

# FIFTEENTH DISTRICT PTA

## UNIT REMITTANCE FORM

Updated 8/9/06

Date \_\_\_\_\_

Unit Name \_\_\_\_\_ State PTA ID # \_\_\_\_\_

Council \_\_\_\_\_

Treasurer \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Total membership on this report: \_\_\_\_\_

ITEM DESCRIPTION	AMOUNT
Membership dues: # _____ @ \$ _____ (Council, District, State, and National portions) *See Below	\$
Membership Envelopes \$2 per 100	
Council Annual Assessment (SB & SM \$25; Lompoc \$20)	
Fifteenth District PTA Annual Assessment \$10	
Insurance Premium (liability & worker's comp) **See Below	
Late Charge Insurance \$25 if received after January 31 <sup>st</sup>	
Founders Day Freewill Offering	
Miscellaneous	
<b>CHECK#</b>	<b>TOTAL</b>
	\$

All checks must have **TWO SIGNATURES**. Make a copy for your records.

*"A portion of the total sum sent for the National portion of PTA membership dues is payment for one year's subscription to Our Children of the National Congress of Parents and Teachers, which will be sent to the president of each local unit"*

**\* Membership Dues:**

**Lompoc Units** - \$3.85 (Council \$0.50, District \$0.35, State \$1.25 & Nat'l \$1.75)

Make check payable to: Lompoc Council, Mail to: Lompoc Council Treasurer

**Santa Barbara Units** - \$3.70 (Council \$0.35, District \$0.35, State \$1.25 & Nat'l \$1.75)

Make check payable to: Santa Barbara Council, Mail to: Santa Barbara Council Treasurer

**Santa Maria Units** - \$3.70 (Council \$0.35, District \$0.35, State \$1.25 & Nat'l \$1.75)

Make check payable to: Santa Maria Council, Mail to: Santa Maria Council Treasurer

**Out of Council Units** - \$3.45 (Council \$0.00, District \$0.45, State \$1.25, & Nat'l \$1.75)

Make checks payable to: Fifteenth District PTA

Mail to: Valerie Fvette, 939 Old Ranch Rd., Solvang, CA 93463

**\*\* Insurance Premium**

Notices will go out in November and late charges will be assessed after January 31, 2007.