FIRST DISTRICT PTA

Remittance Form

MAIL ONE (1) COPY OF THIS FORM & YOUR CHECK(S) TO:

First District PTA
P.O. Box 470
Alhambra CA 91802
(626) 289-1448

PTA NAME: _____
Treasurer Name: _____
Contact Email: _____
Contact Phone: _____

PTA Name(s)	# Mbrships This Remit	Amount Dues	Other *	Amount Other	TOTALS
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TOTALS	**0**	**$ -**		**$ -**	**$ -**

Make checks payable to: FIRST DISTRICT PTA.
Keep a copy of this remittance form for your records. Mail your check(s) and one (1) copy of this form to First District PTA. First District will return a signed copy of this form to you via email as a receipt.

**** "Other" remittances can include payments for membership envelopes, Founders Day freewill offerings, payments for unit or council attendees at First District PTA events, etc. Please describe what "Other" funds you are remitting in this field.***

FIRST DISTRICT PTA USE ONLY BELOW THIS LINE

Date Form & Check Received: _____ **Check #:** _____

Check Dated: _____ **Amount:** _____

Verified Amount: _____

_____
First District PTA (signature)