



Strongroom | Payment and Transfer Request Form

Date of Request: 7/14/2023

Branch Name: Real Property Management

Recurring Invoice: No

How many times: NONE

Day of Month to Pay:

Payment FROM Association: Liberty Trace HOA

Payment Payable TO: R. Padamati & A. Reddy

Care Of (as applicable):

Vendor Address: 7217 Roche Court

City, State & Zip: Powell, OH 43065

Payment FROM Bank Account: Primary Operating Account

Department:

Reason for Payment Request: Reimburse homeowner for overpayment **00201-8935VENDOR SETUP**

Payment Due Date:

Invoice Amount: \$ 25.00

Amount & GL Code: 2050

Amount & GL Code:

Amount & GL Code:

Amount & GL Code:

NOTE

- ACH Payment Information must be sent using the Vendor Master Maintenance Form located on the intranet under Client Accounting > Client Shared Services Center.
- If this is an emergency payment request, please fill out and submit the Emergency Payment Request Form. Then send filled out form to ClientAP-emergency@associa.us

Requestor Name:

Requestor Phone:

Requestor Email: RSMITH@ASSOCIA.US

C3 - RPM

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00201-8935: R. Padamati A. Reddy (Liberty Trace HOA)

Account

Unit

Owners

Addresses

Occupants

Preferences

Notes

Tasks

Tracked Items

Passes

Vehicles

Work Orders

Transactions

Friendlies

Arc Control

Direct Debit

Sub Accounts

Change Log

Date Settled

10/18/2018

Current Balance

0.00

Status

Current

Date	Batch	Type	Amount	Open Balance	Reference	Comment
07/14/2023	2519241	REFUND	25.00	25.00	REFUND	OVERPAYMENT
07/05/2023	2514160	DD	-255.00	-25.00	Direct Debit	Direct Debit: 07/05/2023
07/01/2023	2509056	01	255.00	0.00	Quarterly Charges	Recurring Charges: 07/01/2023
06/20/2023	2506447	ECHECK	-25.00	0.00	py_1NLAwEIIAyt1QGIY	Online ACH Payment
04/05/2023	2470681	DD	-255.00	0.00	Direct Debit	Direct Debit: 04/05/2023
04/01/2023	2463312	01	255.00	0.00	Quarterly Charges	Recurring Charges: 04/01/2023
01/05/2023	2421718	DD	255.00	0.00	Direct Debit	Direct Debit: 01/05/2023

Agency, Inc

CAPE CO

NC

LLC

GRIGG

HOA U

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ows UE

R. Padamati & A. Reddy

Vendor Id

497515

Status

N/A

Payable

Yes

Category

Homeowner

Homeowner Reimbursement

Address

7217 ROCHE COURT

Powell, OH 43065

United States of America

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