



everychild.one voice.

IOWA AND NATIONAL PTA MONTHLY DUES REMITTAL FORM

Monthly dues must be received by the last day of each month for any memberships sold during the month.
Mail to: Iowa PTA, 5619 N.W. 86th St., Suite 600, Johnston, IA 50131-2955

Name of PTA/PTSA _____

School District _____

Treasurer _____

Address _____

City _____ Zip _____

Day Phone _____ Eve. Phone _____

Fax _____ Email _____

President _____

Address _____

City _____ Zip _____

Day Phone _____ Eve. Phone _____

Fax _____ Email _____

Month of _____
of New Members _____
Iowa Dues \$2.50 x # of Members \$ _____
National Dues \$1.75 x # of Members \$ _____
Total Enclosed \$ _____

Errors under \$10.00 will not be returned so please double-check your information.

Important Information:

- ❖ The unit treasurer credits to the Iowa PTA the amount covering both Iowa and National dues. These portions of dues should NOT be recorded as part of the local PTA unit's income.
- ❖ A minimum of twenty-five (25) members constitutes a unit in good standing.
- ❖ Please use the back of this form to record new members.
- ❖ Please make several copies of this form to use each month.

IOWA PTA OFFICE USE ONLY	
Date Received _____	Amount of Check \$ _____ Check # _____
Number of New Members _____	
Errors found: No _____ Yes _____ (if yes, fill out below)	Amount \$ _____
Unit Person Contacted _____	Date Contacted _____
Explanation _____	
Amount Returned \$ _____	Iowa PTA check # _____ Iowa PTA Staff Initials _____