



# Utility Bills



PAST 12 MONTHS

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: IN Zip: \_\_\_\_\_

Month	Gas	Electric	Water	Sewer	Other
January					
February					
March					
April					
May					
June					
July					
August					
September					
October					
November					
December					

Monthly Average \_\_\_\_\_

Who is your utility company?

Elec \_\_\_\_\_ Water \_\_\_\_\_

Gas \_\_\_\_\_ Trash \_\_\_\_\_

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