

## Hunter's Brook Homeowners Assoc. Inc. Board Member Expense Reimbursement Request Form

Hunter's Brook Homeowners Association Inc.  
c/o Associa - Community Management  
55 Lane Road Suite 440  
Fairfield, NJ 07004

Request Date \_\_\_\_\_

Board Member Name \_\_\_\_\_

Board Member Address \_\_\_\_\_

Associated Budget Category \_\_\_\_\_

DATE	QUAN	DESCRIPTION	\$ AMT
		Comments:	
		TOTAL	

The above expense(s) were paid by me and are associated with budgeted expenses for HB Homeowners Assoc. Inc. and should be reimbursed to me as soon as possible.

\_\_\_\_\_  
Board Member Signature Date

Approved by: \_\_\_\_\_ (printed name)

\_\_\_\_\_  
Approval Board Member - Signature Date

**Instructions:** Please attach copies of receipts for the expense(s) or explanation. Sign the form and secure another signature from a current Hunter's Brook Board of Director, then mail to Associa address at top of this form. This form last updated 2023.