

12th District PTA Remittance Form

Laura Ann Hawk-Loya
1838 Candle Pine Lane
Simi Valley, CA 93065

Please make checks payable to 12th District PTA and send it to the above address.

Name of Council _____ Date _____

Membership Dues _____ Members @ \$4.00	\$	Founder's Day Freewill Offering	\$
Membership Envelopes _____ Boxes @ \$10.00	\$	Other (Please specify)	\$
Insurance (School) _____ Units @ \$199.00	\$	Other (Please specify)	\$
Insurance (Council) @ \$131.00	\$	Other (Please specify)	\$
Convention Delegate Fees	\$	Other (Please specify)	\$

Total Check Amount \$ _____ Check # _____

Treasurer's Name _____ Phone # _____

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