



**HomeLink
Property Management, LLC.**

Off 678-423-0555
Fax 770-573-3757

PO BOX 536
Sharpsburg, Ga. 30277

REQUEST FOR REIMBURSEMENT

Community Name*: _____

Requested by*: _____

Payee*: _____

Address*: Street 1 _____

Street 2 _____

City _____ State _____ Zip Code _____

Email Address: _____

Phone Number*: _____

Amount*: _____

Attach supporting documentation such as receipts and invoices

Reference*: _____

Budget Category: _____

Approved: _____

Date: _____

Please send approved reimbursement requests to **HomeLink PO Box 536 Sharpsburg GA. 30277 or email directly to Accounts Payable at admin@homelinkpm.com**. Do not give to your property manager. Checks are cut on the 1st and 15th of each month (following business day if those dates fall on a weekend or holiday).