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Affidavit and Revenue Certification

Lake Bruin Recreation & Water Conservation District ENTITY NAME
Tensas Parish
Saint Joseph, Louisiana

**ANNUAL SWORN FINANCIAL STATEMENTS AND
CERTIFICATION OF REVENUES \$50,000 OR LESS (if applicable)**

The annual sworn financial statements are *required* by Louisiana Revised Statute 24:514 *to be filed with the Legislative Auditor within 90 days after the close of the fiscal year.* The certification of revenues \$50,000 or less, if applicable, is required by Louisiana Revised Statute 24:513(l)(1)(c)(i).

Personally came and appeared before the undersigned authority, Mike Thompson (officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of Lake Bruin Recreation & Water Conservation District (entity name) as of 2014 (entity's year-end), and the results of operations for the year then ended, in accordance with the basis of accounting described within the accompanying financial statements.

(Complete if applicable)

In addition, Mike Thompson, President, (officer name), who, duly sworn, deposes and says that Lake Bruin Recreation & Water Conservation District (entity name) received \$50,000 or less in revenues and other sources for the year ended 2014, and accordingly, is not required to have an audit for the previously mentioned year.

[Signature]
Officer Signature

Sworn to and subscribed before me this 4th day of March, 2015.

[Signature]
NOTARY PUBLIC



Officer's Name Mike Thompson
Officer's Title President
Address P.O. Box 38
St. Joseph, LA 71366
Ph/Fax/E-mail mthompson@ckbonline.com

Under provisions of state law, this report is a public document. A copy of the report has been submitted to the entity and other appropriate public officials. The report is available for public inspection at the Baton Rouge office of the Legislative Auditor and, where appropriate, at the office of the parish clerk of court.

Release Date APR 08 2015

Please return the completed form within 90 days of your entity's year-end to Office of Legislative Auditor – Local Government Services, Post Office Box 94397, Baton Rouge, LA 70804-9397

Lake Bruin Recreation & Water Conservation District (Agency Name)Statement of Cash Receipts and Disbursements
For the Year Ended 2014 (Year-End)

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description)			
1 Parcel Tax fee	\$ 17,609 99	\$	\$ 17 609 99
2 Pier Permits	150 00		150 00
3 Overpayment Refund	4 00		4 00
4			
5			
6 Total receipts (add lines 1 - 5)	<u>\$ 17,763 99</u>	<u>\$</u>	<u>\$ 17,763 99</u>
DISBURSEMENTS (Provide Brief Description)			
7 Equipment Purchase (Buoys)	\$ 3 540 00	\$	\$ 3,540 00
8 Equipment Repair & Maintenance	1 772 98		1 772 98
9 Office Supplies, Printing Post Office Box Rent	484 46		484 46
10 AirCare (Insurance expense)	4 300 00		4,300 00
11 Secretarial	2,400 00		2,400 00
12			
13 Total Disbursements (add lines 7 - 12)	<u>\$ 12 497 44</u>	<u>\$</u>	<u>\$ 12 497 44</u>
14 Change in fund balance (Lines 6 minus 13)	\$ 5 266 55	\$	\$ 5 266 55
15 Fund Balance at beginning of year	\$ 7 400 13	\$	\$ 7,400 13
16 Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	<u>\$ 12,666 68</u>	<u>\$</u>	<u>\$ 12,666 68</u>

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENTS FOR YOUR RECORDS

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auditor – Local Government Services, Post Office Box 94397, Baton Rouge, LA 70804-9397

Statement B

Lake Bruin Recreation & Water Conservation District
 (Agency Name)

Balance Sheet, on December 31, 2014 (Year-End)

	General Fund	Other Fund	Total
ASSETS (balances at year-end) -Give brief description			
1 Cash and cash equivalents on hand	\$ 12 666 68	\$	\$12 666 68
2 Investments (fair value) on hand			
3 Office furnishings (Cost of desks, etc)			
4 Equipment (Cost of fax machine, etc)			
5 Other (brief description)			
6 Total Assets (add lines 1 - 5)	\$ 12 666 68	\$	\$ 12 666 68
LIABILITIES AND FUND BALANCE (at year-end)			
7 Liabilities (give brief description)			
8	\$	\$	\$
9			
10			
11 Total Liabilities (add lines 7 - 10)	-0-		-0-
12 Fund balance (amount from Line 16 on Statement A)			
13 Other			
14 Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 12,666 68	\$	\$ 12,666 68

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Statement C

Schedule of Compensation, Benefits and Other Payments to Agency Head or Chief Executive Officer

Agency Head Name Mike Thompson

Purpose	Amount
Salary	
Benefits-insurance	
Benefits-retirement	
Benefits-other (describe)	
Benefits-other (describe)	
Benefits-other (describe)	
Car allowance	
Vehicle provided by government (enter amount reported on W-2)	
Per diem	
Reimbursements	
Travel	
Registration fees	
Conference travel	
Housing	
Unvouchered expenses (example travel advances etc)	
Special meals	
Other	

None