

Charitable Contribution Form

(Choose one)

• I authorize the City of Arlington Water Utilities to include



or \$______ on my water utility bill each month to support the Care and Share Program. I understand that this will become effective on my next bill and will remain until I notify the Arlington Water Utilities to change it.

Enclosed is a one-time donation of \$_____.
(Please make check payable to Arlington Water Utilities and write "Care and Share" in the notes section of the check)

Name:	
Service Address:	
Account Number:	
Signature:	Date:

Your donation is tax deductible. A statement listing your total contributions will be mailed to you each January for your tax reporting purposes.

Please fill out this form and send it in with your next water utility payment or mail it to:

Arlington Water Utilities P.O. Box 90020 Arlington, TX 76004-3020

Many heartfelt thanks to those who have previously given and to those who are currently contributing on a regular basis. We will continue to bill you unless we hear from you. To date, your generous donations have helped many families and individuals.