



**LOCAL UNIT MONTHLY DUES  
REMITTANCE STATEMENT**

FOR STATE OFFICE USE ONLY

Date Rec'd \_\_\_\_\_  
Check # \_\_\_\_\_  
Date \_\_\_\_\_  
Amount \_\_\_\_\_

All PTA/PTSAs are legally required to submit membership dues payments to the state office **MONTHLY**, as collected. Each person joining your local unit PTA/PTSA automatically becomes a member of the State and National PTA. Membership Cards should be issued to every paying member.

Please mail check and form to: **Mississippi PTA  
P. O. Box 1937  
Jackson, MS 39213-1937**

National ID Number: 

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 Example: 8 digits in length 

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Complete Name of Local PTA/PTSA \_\_\_\_\_

Local PTA President \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Treasurer \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

Signature of Treasurer \_\_\_\_\_ Date: \_\_\_\_\_

**Membership Report Summary**

Total Number of Members Reported \_\_\_\_\_ x \$3.50 each = \$ \_\_\_\_\_  
*Includes 2.25 National PTA Dues and \$1.25 MS PTA Dues*

Check One:  Elementary School  Middle School  High School  Other  
Specify Other \_\_\_\_\_

The enclosed dues covering the period from \_\_\_\_\_ to \_\_\_\_\_

**Membership list submission to MS PTA**

Each unit must send the unit's membership roster/list that includes members' names, addresses and email to [misspta@ymail.com](mailto:misspta@ymail.com). If email is not a feasible option to submit the list, please include a printed membership list with this mailed form. For your convenience, an Excel file template to use for your membership database can be found on the website: [www.misspta.org](http://www.misspta.org),

Please indicate how you will submit your membership roster: \_\_\_\_\_ Email list \_\_\_\_\_ Mail list

- Send Unit approximately \_\_\_\_\_ more cards (*Cards will be mailed to President's address*)
- Don't need more cards at this time