
Liz Bolin, Bond Director
Department of Finance and Administration
Bond Advisory Division
501 North State Street, Suite 1301 B
Jackson, Mississippi 39201

RE: Request for Project Funding

Dear Mrs. Bolin:

We are requesting that you transfer to _____ of State
Funds authorized by Section ____ Bill _____,
_____ Legislative Session, for the _____.

Our electronic payment information is as follows:

Bank Name: _____

Account #: _____

Routing #: _____

MAGIC Vendor Number: _____

We appreciate your assistance.
