

THE FAIRWAYS VILLAGE CONDOMINIUM ASSOCIATION

Request for Check Form

Submit this form to the management company to request reimbursement for approved expenses.

1. Date: _____
2. Name and address of owner: _____

3. Phone Numbers: Home _____ Cell _____ Other _____
Best time to call:
Email address: _____
4. Reason for Request: _____

5. Amount Requested: _____
6. Make Check Payable to: _____
7. Expense Category: _____
8. Committee Chairman Approval: _____
9. Office Approved: _____
10. Invoice Attached: Yes _____ No _____ (Explain Below)

Please mail, email or fax this form to:

Acri Commercial Realty, Inc.
290 Perry Highway
Pittsburgh, PA 15229
412-459-0141 fax
cindy_clifton@acrilty.com
Diana.Pearce@acrilty.com