The Cloverleaf North Condominium

Resident Communication Form

(For communicating with management)

Date: _____ Name: _____ Unit No: _____

This is a: **(check all that apply)** Phone number: _____

____ a suggestion _____ a complaint _____ for your information _____ work order request

A Reply is requested _____ Yes _____No

Please direct this to: ___ Board of Directors ____ Manager ____ Staff ____ other _____

In my own words:

_____
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_____**attach additional sheets if necessary**

DO NOT WRITE BELOW

Date Received _____ Action Taken: