

Enterprise Zone Program Disclosure Authorization

I, _____, of

Name and Title

_____ and as such do hereby appoint

Company

_____ to act as contact(s) in all

Consulting Company

matters pertaining to the Louisiana Economic Development, Enterprise Zone Program

Advance Notification/Project/Contract # _____.

Official Signature

Official Printed Name and Title

_____, 20_____

One form per Project.

Return to: Louisiana Economic Development
Business Incentives Services
P.O. Box 94185
Baton Rouge, LA 70804-9185