

BROOKWOOD CONDO VILLAGE HOMEOWNERS ASSOCIATION

Payment due on the first or before the 1st of each month.	Total Amount Paid: _____
Circle the months included in this payment: JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC	
For address: _____ UNIT - A B C D	Remit Payment To: Brookwood Condo Village HOA PO Box 983 Blue Springs, MO 64013-0983
Payment Received From: _____	

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