

Date

Harbor Island Owners Association, Inc.
1 N. Harbor Drive
Harbor Island, SC 29920

Dear HIOA Board of Directors,

I am agreeing to make payments on the balance owed \$ _____
I will send a monthly payment in the amount of \$ _____ with the understanding that this
account balance will continue to accrue finance charges until paid in full. Payments must be received in
the HIOA office by the 5th of each month beginning on month 5, 2010. If at anytime I am over 60 days
late in making these payments I realize that the remaining balance will be referred to counsel for
collection.

Name

Date Signed