2021-2022 Unit Remittance Form

Name of PTA: _______________________________________________________

Treasurer Name: ____________________________________________________

Phone (___): ___________________ E-Mail: ______________________________

Membership dues: _____at $ 5.75 per capita $_____

$50 Council Assessment Due November 1st $_____

$258 Insurance Premium Due November 1st $_____

Check #___________ TOTAL $__________

- Make check payable to San Diego Unified Council of PTAs
  (all checks must have TWO SIGNATURES.)
- Send this form with your check to the Council Treasurer at the above address. Keep a copy for your records.

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 Nation Congress of Parents and Teachers, which will be sent to the president of each local unit.

2021-2022 COUNCIL FINANCIAL TEAM

<table>
<thead>
<tr>
<th>Treasurer: Ed Franqui</th>
<th><a href="mailto:treasurer@sdcouncilpta.org">treasurer@sdcouncilpta.org</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial Secretary: Christine Marsolini</td>
<td><a href="mailto:finsecretary@sdcouncilpta.org">finsecretary@sdcouncilpta.org</a></td>
</tr>
<tr>
<td>Council Office</td>
<td><a href="mailto:info@sdcouncilpta.org">info@sdcouncilpta.org</a></td>
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</tbody>
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