KEEP FOR YOUR RECORDS Harford County Council of PTA, Inc. Membership Payment for Due by September 30 Check # Amount Date Mailed	MAIL TO: Harford County Council of PTA, Inc. Attn: VP of Membership P. O Box 435 September payment Bel Air, MD 21014 # members paying for @ 50¢ per member \$ PTA Name: Membership Chair Name: Phone # email Date Received Amount Check # Initial
KEEP FOR YOUR RECORDS Harford County Council of PTA, Inc. Membership Payment for <u>Due by October 30</u>	MAIL TO: Harford County Council of PTA, Inc. Attn: VP of Membership P. O Box 435 Bel Air, MD 21014 # members paying for @ 50¢ per member \$ PTA Name:
Check # Amount Date Mailed	Membership Chair Name:
KEEP FOR YOUR RECORDS Harford County Council of PTA, Inc. Membership Payment for <u>Due by Novembers 30</u> Check #	MAIL TO: Harford County Council of PTA, Inc. Attn: VP of Membership P. O Box 435 November payment Bel Air, MD 21014 # members paying for @ 50¢ per member \$ PTA Name:
Amount Date Mailed	Membership Chair Name:
	Date Received Amount Check # Initial
KEEP FOR YOUR RECORDS Harford County Council of PTA, Inc. Membership Payment for Due by December 30 Check # Amount Date Mailed	Date Received Amount Check # Initial MAIL TO: Harford County Council of PTA, Inc. Attn: VP of Membership P. O Box 435 Bel Air, MD 21014 # members paying for @ 50¢ per member \$ PTA Name: Membership Chair Name: Phone # email

	MAIL TO: Harford County Council of PTA, Inc.	
KEEP FOR YOUR RECORDS	Attn: VP of Membership P. O Box 435 January payment	
	Bel Air, MD 21014	
Harford County Council of PTA, Inc. Membership Payment for <u>Due by January 30</u>	# members paying for @ 50¢ per member \$	
Due by January 50	PTA Name:	_
Check #		
Amount	Membership Chair Name:	-
	Phone # email	_
Date Mailed	Date Received Amount Check # Initial	
	MAIL TO: Harford County Council of PTA, Inc.	
KEEP FOR YOUR RECORDS	Attn: VP of MembershipP. O Box 435February payment	
Harford County Council of PTA, Inc.	Bel Air, MD 21014	
Membership Payment for <u>Due by February 28</u>	# members paying for @ 50¢ per member \$	
Check #	PTA Name:	-
Amount	Membership Chair Name:	-
Date Mailed	Phone # email	
	Date Received Amount Check # Initial	
	MAIL TO: Harford County Council of PTA, Inc.	
VEED FOD VOUD DECODDS	Attn: VP of Membership	
KEEP FOR YOUR RECORDS	P. O Box 435 March payment Bel Air, MD 21014	
Harford County Council of PTA, Inc.		
Membership Payment for	# members paying for @ 50¢ per member \$	
Membership Payment for <u>FINAL payment due by March 15</u>	# members paying for @ 50¢ per member \$ PTA Name:	-
Membership Payment for	PTA Name:	-
Membership Payment for <u>FINAL payment due by March 15</u> Check #	PTA Name: Membership Chair Name:	
Membership Payment for <u>FINAL payment due by March 15</u> Check # Amount	PTA Name:	
Membership Payment for <u>FINAL payment due by March 15</u> Check #	PTA Name: Membership Chair Name:	_
Membership Payment for <u>FINAL payment due by March 15</u> Check # Amount	PTA Name:	_
Membership Payment for <u>FINAL payment due by March 15</u> Check # Amount Date Mailed	PTA Name:	_
Membership Payment for <u>FINAL payment due by March 15</u> Check # Amount	PTA Name:	_
Membership Payment for <u>FINAL payment due by March 15</u> Check # Amount Date Mailed <u>KEEP FOR YOUR RECORDS</u> Harford County Council of PTA, Inc.	PTA Name:	_
Membership Payment for <u>FINAL payment due by March 15</u> Check # Amount Date Mailed <u>KEEP FOR YOUR RECORDS</u> Harford County Council of PTA, Inc. Membership Payment for	PTA Name:	_
Membership Payment for <u>FINAL payment due by March 15</u> Check # Amount Date Mailed <u>KEEP FOR YOUR RECORDS</u> Harford County Council of PTA, Inc.	PTA Name:	
Membership Payment for FINAL payment due by March 15 Check # Amount Date Mailed Date Mailed KEEP FOR YOUR RECORDS Harford County Council of PTA, Inc. Membership Payment for Any additional membership sold after March 15 th reporting	PTA Name:	
Membership Payment for FINAL payment due by March 15 Check # Amount Date Mailed Date Mailed KEEP FOR YOUR RECORDS Harford County Council of PTA, Inc. Membership Payment for Any additional membership sold after March 15 th reporting Check #	PTA Name:	
Membership Payment for FINAL payment due by March 15 Check # Amount Date Mailed Date Mailed KEEP FOR YOUR RECORDS Harford County Council of PTA, Inc. Membership Payment for Any additional membership sold after March 15 th reporting	PTA Name:	-