Sworn Financial Statements and Certification of Revenues \$75,000 or Less

RA
Entity Name: Bayou Designal & Rosetholomen & Cuttoff Water Conservation Ball
Address: 77/3 West laked Rd Sterlington LA. 71280 LEGISLATIVEAU. Telephone: 218 665 2702 Email: Williatt Dan 1 Quahoo 16000
Address: 77/3 West laked Rd Sterlington LA. 71280 LEGISLATIVE AUDITOR This annual sworn financial statement is required to be filed with the Legislative Auditor within 90 days
This annual sworn financial statement is required to be filed with the Legislative Auditor within 90 days of the end of the entity's fiscal year by sending a pdf copy by email to ereports@lla.la.gov, faxing to 225-339-3986, or mailing to Louisiana Legislative Auditor — Local Government Services, P.O. Box 94397, Baton Rouge, LA 70804-9397.
AFFIDAVIT
Personally came and appeared before the undersigned authority, DAN N. Wyatt
(officer's name), who, duly sworn, deposes and says that the financial statements herewith given present Bayou Designed ABAYOU Basholomen fairly, in all material respects, the financial position of cuttoff Water Conservation Board
(entity's name) as of 12/31/2026 (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; that the entity has maintained a system of internal control structure sufficient to safeguard
assets and comply with laws and regulations; and that the entity has complied with all laws and
regulations, except as follows:
Complete if Applicable: In addition, (officer's name), who duly
sworn, deposes, and says that (entity's name) received \$75,000
or less in revenues and other sources for the year ended (entity's year-end), and
accordingly, is not required to have an audit for the previously mentioned fiscal year.
OFFICER'S SIGNATURE Financia / Sectency OFFICER'S TITLE
Sworn to and subscribed before me, this <u>Advid</u> day of <u>March</u> , 20 21
Page 3 of 4
NOTARY PUBLIC SIGNATURE & SEAL STATE OF LOUISIANA EARNESTINE ATKINS NOTARY PUBLIC # 15500 STATE OF LOUISIANA

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Statement of Receipts and Disbursements

Statement A

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description): 1. Interest	\$	\$	\$ 57.34
2. 3.			
3. 4.			
5.			
6. Total receipts (add lines 1 - 5)	\$	\$	\$5234
7. 8. 9.	\$	\$	\$ 5
10.			
11. 12.			
13. Total Disbursements (add lines 7 - 12)	\$0	\$	\$0
14. Change in fund balance (Lines 6 minus 13)	\$	\$	\$5734
15. Fund Balance at beginning of year	\$	\$	\$
16. Fund balance (deficit) at end of year (Add lines 14-15) -This amount also goes on line 12, Statement B	s	e	e41.150

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Identifi	the Racie	of Accounting	if not using	Cach_Racie		
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NOTE: If the entity receives any funds from pre- or post-adjudication court costs, fines, and/or fees, the entity must use one or more of the following categories in the receipts description fields: Civil Fees; Bond Fees; Asset Forfeiture/Sale; Pre-Trial Diversion Program; Criminal Court Costs/Fees; Criminal Contempt Fines; Other Criminal Fines; Restitution; and Probation/Parole/Supervision Fees.

Balance Sheet			Statement B
	General Fund	Other Fund	Total
ASSETS (balances at year-end)	- 11/ 2001	-	11/1/2
Cash and cash equivalents	\$ 46154	\$	\$46154
Investments (fair value)			
Office furnishings (Cost of desks, etc)	No. 10	y y wy y Light	
Equipment (Cost of fax machine, etc)			300 O 100 100 MM
5. Other (brief description)			112 /
6. Total Assets (add lines 1 - 5)	\$46,154	\$	\$46,154
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (brief description):	\$ 🕙	\$	\$ 🔿
8.		5 0	
9.	· · · · · · · · · · · · · · · · · · ·		
10.		132	
11. Total Liabilities (add lines 7 - 10)	2		3
12. Fund balance (amount from Line 16 on Statement A)			
13. Other	17		
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$46,154	\$	\$46.154

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Statement C Bayou Designed Bayou Bartholomen Cutt off whiter Conservation Boxes

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Dec. 31 - 2020

Purpose	Dollar Amount 1.		
1. Salary			
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.		

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.)