



HOA Homeowner Reimbursement Form

To receive reimbursement for HOA expenses, please fill out this form:

HOA Name: _____

Homeowner Name: _____

Unit #: _____

 Date	 Vendor	 Purpose of Expense	 Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Total Amount ():			_____

Receipts Required

*Receipts must be attached to show proof of payment.
Receipts must show the date, vendor/location, method of payment, and item purchased.*

Homeowner/Requestor Signature

Date

-  Email this completed form and receipts to: ap@virtualhoa.com
-  This request will be sent to your Board of Directors to review and approve. Reimbursement will only be issued upon the Board's approval.
-  Reimbursement will be issued via check to the mailing address on file, made payable to the legal homeowner's name(s) on file.