

Name (Print)

Library Card Reimbursement Form

City of Westworth Village – 817-710-2500 311 Burton Hill Rd., Westworth Village, TX 76114

Name:			
Address: _			
Email:	Phone:		
l	(<i>print name</i>) authorize the City of Westworth		
Village to	reimburse my Utility Account(account number) for		
my purcha	ase of a Fort Worth Nonresident Library Card. I have presented the Westworth Village Utility		
Departme	ent with the following:		
	 My Fort Worth Library Nonresident Card, AND My receipt of payment made to the Fort Worth Library, AND My ID Verification that I used to obain the Fort Worth Nonresident Library Card. 		
	edge that reimbursement can be made annually and only for the amount paid. Reimbursements will id for replacement, lost, or stolen cards.		
Signature	Date		

FOR INTERNAL CITY USE ONLY			
A.	UTILITY DEPARTMENT		
	☐ Form Received by:	Date:	
	☐ Verification Approved by:	Date:	
	☐ Reimbursement of \$ Applied By:	Date:	
	☐ Scanned into TCM by:	Date:	