EXHIBIT 18-C	2			•	+AX 0044-"	120
		Rebate Ap	plication			
Monferey	Península			C A NAT	ALIFORNIA RICAN WATE	n
Water Manage	for a rebate, the n	w device(s) m	ust be on th			
unun mnumd de	t.ca.us or call 831-65 h the receipts for all co	8-5601 to deter	mine eligibiliti	v. You must	apply within 90 days	01
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Wäter Provider Q	ali-fornia Ameri	an water	Account Num	(ber (optional)	05-055592	6-0
2 Applicant Inte	mation					
Applicant Emi	hy Smith			Fmily	mish831Cgm	<u>vai 1.0</u>
Davime Phone	Tenant (If tenant, owr 131 - 238 - 2902	er's written authori	zation must be s	Phone <u>93</u>	1-238-2902	
Mailing Address	179 Waring St	ment	01-45	Und #	Zip 93A	55
City <u>Seasid</u> Make check payab		mith	State	CA		مير
(If name other than	account holder, please e			•		<u></u>
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application. I further certify that the fixtures for which I am requesting a rebate have been installed in the property identified above. I certify under penalty of perjury that the information stated above is true and complete to the best of my

knowledge. Name_ Undernandwork/Forms/Applications/Rebate Application 20100101.coc

Date 45 10