

**2007-2008 MEMBERSHIP &
DUES TRANSMITTAL FORM**

****SEND A COPY OF THIS FORM WITH EACH TRANSMITTAL****

Local Association Treasurer Information

Insert Local Name Here
Insert Local number here

| | | |
|---------------|-------|-----|
| Name | | |
| Address | | |
| City | State | Zip |
| Email Address | | |
| Home Phone | | |
| School Phone | | |

MEMBERSHIP INFORMATION: Complete the following tables indicating the total number of members and total dollar obligation for each membership type. (See instructions on back of this sheet.)

| Membership Type | Number of Members | Amount | Total |
|--|----------------------|---------------|-------------------------|
| Professional | | | |
| Full-time more than 50% | <input type="text"/> | @ \$ 481.00 = | <input type="text"/> \$ |
| Half-time 50% or less | <input type="text"/> | @ \$ 245.50 = | <input type="text"/> \$ |
| Quarter time 25% or less | <input type="text"/> | @ \$ 210.00 = | <input type="text"/> \$ |
| Substitute under contract (please join the other sub cat) | <input type="text"/> | @ \$ 0.00 = | <input type="text"/> \$ |
| Substitute not under contract (liability only) | <input type="text"/> | @ \$ 97.00 = | <input type="text"/> \$ |
| NEA -Life only Full-time active membership | <input type="text"/> | @ \$ 328.00 = | <input type="text"/> \$ |
| Educational Support Professional | | | |
| My ESP annual salary is \$23,800 or above | <input type="text"/> | @ \$ 415.50 = | <input type="text"/> \$ |
| My ESP annual salary is between \$16,660 & \$23,799 | <input type="text"/> | @ \$ 382.70 = | <input type="text"/> \$ |
| My ESP annual salary is between \$14,280 & \$16,659 | <input type="text"/> | @ \$ 278.60 = | <input type="text"/> \$ |
| My ESP annual salary is between \$9,520 and \$14,279 | <input type="text"/> | @ \$ 213.00 = | <input type="text"/> \$ |
| My ESP annual salary is between \$4,760 and \$9,519 | <input type="text"/> | @ \$ 128.15 = | <input type="text"/> \$ |
| My ESP annual salary is \$4,759 or less | <input type="text"/> | @ \$ 62.55 = | <input type="text"/> \$ |
| Totals** | <input type="text"/> | | <input type="text"/> |

** Total numbers should reflect payroll and cash members.

| | |
|--------------------------------|----------------------|
| Total NEA/NSEA Dues Obligation | <input type="text"/> |
| Total NEA FCPE Obligation | <input type="text"/> |
| Total Obligation | <input type="text"/> |

DUES TRANSMITTAL: Update the bottom portion of this form each time you make a dues payment. If adjustments are made to the balance owed either by adding, deleting or changing a members' status, complete the ADD/DELETE/ADJUSTMENT FORM, and return it with this transmittal.

| Payment # | Date of Payment | Adjustment to Balance | Dues Payment | Balance Owed |
|-----------|-----------------|-----------------------|--------------|--------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| 11 | | | | |
| 12 | | | | |

OUR BALANCE DUE WILL BE PAID IN _____ INSTALLMENTS STARTING IN THE MONTH OF _____.

| | | |
|---------------------------------------|-------|-------|
| Name of person remitting dues payment | Title | Phone |
|---------------------------------------|-------|-------|

Instructions for Completing the Membership & Dues Transmittal Form

1. Provide local treasurers information as requested.
2. Tally the total number of members by type and enter into boxes in the center of the form under number of members. Then multiply the number of each type of membership times the dues amount and enter the total in the total column on the right hand side of the form.
3. Sum the total column to get the Total NEA/NSEA Dues Obligation and enter that number in the appropriate box as indicated on the form.
4. If any members are contributing to NEA-FCPE (NEA-PAC), total those amounts and enter in the appropriate box. This amount should equal the amount of your NEA-FCPE Contributors Form.
5. Add the total NEA/NSEA Dues Obligation and the Total NEA-FCPE Obligation and enter in the box called Total Obligation. This is the total amount of money, which your local will remit to NSEA for this association year.
6. Determine how much of the total obligation will be remitted along with this form and enter on payment line #1. The balance owed is the total obligation minus your payment. **Make a copy of this form each time a payment is transmitted. Make sure the form includes your Local Name and Local Accounting Number.**
7. Enter how many installments your balance due will be paid in. **Dues must be remitted within 10 days of payroll.**
8. Enter the name of the person who is actually remitting the dues payments.
9. **Send a copy of the completed Membership & Dues Transmittal Form along with the original renewal roster and/or renewal forms to NSEA by September 10, 2007.**

A copy of this form can be found at www.nsea.org under Members then under Local Treasurer's Information

Breakdown of Membership Dues

| Membership Type | NEA | NSEA | Total |
|---|-----------|-----------|-----------|
| Professional | | | |
| Full-time more than 50% | \$ 153.00 | \$ 328.00 | \$ 481.00 |
| Half-time 50% or less | \$ 81.50 | \$ 164.00 | \$ 245.50 |
| Quarter time 25% or less | \$ 46.00 | \$ 164.00 | \$ 210.00 |
| Substitute under contract (please join the other sub cat) | \$ | | |
| Substitute not under contract (liability only) | \$ 15.00 | \$ 82.00 | \$ 97.00 |
| NEA -Life only Full-time active membership | \$ - | \$ 328.00 | \$ 328.00 |
| Educational Support Professional | | | |
| My ESP annual salary is \$23,800 or above | \$ 87.50 | \$ 328.00 | \$ 415.50 |
| My ESP annual salary is between \$16,660 & \$23,799 | \$ 87.50 | \$ 295.20 | \$ 382.70 |
| My ESP annual salary is between \$14,280 & \$16,659 | \$ 49.00 | \$ 229.60 | \$ 278.60 |
| My ESP annual salary is between \$9,520 and \$14,279 | \$ 49.00 | \$ 164.00 | \$ 213.00 |
| My ESP annual salary is between \$4,760 and \$9,519 | \$ 29.75 | \$ 98.40 | \$ 128.15 |
| My ESP annual salary is \$4,759 or less | \$ 29.75 | \$ 32.80 | \$ 62.55 |

****CALL 800-742-0047 FOR HELP WITH THIS FORM****