

BYLAWS COVERSHEET FOR UNITS AND COUNCILS

PLEASE ATTACH THIS FORM TO EACH SET OF BYLAWS SUBMITTED FOR APPROVAL

**In-council units SUBMIT TO: Your council parliamentarian
 Council parliamentarian and out-of-council units SEND TO:
 Pam Spear, Parliamentarian, Thirty-Third District PTA
 PO Box 1235 Lakewood, CA 90714
 Phone: 310-292-6791 Email: parliamentarian@33rdpta.org**

BYLAWS FOR: Unit _____
 Council _____
 District PTA Thirty-Third District PTA, Inc. _____
 Organization Date _____
 California State PTA ID _____
 National PTA ID # _____
 EIN # _____ FTB # _____
 Incorporation # (if applicable) _____
 Registry of Charitable Trust # _____
 Fiscal Year July 1st to June 30th _____
 Date Submitted to Council (for unit use only) _____
 Date Submitted to District (for council use only) _____

ENCLOSED IS ONE (1) ORIGINAL DOUBLE-SIDED SET OF BYLAWS WITH STANDING RULES AND FOUR (4) DOUBLE-SIDED COPIES OF THE SIGNATURE PAGES AND A \$5.00 CHECK PAYABLE TO “THIRTY-THIRD DISTRICT PTA” (bylaws copying charge) FOR (check all that apply):

- New unit New council Organization Date _____
- Update to most current edition without changes
- Change of Status/Name Change – original form signed by district president attached
- Mandatory update required to reinstate charter/recognition
- Proposed amendments as listed on page 2 of this form
- Additional standing rules attached as required Unit/council has no additional standing rules

FROM: Unit parliamentarian’s name: _____

Address: _____

Phone: (____) _____ Email: _____

Council parliamentarian’s Name: _____

Address: _____

Phone: (____) _____ Email: _____

For District Use only: Date district parliamentarian received the bylaws _____ Date submitted to State _____

Date bylaws came back from State _____ Date bylaws returned to council _____

Date of next association meeting _____ Date for signature page return to district _____

Page #	Article #	Section #	Proposed changes (please attach additional pages if necessary)