



BAILMENT PAYMENT VOUCHER E-MAIL AUTHORIZATION FORM

Attention: Mississippi Alcohol Beverage Control Accounting Department

Date _____

ABC Vendor No. _____

ABC Vendor Name _____

Vendor Address _____

Contact person _____

Phone number _____

Bailment payment vouchers are to be sent electronically to the following addresses:
(Please print clearly or type.)

E-mail address _____

E-mail address _____

Mail completed form to the address listed below or fax it to 601-856-1390.

**Mississippi Alcohol Beverage Control
Attn: Accounting Department
P. O. Box 540
Madison, MS 39130-0540**