

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

Entity Name: Friends of Safety Town

Address: 505 Travis St., 7th Floor, Shreveport LA 71101

Telephone: 318-698-7233

Email: richard.corbett@caddosheriff.org

*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](mailto: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, Richard Corbett (officer's name), who, duly sworn, deposes and says that the financial statements herewith given present fairly, in all material respects, the financial position of Friends of Safety Town (entity's name) as of June 30, 2023 (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, Richard Corbett (officer's name), who duly sworn, deposes, and says that Friends of Safety Town (entity's name) received \$75,000 or less in revenues and other sources for the year ended June 30, 2023 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

Richard Corbett  
OFFICER'S SIGNATURE

President

OFFICER'S TITLE

Sworn to and subscribed before me, this 31 day of August, 2023

Dakota Firestone  
NOTARY PUBLIC SIGNATURE

Dakota Firestone  
Ex-Officio Notary Public ID # 160608  
Caddo Parish, Louisiana

Entity Name: Friends of Safety Town

Fiscal Year End: June 30, 2023

**Statement of Receipts and Disbursements**

**Statement A**

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
<b>RECEIPTS (Provide Brief Description):</b>			
1. GENERAL CONTRIBUTIONS	\$ 9,458.00		\$ 9,458.00
2. INVESTMENT INCOME	\$ 11,850.00		\$ 11,850.00
3.			\$ 0.00
4.			\$ 0.00
5.			\$ 0.00
6. <b>Total receipts</b> (add lines 1 - 5)	<u>\$ 21,308.00</u>	<u>\$ 0.00</u>	<u>\$ 21,308.00</u>
<b>DISBURSEMENTS (Provide Brief Description):</b>			
7. EDUCATIONAL MATERIAL	\$ 4,803.00		\$ 4,803.00
8. BANK FEES	\$ 367.00		\$ 367.00
9. AWARDS	\$ 5,028.00		\$ 5,028.00
10. DEPRECIATION	\$ 10,926.00		\$ 10,926.00
11. OTHER EXPENSES	\$ 38,058.00		\$ 38,058.00
12. MAINTENANCE	\$ 10,288.00		\$ 10,288.00
13. <b>Total Disbursements</b> (add lines 7 - 12)	<u>\$ 69,470.00</u>	<u>\$ 0.00</u>	<u>\$ 69,470.00</u>
14. Change in fund balance ( Lines 6 minus 13)	-\$ 48,162.00	\$ 0.00	-\$ 48,162.00
15. Fund Balance at beginning of year	\$ 1,111,542.00		\$ 1,111,542.00
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	\$ 1,063,380.00	\$ 0.00	\$ 1,063,380.00

Identify the Basis of Accounting, if not using Cash-Basis: \_\_\_\_\_

**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.**

Entity Name: Friends of Safety Town

Fiscal Year End: June 30, 2023

**Balance Sheet**

**Statement B**

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
<b>ASSETS</b> (balances at year-end)			
1. Cash and cash equivalents	\$ 312,872.00		\$ 312,872.00
2. Investments (fair value)	\$ 501,606.00		\$ 501,606.00
3. Office furnishings (Cost of desks, etc)			\$ 0.00
4. Equipment (Cost of fax machine, etc) Building and Equipment (Net)	\$ 248,902.00		\$ 248,902.00
5. Other (brief description)			\$ 0.00
6. <b>Total Assets</b> (add lines 1 - 5)	<u>\$ 1,063,380.00</u>	<u>\$ 0.00</u>	<u>\$ 1,063,380.00</u>
<b>LIABILITIES AND FUND BALANCE</b> (at year-end):			
7. Liabilities (brief description):			\$ 0.00
8.			\$ 0.00
9.			\$ 0.00
10.			\$ 0.00
11. <b>Total Liabilities</b> (add lines 7 - 10)	\$ 0.00	\$ 0.00	\$ 0.00
12. Fund balance (amount from Line 16 on Statement A)	\$ 1,063,380.00	\$ 0.00	\$ 1,063,380.00
13. Other			\$ 0.00
14. <b>Total Liabilities and Fund Balance</b> (add lines 11 - 13)	<u>\$ 1,063,380.00</u>	<u>\$ 0.00</u>	<u>\$ 1,063,380.00</u>

Statement C

**Schedule of Compensation, Benefits and Other Payments to Entity Head**

Agency Head Name, Title: \_\_\_\_\_

<b>Purpose</b>	<b>Dollar Amount</b>
1. Salary	
2. Benefits-insurance	
3. Benefits-retirement	
4. Benefits-other (describe)	
5. Benefits-other (describe)	
6. Benefits-other (describe)	
7. Car allowance	
8. Vehicle provided by government (if reported on your W-2)	
9. Per diem	
10. Reimbursements	
11. Travel	
12. Registration fees	
13. Conference travel	
14. Housing	
15. Unvouchered expenses (example: travel advances, etc.)	
16. Special meals	
17. Other	
18. TOTAL (enter total of line 1-17)	\$ 0.00

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.)

## Instructions to Prepare Sworn Financial Statements for the Louisiana Legislative Auditor

The enclosed financial statement has four pages:

**The first page is an affidavit** in which you will affirm that your revenues are in line with the reporting requirements for a sworn financial statement:

**Governmental agencies:** Affirm that you received \$75,000 or less in total revenues during the year.

**Non-profit entities:** Affirm that you received \$75,000 or less in public funds during the year.

--Public funds are those received from a state or local governmental entity, or federal funds passed from a state or local governmental entity.

