LOCAL GOVERNMENT JOINT VENTURE ENTITY NOTIFICATION FORM

(See Instructions on Back)

LOCAL GOVERNMENT INFORMATION

1.	Local Government E	ntity: _		
2.	Interlocal Agreement Date:		(Name of Government Creating the Joint Venture)	
3.	Local Government Entity Contact Person:			
		_	(Name)	
		_	(Title)	
			(Address)	
		<u>(</u>)(Phone Number)	
	JOIN	T VENT	URE ENTITY INFORMATION	
1.			ORE ENTITY INFORMATION	
1. 2.	_		rofit Trust Other:	
3.	Date of Creation:			
4.	Main Office Address:			
		()	(Phone Number)	
			(Email)	
5.	Contact Person:			
			(Name)	
			(Title)	
			(Address)	
		()		
			(Phone Number)	
			(Email)	
6.	Entity Purpose:			
7.	Board Members and	Officers (List Members names and any offices they hold in local govern	
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		(If M	Iore Space Is Needed Please Attach Separate Sheet)	

INSTRUCTIONS FOR COMPLETION OF FORM

- 1. The local government official should complete both the Local Government Information and the Joint Venture Entity information. The local government official may need to contact the Joint Venture Entity information.
- 2. The form and a copy of the inter-local government should be sent to Division of Municipal Audit
 Bank of America Plaza
 414 Union Street, Suite 1100
 Nashville, Tennessee 37219-1718