

# DUES TRANSMITTAL FORM



**Purpose:**

Use this form to send membership dues from the Local Unit PTA to Georgia PTA.

**Instructions:**

- Make copies of this form as needed.
- Fill in the information requested below.
- Calculate amount of dues at \$3.75 per member per annum.
- Dues should be submitted on a monthly basis, unless no dues are collected.
- Write one check (or money order) for all forms submitted at the same time.
- Remember, your PTA check must have two signatures.
- If you have achieved Target Membership, you must also submit the Membership Awards Form.
- Submit this form along with payment. Keep a copy of this form for your records.
- Make checks payable and mail to Georgia PTA, 114 Baker Street, NE, Atlanta, GA 30308-3366.

Date		Local Unit ID #	
District	Council	PTA Name	
Contact Person		PTA Position	
Address			
City		State	Zip
Cell Phone		Home Phone	
Email			
<input type="checkbox"/> Check here if you wish to receive email notification that dues payment was received.			

## DUES CALCULATION

**Total dues are \$3.75 per member per annum (\$1.50 for state, \$2.25 for national).**

Number of members \_\_\_\_\_ at \$3.75 each = \$\_\_\_\_\_

**This payment represents dues collected for new members for the following month:**

- |                               |                               |                              |                              |                              |
|-------------------------------|-------------------------------|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> Aug  | <input type="checkbox"/> Sep  | <input type="checkbox"/> Oct | <input type="checkbox"/> Nov | <input type="checkbox"/> Dec |
| <input type="checkbox"/> Jan  | <input type="checkbox"/> Feb  | <input type="checkbox"/> Mar | <input type="checkbox"/> Apr | <input type="checkbox"/> May |
| <input type="checkbox"/> June | <input type="checkbox"/> July |                              |                              |                              |

*Note: If no dues are collected during a month, it is **NOT** necessary to submit this form.*

Signature of President or Treasurer: \_\_\_\_\_

<b>FOR OFFICE USE ONLY:</b>	
Amount Received \$ _____	Date Received _____
<input type="checkbox"/> Check/Money Order # _____	<input type="checkbox"/> Cash