

AUTHORIZATION AGREEMENT FOR WATER BILL ROUND UP

1. I authorize the City of Emporia to round up my water bill to the next whole dollar amount and donate the additional funds collected to Friends of the Animal Shelter.
2. I understand that in order to withdraw from the Round Up program, I must provide written notice to the City. Once the City receives notice, I will be withdrawn from the program the following month.
3. I understand that the City of Emporia reserves the right to terminate this plan and/or my participation therein at any time.
4. If my account is ever in arrears, I may be withdrawn from the plan.

DATE _____

ACCOUNT # _____

NAME _____

ADDRESS _____

PHONE # _____

SIGNATURE _____