



LOUISIANA CULTURAL DISTRICTS

Office of the Lt. Governor
Department of Culture, Recreation and Tourism
Office of Cultural Development

CERTIFICATION and SIGNATURE:

As the designated Cultural District Liaison, I agree to submit the following to the Office of Cultural Development as described and on the timeline outlined in the Cultural District Guidelines:

_____ (initial) Business List annual updates when requested each year after a full year of certification

_____ (initial) Annual Report by the deadline established by the OCD of each year after a full year of certification

I hereby certify that the application information is true and correct to the best of my knowledge. I further certify that the local governing authority with jurisdiction over the proposed cultural district fully endorses and authorizes the application.

Print Name of Liaison

Signature of Liaison

Date