Family Funds Donation

Please add the fo	llowing am	ount to my m	onthly utility	bill:
\$1	\$5		\$10	Other(please specify amount)
Date to begin do	nation:			(12 - 22 - 27 - 27 - 27 - 27 - 27 - 27 -
Please print.				
Name:				
Address:				
City:		State:	Zip: _	
Bartlett water bill o	account:_			
Signature:				

Please return to: Bartlett Water Department

6400 Stage Road Bartlett, TN 38134