

## *PTA/PTSA Excellence Program (P.E.P.)*

### **Financial Best Practices Acknowledgement**

We, the officers and principal(s) of \_\_\_\_\_  
PTA/PTSA, do hereby acknowledge we have reviewed the National PTA  
Money Matters guide and the Financial Best Practices recommendations  
and will adhere to these policies.

President \_\_\_\_\_  
Vice President \_\_\_\_\_  
Vice President \_\_\_\_\_  
Treasurer \_\_\_\_\_  
Secretary \_\_\_\_\_  
Secretary \_\_\_\_\_  
Principal \_\_\_\_\_  
Principal \_\_\_\_\_

Please return this signed form through inter-school mail to Livonia PTSA  
Council c/o LPS Central Office. Thank you!