COUNCIL REMITTANCE FORM

~ FOR COUNCIL USE ONLY ~

Mail one copy to Fifth District PTA Treasurer.
Retain a copy for your records.
Use this form until June 30, 2021

Tameka Ponce
C/O Fifth District PTA
PO Box 400841, Hesperia, CA 92340

Phone/email: (760) 985-6900 Treasurer@FifthDistrictPTA.org

Make ONE check payable to Fifth District PTA - ALL PTA checks MUST have 2 signatures

Name of Council: _____ Date: _____
Treasurer: _____ Phone: _____
Address: _____

Unit Name Alphabetize	Per capita Membership dues # X $5.00		Insurance $178 Council $258 Unit	Sending After 12/3 Ins. Late Fee $25	Other Amount	Describe	Total

Check Number: Total Amount on this check

Please verify all calculations