

**Lakeland Hills Homeowners Association**

**Due Process Notice of Hearing Secondary Party(s)**

**Date and Time of Hearing**\_\_\_\_\_

**Place of Hearing**\_\_\_\_\_

**Reason for This Notification**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Contact Association Hearing Board Coordinator to Confirm  
Your Intention to Attend**

**Coordinator: Name**\_\_\_\_\_

**Phone Number**\_\_\_\_\_