REQUEST FOR LINE OF CREDIT

The purpose of this Request is to gather information and representations which will assist the Attorney General of the State of Louisiana and Bond Counsel to the State of Louisiana in determining whether the moneys from the line of credit being requested by you and to be issued by the State Bond Commission on your behalf and/or use of proceeds from the State of Louisiana's general obligation bonds issued on your behalf will comply with the Louisiana Constitution, the provisions of the Internal Revenue Code of 1986, as amended (the "Code"), and applicable income tax regulations to ensure that interest payable by the State on such bonds will be tax exempt. If you have questions regarding this questionnaire, you can contact the Public Finance Section of the Attorney General's Office at (225) 326-6083.

In order to obtain a line of credit, you must establish that the project is ready to proceed and that there is no impediment to the sale of bonds by the State on the date the line of credit is granted.

Responses to the questions herein may be stated in the spaces provided or on attachments to this Request. The Request should be approved and signed by a duly authorized representative who is responsible for coordination of the legal and financial matters and concerns of your entity in connection with the proposed bond issue. Please respond as accurately as possible.

1.	Requested By:				
		(Agency or Department)			
	Requested For:				
		(Agency or Department)			
2.	Project Description as found in the Capital Outlay Act:				
3.	Justification for th	ne request for a line of credit (include anticipated timing of the expenditures):			
4.	Priority and amou	unt of appropriation as stated in the Capital Outlay Act:			
	Priority 1:	\$			
	Priority 2:	\$			
	Priority 3:	\$			
	Priority 4:	\$			
	Priority 5:	\$			
5.	Priority and amount of cash line of credit requested:				
	Priority 1:	\$			
	Priority 2:	\$ \$			
6.	Amount of Priorit	y 5 non-cash line of credit requested: \$			

	01 - 06 months:	07 -	12 months:	13 - 18 months:	19 - 24 months:
	\$	\$_		\$	\$
	25 - 30 months:	31 -	- 36 months	Total Line	of Credit Requested:
	\$	\$		=	\$
	reak out the anticipated quipment) for costs of th			ory (e.g. planning, land acq	uisition, construction
	Facility, Land, Equipment or C Capital Expenditures Including I During Construction (Please De	nterest	Asset Life in Years (ADR midpoint or Appraisal)	Date Placed in Service or Anticipated to be Placed in Service	Amount
					\$
				_	\$ \$
					\$
					\$
					\$
					\$
				_	\$
				_	\$
				_	\$
				_	\$
				Total:	\$
in o	ncurred by you or by othe	ers before please give when su	e the granting of the ve details including	used to reimburse you or e line of credit or issuance nature of the expenditure: ere incurred.	of the general
	o you currently anticipat nticipated sale.	e the futu	ıre sale of any port	ion of the project? If yes, p	olease describe the

11.	Will any portion of the proceeds be used (directly or indirectly) to make or finance loans to private persons or entities? If yes, please describe.				
	Yes 🔵	No O			
12.	non-governmenta each person and the person and/o private entity who of services of the	rivate or non-governmental user of the project? If yes, please list the private and/or all user of the project and state their interest in the project. A principal user includes for entity who owns more than 5% of the project (if no one owns more than 5% name or entity who owns the largest ownership interest in the project), each person and/or to leases 5% or more of the project, each private recipient of more than 5% of the use project, managers or operators of facilities under contracts with terms exceeding two hich provide for payment based on a percentage of fees or revenues.			
	Yes 🔘	No 🔾			
13.	List the name of	the entity in which the project will be titled.			
14.	Is there any requ	irement to repay the State any moneys for the project? If yes, set forth the terms of			
	Yes 🔘	No 🔘			
15.	If yes, describe (i	or the project generate revenues that will be used to make payments to the State? i) from whom the revenues are obtains, (ii) the revenues, income or payments to the agency, accounts or funds to which they are deposited.			
	Yes 🔘	No 🔘			

16.	persons or entities or those doing business with such entity? (For example, a road or building which will service only a private industry or industrial park.) If yes, please describe.				
	Yes No No				
17.	Do you anticipate a management contract or lease being entered into regarding all or any portion of the Project? If so, please attach a copy of all contracts, management contracts, leases or subleases of space with private persons and/or entities relating to the Project. Please describe any anticipated contracts, management contracts, leases or subleases with private persons and/or entities relating to the Project, including, without limitation, rent square footage, square footage percentage of the whole Project, proposed use, payment provisions, etc.				
	Yes No No				
18.	Do you presently expect to change the use of the Project in any way that is not described elsewhere in this Questionnaire? If yes, please describe. Yes No				
19.	Is there a match requirement for the Project? If yes, please describe the amount and nature of the match and attach verification of the existence and availability of the match and the commitment to use the match for the project. Yes No				

20.	Does the Capital Outlay Act contain a specific condition for the Project, other than matching funds? If yes, describe the condition and attach verification that the requirements of the condition have been met.					
	Yes 🔘	No 🔘				
The u	undersigned does he	ereby certify that he/she is	s the duly authorized and active representative of the			
<u> </u>			t the responsibilities of such position include responsibility			
		-	s of the; in e/she is authorized to provide the information and			
repre	esentation contained	herein for your use and re	eliance in rendering the opinion requested; that the			
	•		are accurate and complete; and that if any of the nereof but prior to the issuance of the Bonds for the			
	•		l's Office, Public Finance Section.			
Date	d:		By:			
	(Please type)	Name:				
		Title:				
			-			
		Entity:				
		Street Address:				
		City, State, Zip:				
		Telephone:				
		Fax #:				
		E-Mail Address:				