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Affidavit and Revenue Certification

Ward Two Cemetery
Morehouse Parish
Bastrop, Louisiana

**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, Ray Wilkerson (enter officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of Ward Two Cemetery (enter entity name) as of December 31, 2017 (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, Ray Wilkerson (officer name), who, duly sworn, deposes and says that Ward Two Cemetery (entity name) received \$75,000 or less in revenues and other sources for the year ended December 31, 2017 accordingly, is not required to have an audit for the previously mentioned year.

Ray Wilkerson
Officer's Signature

Sworn to and subscribed before me this 25th day of March, 2018.

Melissa Chain #79844
NOTARY PUBLIC SIGNATURE & SEAL

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>APR 11 2018</u>

Please Complete This Section
Officer's Name Ray Wilkerson
Officer's Title President
Address P.O. Box 772
City, Zip Bastrop, LA 71220
Ph: Cell/Land 318-283-2466
E-mail raywilkerson400z@att.net

Ward Two Cemetery

(Agency Name)

Statement of Cash Receipts and Disbursements**For the Year Ended December 31, 2017**

(Year-End)

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
RECEIPTS (Provide Brief Description):			
1. Ad Valorem Tax	\$ 31920	\$	\$ 31920
2. State Revenue Sharing	450		450
3.			
4.			
5.			
6. Total receipts (add lines 1 - 5)	<u>\$ 32370</u>	<u>\$</u>	<u>\$ 32370</u>
DISBURSEMENTS (Provide Brief Description):			
7. Accounting Service	\$ 725	\$	\$ 725
8. Contract Labor	14825		14825
9. Maintenance & Supplies	35		35
10. Miscellaneous – Election expense	12642		12642
11. Post Office Box Rent	62		62
12.			
13. Total Disbursements (add lines 7 - 12)	<u>\$ 28289</u>	<u>\$</u>	<u>\$ 28289</u>
14. Change in fund balance (Lines 6 minus 13)	\$ 4081	\$	\$ 4081
15. Fund Balance at beginning of year	\$ 137509	\$	\$ 137509
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	\$ 141590	\$	\$ 141590

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

Ward Two Cemetery
(Agency Name)

Balance Sheet, on December 31, 2017
(Year-End)

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
ASSETS (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$ 141386	\$	\$ 141386
2. Investments (fair value) on hand			
3. Office furnishings (Cost of desks, etc)			
4. Equipment (Cost of fax machine, etc)			
5. Other (brief description)Due from Primary Govt	204		204
6. Total Assets (add lines 1 - 5)	<u>\$ 141590</u>	<u>\$</u>	<u>\$ 141590</u>
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (give brief description):			
8.	\$	\$	\$
9.			
10.			
11. Total Liabilities (add lines 7 - 10)			
12. Fund balance (amount from Line 16 on Statement A)	141590		141590
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	<u>\$ 141590</u>	<u>\$</u>	<u>\$ 141590</u>

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Ward Two Cemetery (Agency Name)

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

For the Year Ended December 31, 2017 (Year-End)

Agency Head Name and Title: Ray Wilkerson

Purpose	Dollar Amount
1. Salary	1. NONE
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.)

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