

2009-2010

# MEMBERSHIP REMITTANCE FORM

Unit: \_\_\_\_\_ Date: \_\_\_\_\_

School Enrollment: \_\_\_\_\_

## UNIT MEMBERSHIP CHAIRMAN

Indicate number of memberships & money collected in the applicable time period below:

June 1<sup>st</sup> through October 5<sup>th</sup>: \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_

October 6<sup>th</sup> through February 1<sup>st</sup>: \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Other Donations: \_\_\_\_\_ \$ \_\_\_\_\_

TOTAL MEMBERSHIPS TO DATE: \_\_\_\_\_

\*February 2<sup>nd</sup> through May 31<sup>st</sup>: \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_

\*These are "carry-over" memberships: State PTA will count these in next year's membership.

CARRY-OVER TOTAL TO DATE: \_\_\_\_\_

## UNIT TREASURER

Indicate below as remitted to Council Financial Secretary

Date: \_\_\_\_\_ Check #: \_\_\_\_\_ Memberships \_\_\_\_\_

Total remitted for members @ \$4.00 each

## COUNCIL MEMBERSHIP CHAIRMAN

Date: \_\_\_\_\_ Memberships recorded: \_\_\_\_\_

Unit Total To Date: \_\_\_\_\_

Initial below as completed:

\_\_\_\_\_  
Unit Chairman  
(Initial)

\_\_\_\_\_  
Unit Treasurer  
(Initial)

\_\_\_\_\_  
Council Fin Secretary  
(Initial)

\_\_\_\_\_  
Council Chairman  
(Initial)

Unit Chairman retain a copy for your records

Council Chairman – Retain one copy and return one copy to unit.

**THIS FORM MUST BE SUBMITTED WITH PAYMENT**