

JOHN BEL EDWARDS GOVERNOR JACK MONTOUCET
SECRETARY

Seismic Payment Information Form

Please remit this form and payment of monthly seismic fees to: LDWF Fiscal Section

Attn: Jennifer Riddle

P.O. Box 98000

Baton Rouge, LA 70898

THIS FORM AND PAYMENT MUST BE RECEIVED BY THE 15TH OF THE MONTH

Monthly Report for 20	
Company Name:	
Company Address:	
Prospect Name:	
Total Days Worked This Month:X \$135 _∞ per day =	
Authorized Signature:	Date:
Print Name:	
FOR OFFICE USE ONLY – PLEASE DO N	OT WRITE BELOW THIS LINE
Amount Remitted:	
Pay-In Voucher Number:	
Date Remitted:	
Check Number:	