

# NORTH KANSAS CITY

## CHARITABLE UTILITY PAYMENT PLEDGE



On behalf of \_\_\_\_\_ residing at \_\_\_\_\_  
\_\_\_\_\_, North Kansas City, MO 64116, the following governmental  
or charitable organization agrees to pay the resident's utility bill in the amount of

\$ \_\_\_\_\_

by \_\_\_\_\_:  
Date

\_\_\_\_\_  
Organization's Name

\_\_\_\_\_  
Contact Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

**If payment is not received by 9 a.m. of the date above, water service will be discontinued without further notice.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Telephone Number