

LOUISIANA STATE BOND COMMISSION APPLICATION - OTHER

Instructions: Complete all required fields, which are indicated by *. The PRINT button can be found at the bottom of page 2. To retain an electronic version of the application form, use "Save As" option under File menu on Internet browser toolbar. Once the form is saved, it can only be modified with Adobe Writer. For any questions call (225) 342-0040.

1. Issuer *							
Mailing Address	5 *						
	Contact Name *		Phone Number *				
	Email Address *						
2. Beneficiary * (If a	lifferent than above)						
Mailing Address	5 *						
Principal Name	*		Title *				
	Contact Name *		Phone Number *				
	Email Address *						
Beneficiary Type	e * Government Unit (OR Local Political Subdivision Proceed to Item 3	3				
	Private Entity	Proceed to Item 4	1				
	sh Governing Authority * ernment Unit/Issuer/Beneficiary,						
4. Business Type *	Corporation	Type * OC OS OLLC	Date of Incorporation *				
		Corporate Registry * Foreign Domestic	If Domestic, State Incorporated				
	○ Non-Profit						
	Other (specify)						
Registered with Secretary of State to do business in Louisiana Yes No							
5. Attorney / Offici	al Name *						
Attorney Firm /	Official's Title *		Phone Number *				
	Email Address *						
6. Requested SBC	Meeting Date *		•				
7. Indicate if this a	pplication involves prior	SBC approval * Yes No					
If Yes , specify SBC Tracking # * Approval Date *							
8. Proceeds directly benefit libraries subject to R.S. 25:225(C) * Yes No							
If Yes , has a policy to limit access been adopted Yes No Has the policy been implemented Yes No							
]				
Submitted by: *			Date Submitted *				

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Type * Cost of Issuance/Professionals Terms Structure Other

Cooperative Endeavor A	greement					
Other						
9. Description of Request *						
Additional Application Req	uirements as App	olicable				
. Certified Resolution(s) mus						
Issuance amount ◆	Interest rate ◆	Maturity ◆	Purpose	Security	Legal Citation(s)	SBC Swap Policy Language
. Approval Parameter Form			_	•		nclude:
Issuance amount ◆	Interest rate •	Maturity ◆	Purpose	Security	Legal Citation(s)	

5. Drafts of pertinent documents (i.e., Cooperative Endeavor Agreements, Lease Agreements, Local Service Agreements, Trust Indenture, Loan Agreements)

"To mature on or before", "To mature not before", "To mature no later than"

Application Submission

Parameters must specify:

4. Financial Disclosure Form (SBC002)

8. Type of Request *

Amendment

C Lease/Finance Agreement

Upon completion of all required fields, select PRINT FORM button to print copies for your records.

"Not to exceed" OR "Not exceeding"

Application package (application forms, certified resolution(s), financial statements, etc.) must be sent to SBC-Application@treasury.la.gov by the specified date, which can be found at: https://www.treasury.la.gov/state-bond-commission. <a href="mailto:Emai

Attachments must be in pdf, Word or Excel format only. A scanned copy of the application fee check should be included as an attachment and actual check, must be received in our office within <u>3 business days</u> of electronic submission.

3. Payment of \$100 or \$1,500 application fee (as outlined in LAC Title 71), made payable to Louisiana State Bond Commission.

Mailed to: Sent via US Mail Sent via Other Delivery Services

State Bond Commission
P.O. Box 44154
Baton Rouge, LA 70804

3rd Floor - State Capitol
900 North 3rd Street
Baton Rouge, LA 70802

All emails directed to <u>SBC-Application@treasury.la.gov</u> will receive automatically generated emails acknowledging receipt. Application emails will receive an additional confirmation email from SBC staff once documentation has been reviewed to identify SBC tracking number and confirm if minimum requirements have been met. If either confirmation email is not received within 2 business days after electronic submission, call (225) 342-0040 to verify receipt of electronic submission.