

MONTH: _____ 2024 MONTH: _____ 2024 REGIME FEE REGIME PMT: \$650.00	
Amount Paid: _____	OWNER: _____ COTTAGE # _____
Date: _____	PLEASE MAKE CHECK PAYABLE TO: SALT MARSH COTTAGE OWNERS ASSOC., INC. PO BOX 21994 HILTON HEAD ISLAND, SC 29925 Payment is due the 1 st of each month. A late fee of \$50.00 is incurred after the 15 th .
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