

STANDARD BANK CONFIRMATION FORM

Dear Sirs:

Your completion of the following report is sincerely appreciated. If the answer to any item is "none," please so state. Kindly mail direct to the accountant named below.

REPORT FROM BANK:

Bank customer should check here if confirmation of bank balance only (item 1) is desired.

Bank should check whichever is applicable.

NAME OF ACCOUNTANT:

Alcoholic Beverage Control Division
P O Box 22828
Jackson, MS 39225

Dear Sir:

1. We hereby report that at the close of business on _____, _____ our records showed the following balance(s) to the credit of _____.

<i>Amount</i>	<i>Designation of Account</i>	<i>Is Balance Subject to Withdrawal by check?</i>	<i>Does Account Bear Interest?</i>	<i>Give Rate</i>
\$ _____	_____	_____	_____	_____
\$ _____	_____	_____	_____	_____
\$ _____	_____	_____	_____	_____

2. We further report that the above mentioned depositor was directly liable to us in the respect of loans, acceptances, etc., at the close of business on that date in the total amount of \$ _____ as follows:

<i>Amount</i>	<i>Date of Loan or Discount</i>	<i>Due Date</i>	<i>Interest Rate</i>	<i>Paid To</i>	<i>Description of Liability, Collateral, Liens, Endorsers, etc.</i>
\$ _____	_____	_____	_____	_____	_____
\$ _____	_____	_____	_____	_____	_____
\$ _____	_____	_____	_____	_____	_____

3. Said Depositor was contingently liable as endorser of notes discounted and/or as guarantor at the close of business on that date in the total amount of \$ _____ as follows:

<i>Amount</i>	<i>Name of Maker</i>	<i>Date of Note</i>	<i>Due Date</i>	<i>Remarks</i>
\$ _____				
\$ _____				
\$ _____				

4. Who is authorized to sign on account(s): _____

Other direct or contingent liabilities, open letters of credit, and relative collateral, were

Date _____, _____.