Pine Valley Community Association, Inc.

429 E. Dupont Road, PMB 139 Fort Wayne, Indiana 46825-2051 Please make your check payable to: Pine Valley Community Association, Inc. or PVCAI

Please remember to put your lot number on your check, include a copy of this invoice with your payment and mail to:

Pine Valley Community Association, Inc. Atten: Judy Ramsey, Treasurer 429 E. Dupont Road – PMB 139 Fort Wayne, Indiana 46825-2051

2023 PVCAI'S ASSOCIATION DUES INVOICE **JANUARY 12, 2023**

Due		Amount	
Date	Description	Due	
2/28/2023	2023 PVCAI'S Association Dues	\$225.00	

Any prior amounts due (including attorney fees, penalties and interest) are not shown on this invoice. If you have any questions, please contact the PVCAI Treasurer Judy Ramsey at 637-5403 or j.bleeramsey@gmail.com.

Residents can pay their annual association dues by mail with this invoice or securely online with a credit or debit card or electronic check via PVCAI's secure DuesPayment account. Visit http://pinevalleywebsite.com/dues/ to pay online and update your directory entry. A copy of this invoice has been posted on Pine Valley's website at pinevalleywebsite.com. If you have any questions. please contact PVCAI's Website Administrator Chris Pflieger at pflieger.chris@frontier.com.

TO UPDATE THE RESIDENTIAL DIRECTORY, PLEASE COMPLETE THIS SECTION ONLY IF **REPORTING CHANGES TO THE 2021 RESIDENTIAL DIRECTORY AND INCLUDE BOTH** HOMEOWNER'S NAMES AND YOUR E-MAIL ADDRESSES. PLEASE PRINT.

Lot Number: Address:

First and Last Names of Adult Residents:

Resident or Cell Phone Number (One Only):

E-mail Address (Please Print):

The e-mail addresses provided above will not appear in the Pine Valley Residential Directory but will be for Internal Use Only by PVCAI's Board of Directors.

The Board values your input. Please share your thoughts or concerns below. Thank you. Comments:

I would like to volunteer to help on a project or sponsored event. Interest(s):

COMPLETE BELOW AND RETURN IF RENTING

Name of Landlord: ______Address: _____

Resident or Cell Phone Number (One Only): _____E-Mail: _____

Name of Party Responsible for Paying Association Dues: