

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

Entity Name: Boys Hope Girls Hope of Greater New Orleans

Address: 4128 Baudin St. New Orleans, LA 70119

Telephone: 504-484-7744 Email: neworleans@bhgh.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.*

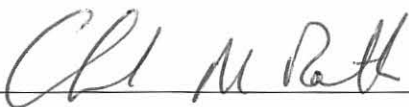
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## AFFIDAVIT

Personally came and appeared before the undersigned authority, Charles M. Roth, Executive Director (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 Boys Hope Girls Hope of Greater New Orleans (entity's name) as of June 30, 2022 (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: None

Complete if Applicable: In addition, Charles M. Roth, Executive Director (officer's name), who duly sworn, deposes, and says that Boys Hope Girls Hope of Greater New Orleans (entity's name) received \$75,000 or less in revenues and other sources for the year ended June 30, 2022 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.



OFFICER'S SIGNATURE

Executive Director

OFFICER'S TITLE

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

Sworn to and subscribed before me, this 19<sup>th</sup> day of August, 2022

  
NOTARY PUBLIC SIGNATURE & SEAL

Gregory F. Rouchell  
Notary Public  
La. Bar Roll No. 28746  
Notary ID No. 131733  
Commission expires at death

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Entity Name: Boys Hope Girls Hope of Greater New Orleans Fiscal Year End: 2022

## Statement of Receipts and Disbursements

## Statement A

|   | General<br>Fund     | Other<br>Fund | Total               |
|---|---------------------|---------------|---------------------|
| <b>RECEIPTS (Provide Brief Description):</b>  |                     |               |                     |
| 1. State of Louisiana – Department of Revenue - LA<br>Nonprofit & Small Business Assistance Program | 15,000.00           |               | 15,000.00           |
| 2.  |                     |               |                     |
| 3.  |                     |               |                     |
| 4.  |                     |               |                     |
| 5.  |                     |               |                     |
| <b>6. Total receipts</b> (add lines 1 - 5)  | <b>\$ 15,000.00</b> | \$            | <b>\$ 15,000.00</b> |

## DISBURSEMENTS (Provide Brief Description):

|   |                    |    |                    |
|---|--------------------|----|--------------------|
| 7. Boys Hope Food Expense                         | 8,547.45           |    | 8,547.45           |
| 8. Girls Hope Food Expense                        | 6,452.55           |    | 6,452.55           |
| 9.  |                    |    |                    |
| 10.   |                    |    |                    |
| 11.   |                    |    |                    |
| 12.   |                    |    |                    |
| <b>13. Total Disbursements</b> (add lines 7 - 12) | <b>\$15,000.00</b> | \$ | <b>\$15,000.00</b> |

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|   |      |    |      |
|---|------|----|------|
| 14. Change in fund balance ( Lines 6 minus 13)              | \$ 0 | \$ | \$ 0 |
| 15. Fund Balance at beginning of year                       | \$ 0 | \$ | \$ 0 |
| 16. Fund balance (deficit) at end of year (Add lines 14-15) |      |    |      |
| --This amount also goes on line 14, Statement B             | \$ 0 | \$ | \$ 0 |

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

**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.***

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## Balance Sheet

## Statement B

|   | General<br>Fund | Other<br>Fund | Total |
|---|-----------------|---------------|-------|
|   |                 |               |       |
| <b>ASSETS</b> (balances at year-end): <b>6/30/22</b>              |                 |               |       |
| 1. Cash and cash equivalents                                      | \$ 0            | \$            | \$ 0  |
| 2. Investments (fair value)                                       | \$ 0            |               | \$ 0  |
| 3. Computers/ Fixtures/ Furnishings                               | \$ 0            |               | \$ 0  |
| 4. Buildings  | \$ 0            |               | \$ 0  |
| 5. Automotive Equipment   | \$ 0            |               | \$ 0  |
| 6. Leasehold Improvements   | \$ 0            |               | \$ 0  |
| 7. Land   | \$ 0            |               | \$ 0  |
| 8.. <b>Total Assets</b> (add lines 1 - 7)                         | \$ 0            | \$            | \$ 0  |
| <b>LIABILITIES AND FUND BALANCE</b> (at year-end): <b>6/30/22</b> |                 |               |       |
| 9. Health Savings Account   | \$ 0            | \$            | \$ 0  |
| 10. Retirement Plans (401K/IRA)                                   | \$ 0            |               | \$ 0  |
| 11. Payroll Liabilities   | \$ 0            |               | \$ 0  |
| 12. PTO Accrual   | \$ 0            |               | \$ 0  |
| 13. <b>Total Liabilities</b> (add lines 9 - 12)                   | \$ 0            |               | \$ 0  |
| 14. Fund balance (amount from Line 16 on Statement A)             | \$ 0            |               | \$ 0  |
| 15. Other   | \$ 0            |               | \$ 0  |
| 14. <b>Total Liabilities and Fund Balance</b> (add lines 13 - 15) | \$ 0            | \$            | \$ 0  |

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## Statement C

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

Agency Head Name and Title: Charles M Roth, Executive Director

| Purpose   | Dollar Amount |
|---|---------------|
| 1. Salary   | 1. \$ 0       |
| 2. Benefits-insurance                                       | 2. \$ 0       |
| 3. Benefits-retirement                                      | 3. \$ 0       |
| 4. Benefits-Health Savings Account Discretionary Fund       | 4. \$ 0       |
| 5. Benefits-other (describe)                                | 5. \$ 0       |
| 6. Benefits-other (describe)                                | 6. \$ 0       |
| 7. Car allowance  | 7. \$ 0       |
| 8. Vehicle provided by government (if reported on your W-2) | 8. \$ 0       |
| 9. Per diem   | 9. \$ 0       |
| 10. Reimbursements  | 10. \$ 0      |
| 11. Travel  | 11. \$ 0      |
| 12. Registration fees                                       | 12. \$ 0      |
| 13. Conference travel                                       | 13. \$ 0      |
| 14. Housing   | 14. \$ 0      |
| 15. Unvouchered expenses (example: travel advances, etc.)   | 15. \$ 0      |
| 16. Special meals   | 16. \$ 0      |
| 17. Other   | 17. \$ 0      |
| 18. TOTAL (enter total of line 1-17)                        | 18. \$ 0      |

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**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.)