

Please detach and return the bottom portion with your payment

| Service Address: 100 Any St. <br> Service Period: $7 / 15 / 14$ to $8 / 14 / 14$ | Account Number: | 00-0000.00 Statement Date: | 8/31/14 |
| :---: | :---: | :---: | :---: |
| Utility Customer 100 Any St. Crescent City FL 32112 |  | Due Date: |  |
|  |  | Past Due Amount: | 84.65 |
|  |  | Total Amount Due. | 192.45 |
|  |  | Amount Enclosed: |  |
|  |  | Address change | on reverse sidt |
| Return To: |  |  |  |
|  | This is the last date to pay your bill without penalties |  |  |
| City of Crescent City3 N. Summit St., Crescent City, FL. 32112 |  |  |  |
|  | REMINDER: |  |  |
|  | After this date, shut off without | your service is sub notice. | immediate |

${ }^{\star}$ NOTE:
Your service is subject to cut-off if balances remain unpaid after the "Due Date". An unpaid "Past Due Balance" shall result in your service being cut off regardless of stated "Due Date".

