



Orange Community Council of PTAs - Unit Remittance Form

ALL Units Must Use This Form When Submitting Monies to Council

Unit Name: _____ Date: _____

Unit Address: _____
(City) (Zip Code)

Unit State PTA ID Number: _____ Check Number: _____

ITEM DESCRIPTION	AMOUNT
Membership Dues: \$5.35 per member # members: _____	
Membership Envelopes: 500 envelopes @ \$15.00 per box # boxes: _____	
Insurance Premium: \$232.00 by 10/03/2018	
Insurance Penalty: \$25.00 (assessed by CAPTA if paid after 11/1/2018)	
Welcome Back Luncheon: \$20.00 per person # attending: _____	
Founders' Day Freewill Offering	
Honorary Service Award Banquet: price \$25.00 (per unit fee) # attending: _____	
Annual Council Assessment Fee: \$125 by 10/03/2018	
Scholarship Donation: \$100 suggested	
Community Concerns Donation: \$30 suggested	
Installation Breakfast: \$20 per person # attending: _____	
TOTAL AMOUNT REMITTED	

Unit Treasurer: _____ Email: _____

Home Address: _____
(City) (Zip Code)

Home Phone: _____ Cell: _____

Make all checks payable to Orange Community Council of PTAs (OCCPTAs)

ALL checks must have TWO Signatures

Keep a copy for your records

Please submit remittance at monthly meetings or mail to:

Orange Community Council of PTAs

Attn: Financial Secretary

P O Box 4128

Orange, CA 92863-4128

email: occptafinsec@gmail.com

"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."