

**Affidavit and Revenue Certification**

RECEIVED  
LEGISLATIVE AUDITOR

Louisiana Foster & Adoptive Parents Association 2017 OCT -1 AM 9:52

East Baton Rouge Parish  
Baton Rouge Louisiana

4

**ANNUAL SWORN FINANCIAL STATEMENTS AND  
CERTIFICATION OF REVENUES \$75,000 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 of \$75,000 or less, if applicable, is required by Louisiana Revised Statute 24:513(J)(1)(c)(i)(aa).

\*\*\*\*\*

Personally came and appeared before the undersigned authority, Peggy Kirby, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of Louisiana Foster & Adoptive Parents Association as of 06/30/2017, 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, Peggy Kirby, who, duly sworn, deposes and says that Louisiana Foster & Adoptive Parents Association received \$75,000 or less in revenues and other sources for the year ended 06/30/2017, and accordingly, is not required to have an audit for the previously mentioned year.

Peggy Kirby  
Officer's Signature

Sworn to and subscribed before me this 15 day of Sept, 2017.

Don S. Hedrick  
NOTARY PUBLIC SIGNATURE & SEAL  
Orleans Parish 4016346

For Office Use Only
Under provisions of state law, this report will become a public document on the Monday following the release date. A copy of the report will be submitted to appropriate public officials and be available for public inspection at the Baton Rouge office of the Louisiana Legislative Auditor and, where appropriate, at the office of the parish clerk of court.
Release Date <u>OCT 04 2017</u>

Please Complete This Section
Officer's Name <u>Peggy Kirby</u>
Officer's Title <u>Executive Director</u>
Address <u>5200 Northeast Road</u>
City, Zip <u>Monroe LA 71203</u>
Ph: Cell/Land <u>318-614-8177</u>
E-mail <u>kirp50@juno.com</u>

## Louisiana Foster &amp; Adoptive Parents Association

**Statement of Cash Receipts and Disbursements**For the Year Ended 06/30/2017

(Year-End)

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
<b>RECEIPTS (Provide Brief Description):</b>			
1. Membership dues	\$ 1335	\$	\$
2. Government contract	23697		
3. Contributions	4890		
4. Gaming	9926		
5. Interest	25		
6. <b>Total receipts</b> (add lines 1 - 5)	<u>\$ 39873</u>	<u>\$</u>	<u>\$ 39873</u>
<b>DISBURSEMENTS (Provide Brief Description):</b>			
7. Compensation	\$ 15696	\$	\$
8. Office expenses	3479		
9. Occupancy	14988		
10. Travel	6754		
11. Meetings/Conferences	15319		
12. Special Projects	17771		
13. <b>Total Disbursements</b> (add lines 7 - 12)	<u>\$ 74007</u>	<u>\$</u>	<u>\$ 74007</u>
14. Change in fund balance ( Lines 6 minus 13)	\$ (34134)	\$	\$ (34134)
15. Fund Balance at beginning of year	\$ 104509	\$	\$ 104509
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	<u>\$ 70375</u>	<u>\$</u>	<u>\$ 70375</u>

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

Please return the completed form within 90 days of your entity's year-end to Louisiana Legislative Auditor – Local  
Government Services; Post Office Box 94397, Baton Rouge, LA 70804-9397 - Updated 8/3/16

Louisiana Foster & Adoptive Parents Association

**Balance Sheet, on** 06/30/2017  
(Year-End)

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
<b>ASSETS</b> (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$ 70375	\$	\$ 70375
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. <b>Total Assets</b> (add lines 1 - 5)	<u>\$ 70375</u>	<u>\$</u>	<u>\$ 70375</u>
<b>LIABILITIES AND FUND BALANCE</b> (at year-end):			
7. Liabilities (give brief description):			
8.	\$	\$	\$
9.			
10.			
11. <b>Total Liabilities</b> (add lines 7 - 10)			
12. Fund balance (amount from Line 16 on Statement A)			70375
13. Other			
14. <b>Total Liabilities and Fund Balance</b> (add lines 11 - 13)	<u>\$ 70375</u>	<u>\$</u>	<u>\$ 70375</u>

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



**Schedule of Compensation, Benefits and Other Payments to Agency Head or Chief Executive Officer (Required Form - Please Submit Completed Form Per Attached Instructions)**

**Louisiana Foster & Adoptive Parents Association**  
For the Year Ended 06/30/2017

**Agency Head Name and Title:** Peggy Kirby, Executive Director

<b>Purpose</b>	<b>Dollar Amount</b>
1. Salary	1. 15696
2. Benefits-insurance	2.
3. Benefits-retirement	3.
4. Benefits-other (describe)	4.
5. Benefits-other (describe)	5.
6. Benefits-other (describe)	6.
7. Car allowance	7.
8. Vehicle provided by government (if reported on your W-2)	8.
9. Per diem	9.
10. Reimbursements	10.
11. Travel	11.
12. Registration fees	12.
13. Conference travel	13.
14. Housing	14.
15. Unvouchered expenses (example: travel advances, etc.)	15.
16. Special meals	16.
17. Other	17.
18. TOTAL (enter total of line 1-17)	18. 15696

\_\_\_\_\_ Please check here if the Agency Head does not receive any compensation, benefits, and other payments. (Act 462 of the 2015 Legislative Session allows nongovernmental entities or not-for-profit (quasi-public) entities to report on the Act 706 schedule **only** those payments to the agency head that are derived from the public funds.)

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