

Ninth District



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6401 Linda Vista Road, Annex A San Diego, CA 92111-7319 (858) 268-8077 Fax (858) 268-8017 ninthdistrictpta@sdcoe.net

Bylaws Review Report

One copy of this form must be attached to bylaws submitted for approval

Date _____ State ID# _____ I.R.S. E.I. # _____
PTA Name _____ Council _____
Contact Person _____ Phone No. _____ e-mail _____
Return Bylaws to:(name and address) _____

- Bylaws should be reviewed annually and updated at least every three years.
- Use blank bylaws dated *JUNE 2011*. Contact Ninth District PTA office for latest bylaws (858) 268-8077.
- Read *Procedures for Bylaws Review and Instructions for Completing the Standard Bylaws* ~ pages i and ii of the bylaws.
- Use black or blue ink or a typewriter to fill in blanks. Visit www.capta.org and choose the “ebylaws” tab to create the bylaws using the online format. One original (double sided) must be printed and sent “through channels” following the rest of these instructions. If they print with “draft” on the pages, it is NOT complete. Contact the council parliamentarian (if in council) or district parliamentarian (out of council) for help.
- **Send one original** completed standard bylaws with this *Review Report* form to your council parliamentarian (if in council). Out-of-council units send to Ninth District PTA office.
- **Send a check for \$4.00** for printing costs made payable to **Ninth District PTA**.
- After the council parliamentarian reviews; bylaws are sent to Ninth District PTA office.
- After the California State PTA parliamentarian signs the bylaws, Ninth District PTA will return to the *contact person* noted.
- The bylaws are **then** adopted by the association (or council) and signed and dated by the secretary.

Indicate items that apply:

- Reviewed by Council Parliamentarian (sign) _____ (date) _____
- Newly Organized Unit Change of status: _____
- Name change PTA to PTSA PTSA to PTA
- Updated to most current edition without changes Other _____
- Changes to unit bylaws made below

PROPOSED BYLAW CHANGES:

Page #	Article #	Section #	Explanation of proposed amendment(s)
3	IV	4	<input type="checkbox"/> Dues change, former dues amount \$ _____
5	V	2	<input type="checkbox"/> Increased <input type="checkbox"/> Decreased the number of officers.
5/6	V	3g&7	<input type="checkbox"/> Changed month of election meeting.
11	VI	8	<input type="checkbox"/> Changed month (s) of audit reports.
13	VII	1	<input type="checkbox"/> Changed months of association meetings.
14	VII	5b	<input type="checkbox"/> Increased <input type="checkbox"/> Decreased quorums—Association meetings
15	VIII	2	<input type="checkbox"/> Increased <input type="checkbox"/> Decreased \$ Board may spend between association mtgs.
16	VIII	7b	<input type="checkbox"/> Increased <input type="checkbox"/> Decreased quorums—Exc. Board meetings.

Who is responsible for preparing payment authorizations? Secretary Financial Secretary Other (describe)

NINTH DISTRICT PTA OFFICE USE ONLY

\$4.00 check # _____ or cash _____ Change of Status form to be included
Rec'd _____ Sent to State _____ Returned by State _____ Sent to Unit/Council _____