



CITY OF KENNEDALE
UTILITY BILLING
405 MUNICIPAL DRIVE
KENNE DALE, TEXAS 76060
(817) 985-2120
FAX (817) 483-0182

Donation Request Form

Name: _____

Address: _____

Phone Number: _____

I would like to make a monthly recurring donation as follows:

Bark in the Park: \$ _____

Fire Services: \$ _____

Kathy Turner Memorial Scholarship: \$ _____

Keep Kennedale Beautiful (KKB) Committee: \$ _____

Kennedale Arts & Culture Committee: \$ _____

Kennedale Youth Action Committee(YAC): \$ _____

Kidfish: \$ _____

Library Services: \$ _____

Police Services: \$ _____

I authorize the Kennedale Utility Billing Department to include the amount above on my monthly water bill. Should I wish to discontinue this donation, I must contact the Utility Billing Department and make my desire known.

Signature: _____ Date: _____

UB Personnel: _____ Date Entered: _____

To make a one time donation, please send payment or visit us at the address indicated above.