

Irvine Unified Council PTA  
Remittance Form 2019-2020

Unit Name: \_\_\_\_\_ President: \_\_\_\_\_  
 Date: \_\_\_\_\_ Prez Email: \_\_\_\_\_  
 PTA Unit #: \_\_\_\_\_ Treasurer: \_\_\_\_\_  
 Check Amt: \_\_\_\_\_ Ck #: \_\_\_\_\_ Treas Email: \_\_\_\_\_

**Remittance should be paid every meeting month to IUCPTA.**

Please tell us the type of payment you are remitting:

Membership:

Due Date: Sept 18, 2019	\$5.50 x _____	# of members = \$	_____
Due Date: Oct 16, 2019	\$5.50 x _____	# of members = \$	_____
Due Date: Nov 20, 2019	\$5.50 x _____	# of members = \$	_____
Due Date: Jan 15, 2020	\$5.50 x _____	# of members = \$	_____
Due Date: Feb 19, 2020	\$5.50 x _____	# of members = \$	_____
Due Date: Mar 18, 2020	\$5.50 x _____	# of members = \$	_____
Due Date: Apr 15, 2020	\$5.50 x _____	# of members = \$	_____
Due Date: May 13, 2020	\$5.50 x _____	# of members = \$	_____

Insurance payment due Sept. 18, 2019	\$232	\$	_____
Annual Assessment due Sept 18, 2019	\$60	\$	_____
Other Payments (please describe)		\$	_____

**All checks should be made payable to: Irvine Unified Council PTA**

Bring payment to Council meetings or leave in the drop box or  
mail check with this remittance form to:

Irvine Unified Council PTA, c/o IUSD, 5050 Barranca Pkwy., Irvine, CA 92604

IUCPTA BOARD USE ONLY	Date Reviewed	Date Deposited	Initials
Finan. Sec. reviewed this document, removed check, copied & noted any discrepancies.	_____	_____	_____
Council VP reviewed this document & contacted unit.	_____	_____	_____