoice with the applicant's information and send along with payment:

KEMA
ATTN: Drew Chandler
P.O.BOX 1293
Frankfort, KY 40602
859-873-3170

Date:

Applicant's Name:

Applicant's Address:

Street City State ZIP

Application Type:

Initial - \$200

Renewal - \$75

Payment Method:

Check # _____

Money Order

Online

Application Checklist

Invoice (this document)

Payment

Code of Conduct

Application & Supporting Documentation