

Fine Sheet

Resident Copy

Name: _____ you have been fined \$ _____ for _____
_____. You must pay the above amount one week from this
date or it will double.

Officer: _____ **Date:** _____

(Cut Here)

Treasurer Copy

Resident Name: _____ was fined \$ _____ for _____
_____.

Officer: _____ **Date:** _____

Fine Sheet

Resident Copy

Name: _____ you have been fined \$ _____ for _____
_____. You must pay the above amount one week from this
date or it will double.

Officer: _____ **Date:** _____

(Cut Here)

Treasurer Copy

Resident Name: _____ was fined \$ _____ for _____
_____.

Officer: _____ **Date:** _____