The City of Caldwell is proud to introduce the Caldwell Cares program to provide customers in need assistance with their water bills. Caldwell Cares is operated off of the generous donations of Caldwell residents. We have partnered with the Salvation Army to assist the residents of Caldwell with their water bills. The City will collect donations from caring customers like yourself and will apply the available funds to the qualified recipients' water bills. Caldwell Cares funds will be distributed April thru October of each year. Your donation to Caldwell Cares is tax deductible and will go a long way to help Caldwell residents in need. If you are interested in donating to the program please complete and return the form on the right. The amount you wish to donate will be added to your next month's water bill. The City of Caldwell and the Salvation Army thank you for your generosity.

Residents of Caldwell may apply at the Salvation Army office to see if they qualify for assistance. In determining who shall receive a portion of the limited assistance available, the Salvation Army shall place special consideration upon those applicants who demonstrate any of the following factors:

- Households that include persons aged 65 or older and/or children under the age of 18
- Households that include handicapped or disabled persons

Hardship cases, including, but not limited to:

- Involuntary unemployment
- Medical crisis
- Other family crisis such a death, desertion, or imprisonment

**DONATION FORM:**

**THE CITY OF CALDWELL AND THE SALVATION ARMY**

Thank you for your donation to assist families in financial crisis to avoid disruption of water service.

Please complete and return this form to the City of Caldwell with your next payment or drop it off directly at the address on the back of this brochure. Your donation will be included on your next statement for the subsequent billing cycle.

Name: ____________________________
Address: __________________________
Phone: (____) ______________________
Acct. Number (as it appears on your bill) __________________________

I WOULD LIKE TO PLEDGE:

[ ] Monthly [ ] $2  [ ] $5  [ ] $10

Other: $ __________________________
One Time: $ ______________________

Call 208 455 3000 ext. 01 for questions or more information.