--PLEASE NOTE: Non-profit entities are not required to submit a financial report to the Legislative Auditor during any year in which they did not receive any public funds. Please notify us in writing that your entity did not receive any public funds during the year under consideration. Please inform us prior to the due date of your report to stay in compliance with the state law.

**The second page is Statement A.** This statement tells the Legislative Auditor how much public funds your agency took in and paid out during the year. . See instructions below.

**The third page is Statement B.** This statement tells the Legislative Auditor what your ending balances are in the various accounts as listed on the form. See instructions below.

**The fourth page is Statement C.** This statement is the schedule of compensation, benefits, and other payments made to the head of your agency or the chief executive officer. It is **required** to be completed by Act 706 of the 2014 Legislative Session. See instructions below.

**Instructions to Prepare Statement A:** The cash basis of accounting is presumed unless the entity notes otherwise on Statement A.

### Receipts – Monies Received During the Year:

1. The **General Fund** column is used to report any monies your agency receives or expends for general purposes. The **Other Fund** column is used to report any monies your agency receives or expends for special purposes, such as restricted grant funds or utilities.
2. Line 1-5. List the types and amounts of your agency's receipts, or monies your agency received, during the year. Give a brief explanation of what these receipts were (taxes, fees, grants from which federal/state/local sources, etc.) A separate page may be used if necessary.
3. Line 6. Enter total of lines 1-5.

**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.***

### Disbursements – Money Spent During the Year:

4. Lines 7-12. List the types and amounts of your agency's disbursements, or monies your agency paid out, during the year. Give a brief description of what these disbursements were for (payroll, rent, utilities, etc.).
5. Line 13. Enter total of lines 7-12.
6. Line 14. Enter the difference between Line 13 and Line 6. If line 13 is greater than line 6, indicate that the line 14 amount is a negative number.
7. Line 15. Enter your agency's fund balance, this is the amount carried over from last year, if applicable.
8. Line 16. Enter the total of lines 14 and 15; this is the Fund Balance.
9. **If line 16 of Statement A is zero, and all of the amounts in Statement B are zero, you do not need to submit Statement B.**



### **Instructions to Prepare Statement B:**

#### Assets:

Line 1. Cash and cash equivalents on hand. Enter your agency's ending cash balance (this includes petty cash, all checking and savings accounts, and CD's with maturity less than 3 months).

Line 2. Investments on hand. Enter your agency's ending investment balance. Leave blank if your agency has no investments.

Line 3. Office furnishings. Enter the cost of your agency's office furnishings, less any depreciation (if applicable). Leave blank if your agency is not keeping track of this information.

Line 4. Equipment. Enter the cost of your agency's equipment, less any depreciation (if applicable). Leave blank if your agency is not keeping track of this information.

Line 6. Total Assets. Enter total of lines 1 - 5.

#### Liabilities and Fund Balance:

Lines 7-10. Liabilities. List the type and amount of any bills your agency owes to outside parties, but has not paid out at the end of the year (payroll, payments due to vendors, etc.).

Line 11. Total Liabilities. Enter the total of lines 7 - 10.

Line 12. Fund balance. Enter the amount, if any, from line 16 of Statement A.

Line 13. Other. Leave blank unless you have other fund balances.

Line 14. Total Liabilities and Fund Balance. Enter the total of lines 11, 12, and 13.

[NOTE: *Line 6 should equal line 14* — Total Assets = Total Liabilities Plus Fund Balance.]

### **Instructions to Prepare Statement C:**

This statement is the schedule of compensation, benefits, and other payments made to the head of your entity or the chief executive officer. It is **required to be completed and submitted** per Act 706 of the 2014 Legislative Session.

1. Enter your agency name at the top of page.
2. Enter the name and title of the head or chief executive officer of your agency.
3. Enter the amounts of compensation and/or benefits received in the appropriate lines.
4. Enter the total of lines 1-17 on line 18.
5. If the head or chief executive officer of your agency does not receive any compensation or benefits, please check the statement at the bottom of the form.
6. **Note for Non-profit Entities:** Act 462 of the 2015 Legislative Session amends Act 706 to allow not-for-profit (quasi-public) entities to report on the Act 706 schedule **only** those payments to the agency head that are derived from public funds.

### **Instructions to Complete and Submit Financial Statement Forms:**

1. Take Statement A, Statement C, (and Statement B if filled out) and the affidavit page to a notary public. Fill out all the information in the affidavit form in the presence of the notary. The notary will witness your signature and affix his or her seal to the affidavit.
2. **MAKE AND RETAIN A COPY OF ALL INFORMATION THAT YOU SEND TO THE LEGISLATIVE AUDITOR FOR YOUR RECORDS.**
3. Send to the Legislative Auditor the affidavit, Statement A and Statement C, (and statement B if applicable) **on or before ninety days after your agency's fiscal year end.**

Please submit a copy of the report JUST ONCE, either by email to: [ereports@lla.la.gov](mailto:ereports@lla.la.gov)

Or by fax: **225-339-3986.**

If you wish to submit by regular mail then sent to our mailing address, last choice for submission of your report:

**Louisiana Legislative Auditor – Local Government Services**

**Post Office Box 94397**

**Baton Rouge, LA 70804-9397**