

FORT PIKE VOLUNTEER FIRE DEPT(Entity Name)  
NEW ORLEANS, ORLEANS PARISH, LOUISIANA(City, Parish/State)

TRANSMITTAL LETTER

ANNUAL FINANCIAL STATEMENTS

(Date) 19 DECEMBER 2020

Ms. Gayle Fransen  
Engagement Manager  
Louisiana Legislative Auditor  
1600 North Third Street  
Baton Rouge, LA 70802

Dear Ms. Fransen:

In accordance with Louisiana Revised Statute 24:513, enclosed are the Affidavit and Revenue Certification Form and the annual financial statements for my entity, as of and for the year ended 2019 (entity's year-end). The statements include all funds under the control of this entity. The accompanying financial statements have been prepared on the cash basis of accounting.

Sincerely,



\_\_\_\_\_  
Officer's Signature

EUSE SNODEREN

\_\_\_\_\_  
Officer's Name

Enclosures

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENT 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

Affidavit and Revenue Certification

FORT PIKE VOLUNTEER FIRE DEPARTMENT ENTITY NAME  
ORLEANS Parish  
NEW ORLEANS (City), State 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).

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Personally came and appeared before the undersigned authority, ELISE M. SNOEREN (enter officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of FORT PIKE VOLUNTEER FIRE DEPT. (enter entity name) as of DECEMBER 31, 2019 (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, ELISE SNOEREN, (officer name), who, duly sworn, deposes and says that FORT PIKE VOLUNTEER FIRE DEPT. (entity name) received \$75,000 or less in revenues and other sources for the year ended DECEMBER 31, 2019, and accordingly, is not required to have an audit for the previously mentioned year.

[Signature]  
Officer's Signature

Sworn to and subscribed before me this 19<sup>th</sup> day of December, 2020

[Signature]  
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 1/6/2021

Please Complete This Section  
Officer's Name ELISE SNOEREN  
Officer's Title TREASURER  
Address 25511 CHEF MENTEUR Hwy.  
City, Zip NEW ORLEANS 70129 La.  
Ph: Cell/Land 504-427-0774  
E-mail FPVFD@ATT.NET

FORT PIKE VOLUNTEER FIRE DEPARTMENT  
(Agency Name)

**Statement of Cash Receipts and Disbursements**  
**For the Year Ended DECEMBER 31, 2019**  
(Year-End)

	General Fund	Other Fund	Total
<b>RECEIPTS (Provide Brief Description):</b>			
1. MEMBERSHIP DUES	\$ 1,630	\$ -	\$ 1,630
2. GRANTS (HARRAH'S, CITY OF NEW ORLEANS)	1,500	15,000	16,500
3. FUNDRAISING	54,286	-	54,286
4. DONATIONS	1,223	-	1,223
5. INTEREST	15	-	15
6. Total receipts (add lines 1 - 5)	<u>\$ 58,654</u>	<u>\$ 15,000</u>	<u>\$ 73,654</u>
<b>DISBURSEMENTS (Provide Brief Description):</b>			
7. FUNDRAISING EXPENSES	\$ 25,755	\$ -	\$ 25,755
8. INSURANCE	-	8,912	8,912
9. REPAIRS & MAINTENANCE (VEHICLES + BUILDING)	279	2,341	2,620
10. OPERATING EXPENSES (TELECOM, SUPPLIES)	17,535	3,462	20,997
11. PROFESSIONAL SERVICES + CHARITABLE <sup>UNIFORMS</sup> <sub>CONTRIBUTION</sub>	3,546	285	3,831
12. DEPRECIATION	22,570	-	22,570
13. Total Disbursements (add lines 7 - 12)	<u>\$ 69,685</u>	<u>\$ 15,000</u>	<u>\$ 84,685</u>
14. Change in fund balance (Lines 6 minus 13)	\$ -11,031	\$ -	\$ -11,031
15. Fund Balance at beginning of year	\$ 667,107	\$ -	\$ 667,107
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	<u>\$ 656,076</u>	<u>\$ -</u>	<u>\$ 656,076</u>

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FORT PIKE VOLUNTEER FIRE DEPARTMENT  
(Agency Name)

Balance Sheet, on DECEMBER 31, 2019  
(Year-End)

	General Fund	Other Fund	Total
<b>ASSETS</b> (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$ 57,886	\$ -	\$ 57,886
2. Investments (fair value) on hand	-	-	-
3. Office furnishings (Cost of desks, etc)	-	-	-
4. Equipment (Cost of fax machine, etc)	-	-	-
5. Other (brief description) <u>BUILDING</u>	598,291	-	598,291
6. <b>Total Assets</b> (add lines 1 - 5)	<u>\$ 656,177</u>	<u>\$ -</u>	<u>\$ 656,177</u>
<b>LIABILITIES AND FUND BALANCE</b> (at year-end):			
7. Liabilities (give brief description): <u>CREDIT CARD</u>			
8.	\$ 101	\$ -	\$ 101
9.	-	-	-
10.	-	-	-
11. <b>Total Liabilities</b> (add lines 7 - 10)	101	-	101
12. Fund balance (amount from Line 16 on Statement A)	656,076	-	656,076
13. Other	-	-	-
14. <b>Total Liabilities and Fund Balance</b> (add lines 11 - 13)	<u>\$ 656,177</u>	<u>\$ -</u>	<u>\$ 656,177</u>

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FORT PIKE VOLUNTEER FIRE DEPT. (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 DEC 31, 2019 (Year-End)

Agency Head Name and Title: KIRK JACOBS, PRESIDENT

Purpose	Dollar Amount
1. Salary	1. — 0 —
2. Benefits-insurance	2. — 0 —
3. Benefits-retirement	3. — 0 —
4. Benefits-other (describe)	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 —

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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