



SMM PTA Council Financial Remittance Form

Unit:	
Treasurer:	
Email/Phone:	
Date:	

Please use this form when submitting monies to Council for any reason. Checks are payable to **Santa Monica-Malibu PTA Council** and they must have two signatures.

Item description	Amount
Membership Dues: # _____ @ \$5.25 (due monthly)	
Insurance Premium \$258 (due by Oct 20, 2020)	
Founders Day Donation (amount in your unit budget -- due by Jan 19, 2021)	
Youth Camp Donation (DO NOT SEND THIS IN 2020-21 BUDGET YR)	\$0
Lunch Sponsorship \$100 (DO NOT PAY UNTIL FURTHER NOTICE)	\$0
Conference/Convention/Workshops	
Council Directories	
Workers Comp form and payment (even if \$0 due) (due by 1/6/21)	
Other	
Check #	Total: \$

Notes: _____

Please make a copy for your records. Send payment and form to the Council Financial Secretary:

Rebecca Terlizzi
1141 17th Street #3
Santa Monica, CA 90403