*Instructions: Copy and paste the following on PA/PTA or School Letterhead. Use document when a change of signatories on PA/PTA bank account is appropriate; following the election of officers or a change of officers. Take this document along with a copy of the bylaws and the signed certification form to the bank to change names on the account.*

Date:

«Bank Name»

«Address»

City», «State» «Postal Code»

Re: Bank Account #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PA/PTA Name, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EIN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To Whom It May Concern:

On June 30, 20\_\_\_\_\_ the term of office for the executive board of the PA/PTA of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will expire. On July 1, 20\_\_\_\_\_, the newly elected officers will assume responsibility for the organization. Therefore, please make the following changes to this bank account’s status and authorized signers as of July 1, 20\_\_\_\_\_:

###### Remove the following people from the list of authorized signers on the account:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| President |  | Treasurer |  | Officer |
| Name |  | Name |  | Name |

**Authorize the following three people as signers on the account:**

|  |  |  |
| --- | --- | --- |
| Name | Officer Title | Signature |
|  |  |  |
|  |  |  |
|  |  |  |

We appreciate your assistance with these transition details. If you have any questions, please contact one of the officers listed below.

Sincerely,

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Insert Name, President | Insert Name, Treasurer | Insert Name, Insert Officer’s Title |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Principal***

***The PA/PTA of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is a 501(c)(3) tax-exempt organization.***