ASSOCIATION MEMBER COMPLAINT

	Date	
	Lot(s) #	
Submit to:	Hillcrest Bay Homeowners Association	
	924 Bay View Drive Parker, AZ 85344	
	1 dike1, 142 03311	
	Or email: <u>HOA@hillcrestbay.com</u>	
Contact Inform	ation	
Name:		
Email:		
Address:		
Phone:		
Nature of the	violation(s) and provision of governing Documents Viol	ated:
First and last	name of the person who observed the violation:	
Date(s) the v	riolation(s) observed:	
testify in an a	nal knowledge of the facts contained in this complaint. In adjudicatory proceeding to the facts contained in this de thout being served a subpoena.	
nature:		Date: