

**REQUEST FOR DUES INFORMATION  
And/Or  
RESALE CERTIFICATE**

**FLYING L RANCH PROPERTY OWNER'S ASSOCIATION**

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Phone 210-278-4513

FROM:           **TITLE COMPANY NAME**  
                  **ADDRESS**  
                  **CITY, TX & ZIP CODE**  
                  **PHONE:**  
                  **FAX:**  
                  **EMAIL:**

GF#

DATE:

Please provide us, in writing, the status of property owner's dues on the following property:

**RECORD OWNER:**

PROPERTY:   FLYING L RANCH **SECTION#** \_\_\_\_\_ **LOT#** \_\_\_\_\_

NEEDED BY:   ASAP

THANK YOU!

**NAME OF PERSON MAKING REQUEST**

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DATES THAT ANNUAL DUES ARE ASSESSED: FROM: \_\_\_\_\_ TO: \_\_\_\_\_

AMOUNT OF ANNUAL DUES:           \$ \_\_\_\_\_   Paid (Circle one) YES / NO

AMOUNT PAST DUE (if any)           \$ \_\_\_\_\_

TRANSFER FEE                         \$ \_\_\_\_\_

RESALE CERTIFICATE FEE (if any)     \$ \_\_\_\_\_

**TOTAL AMOUNT DUE**                   \$ \_\_\_\_\_

BY: \_\_\_\_\_ LIZ LAWLIS, TREASURER \_\_\_\_\_  
                  FLYING L RANCH POA