2015-2016 MONTHLY LOCAL UNIT MEMBERSHIP & DUES

South Carolina PTA
every child. one voice.®

Date _____ / _____ / _____

PTA/PTSA Name (as indicated on your Bylaws or Charter) _____

Address _____ City _____ , SC Zip _____

10th Day Student Enrollment		Members Enrolled this Report		
Number of Teachers		Teachers Enrolled this Report	+	
PTA ID #		**TOTAL Enrolled this Report**	=	
Unit Federal EIN		**(State dues = $1.00, National Dues = $2.25)**	**x**	**$3.25**
Bylaws Expiration	/ /	**TOTAL MEMBERSHIP DUES** this Report	=	
School County		Helen Stokes Memorial Scholarship Fund Donation (minimum $25 for scholarship eligibility)	+	
SCPTA District #		**TOTAL ENCLOSED**	=	

For assistance in locating this information, please contact your District President or the SCPTA office.

Monthly Report Date: The SCPTA membership year is July 1 to June 30. Please submit the Local Unit Membership Report to the state office each month. Remember to check your math and have 2 signers on the check. If no dues collected, a report is still submitted with a "0" in the box. Mark the box below for the month reported.

July		August		Sept.		October		Nov.		Dec.	
January		**February**		**March**		**April**		**May**		**June**	

Monthly Reporting Method: To remain in good standing as a 501(c)3 non-profit organization, each local unit must comply with the IRS regulation that requires a roster of all PTA members be compiled annually. Local units may submit a roster of PTA members in any format or by using the Excel spreadsheet found on www.scpta.org. Email completed roster to lwelch@scpta.org.

Awards Requirements: To be eligible for receiving Membership Awards, the 10th day student enrollment total and number of teachers need to be completed on the Monthly Membership Report Form. The 10th day student enrollment number is available from the school Secretary or Principal <u>after</u> the 10th day of school.

Local Unit President _____

Home Address _____ City _____ , SC Zip _____

Phone Number (_____) _____ email: _____
❑ Home ❑ Work ❑ Cell   ❑ Home ❑ Work

Local Unit Treasurer _____

Home Address _____ City _____ , SC Zip _____

Phone Number (_____) _____ email: _____
❑ Home ❑ Work ❑ Cell   ❑ Home ❑ Work