

FIFTEENTH DISTRICT PTA

UNIT REMITTANCE FORM

Updated 9/6/06

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 st	
Founders Day Freewill Offering	
Miscellaneous	
CHECK#	TOTAL
	\$

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: Marguerite McCurley, 759 Blake St., Santa Maria, 93455

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.