



2nd District of the California State PTA, 555 Franklin Street, San Francisco, CA 94102 (415) 241-6048

2010 - 11 UNIT REMITTANCE FORM

Use this form for remitting payments to the Second District of the California State PTA, San Francisco PTA. Please make checks payable to the "Second District PTA." All checks must have **TWO SIGNATURES**. Send to the Second District PTA, ATTN: Treasurer, 555 Franklin Street, San Francisco, CA 94102. Keep a copy of this form for your records. **NOTE: DUE DATES are indicated on this form.**

School: _____ Date: _____
 Name: _____
 Street Address: _____ Zip: _____
 Daytime Phone #: _____ Email: _____

Total number of memberships on this report:

ITEM DESCRIPTION	AMOUNT
Membership Dues # above @ \$3.50 per member <i>District Dues - \$.50, State Dues - \$1.25, National Dues - \$1.75</i> <i>1st Installment due by Oct 1st, 2010 and Final Installment due by March 15th, 2011</i>	\$
Insurance Premium @ 196.00 <i>Covers General Liability, Umbrella, Directors & Officers Liability, Fidelity Bond, and Workers' Compensation Insurance for Jan 5, '11 – Jan 4, '12</i> <i>Total premium is due by Dec 1th, 2010</i>	\$
Insurance Late Fee Assessment @\$25.00 per unit <i>If premium is received after deadline of Dec 1th, 2010 – no exceptions</i>	\$
Additional Workers Comp Insurance @ 5% of wages pd over \$1,000 <i>Attach original copy of WC Annual Payroll Report for Jan 5, '10 – Jan 5, '11, the calendar year that just ended (see Toolkit 5.6.5 Pg 237 & 397.)</i> <i>Additional WC premium due by Jan 15th, 2011</i>	\$
Freewill Offering @ Varies <i>Donations collected at Founders Day Celebrations (See Toolkit 7.14.1 Pg 309)</i> <i>Total gift amount collected by units due by May 15th, 2011</i>	\$

TOTAL \$

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.

 2nd DISTRICT OFFICE USE ONLY Received by: _____
 Unit PTA Bank/Check # _____ Amount of Check \$ _____ Date Rec'd: _____