ENERGY ASSISTANCE FUND PROGRAM SIGN UP FORM

ELECTRICAL DISTRICT NO. 3

41630 W. Louis Johnson Drive Maricopa, AZ 85138

HOW IT WORKS

The Electrical District No. 3 (ED3) Energy Assistance Fund Program provides an opportunity for ED3 utility bill customers and residents to easily contribute to their community. All donations are allocated to the Community Action Human Resources Agency (CAHRA), a local non-profit agency serving ED3 customers.

All Energy Assistance Fund Program donations collected by ED3 through customer contributions will be passed on to this local charity, CAHRA, which will disburse the funds to qualified local consumers who are having difficulty paying their electric bills.

ED3 customers have several contribution options and donations can be added to your monthly utility bill payment.

PLEASE SELECT ONE OF THE THREE CONTRIBUTION METHODS BELOW:

□ METHOD 1 - <u>Monthly Contribution</u> (An amount of the customer's choice Please select an amount to donate: □ \$1.00 □ \$5.00 □	e to be added onto the monthly utility bill.) Other Amount: \$	
☐ METHOD 2 - Monthly Billing Round Up Contribution (ED3 will round uf your bill amount is \$42.37, your round up contribution will be \$0.63 for a	up your utility bill amount to the nearest whole dollar amour a total bill amount of \$43.00.)	nt. For example:
☐ METHOD 3 - <u>One-Time Contribution</u> (Make a contribution at any time in If you have any questions about the ED3 Energy Assistance Fund Program,		e Representative.
Contributions are fully tax deductible. Thank you for your generous donation.		
PLEASE COMPLETE THE INFORMATION BELOW FOR PROPER ACCOUNT SET UP (Please Print)		
Last Name:	First Name: Init	ial:
Account Number:	Service Address:	
Phone Number:	Second Phone Number:	
Email Address:	Date of Birth:	
PLEASE SIGN AND DATE		
Signature:	Date:	
RETURN YOUR COMPLETED FORM EITHER BY DROPPING IT OFF,	, ENCLOSING IT WITH YOUR BILL OR FAXING IT TO (5	20) 494-7053
REVISION NO.: 1	EFI	FECTIVE: 03/14/2012
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Last Name:	First Name: Init	ial:
Account Number:	Service Address:	
Phone Number:	Second Phone Number:	
Email Address:	Date of Birth:	
PLEASE SIGN AND DATE		
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