

## Monthly Utility Bill Statement Form

Customer Name: \_\_\_\_\_

Account Number: \_\_\_\_\_

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

Billing Month: \_\_\_\_\_ Year: \_\_\_\_\_

Utility Type	Previous Reading	Current Reading	Usage	Rate per Unit	Total Charge
Electricity (kWh)	_____	_____	_____	_____	\$ _____
Water (m³)	_____	_____	_____	_____	\$ _____
Gas (m³)	_____	_____	_____	_____	\$ _____
Total Amount Due					\$ _____

Payment Due Date: \_\_\_\_\_

Notes: \_\_\_\_\_

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Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_