
Water RoundUp Mail-In Form

Water • Wastewater • Refuse

- Yes, I would like to make a tax-deductible contribution to the Water RoundUp program to help local charitable agencies assist those less fortunate in our community with their combined City of Topeka Utility Bill.

Name: _____ (Please Print)

Address: _____ Phone: _____

Utility bill account number (if known): _____

I want to make a tax-deductible contribution of:

- | | |
|---|---|
| <input type="checkbox"/> \$1 per month (\$12 per year) | <input type="checkbox"/> \$20 per month (\$240 per year) |
| <input type="checkbox"/> \$2 per month (\$24 per year) | <input type="checkbox"/> \$30 per month (\$360 per year) |
| <input type="checkbox"/> \$3 per month (\$36 per year) | <input type="checkbox"/> \$50 per month (\$600 per year) |
| <input type="checkbox"/> \$4 per month (\$48 per year) | <input type="checkbox"/> \$75 per month (\$900 per year) |
| <input type="checkbox"/> \$5 per month (\$60 per year) | <input type="checkbox"/> \$100 per month (\$1200 per year) |
| <input type="checkbox"/> \$10 per month (\$120 per year) | <input type="checkbox"/> Other: _____ |

I understand that I will be billed this amount each month on my City of Topeka Utility Bill, and I can stop contributions at any time.

Please mail completed form to: Topeka Water, P. O. Box 1518, Topeka, Kansas, 66601, or enclose with your next combined City of Topeka Utility Bill.

Thank You for Participating in Water RoundUp.

