



2382-20

*Aldermen*  
Estelle Holemon  
Karen Logan  
Amy Malone

## Village of Gilliam

Gail Moore, *Mayor*  
12815 Main Street P.O. Box 129  
Phone 318-296-4218 Gilliamvillage@gmail.com  
GILLIAM, LOUISIANA 71029

*Chief of Police*  
Bobby Smith

*Village Clerk*  
Daliah Godfrey

September 28, 2020

Ms. Gayle Fransen  
Engagement Manager  
Office of Legislative Auditor  
1600 North Third Street  
Baton Rouge, Louisiana 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 office as of and for the year ended June 30, 2019. The statements include all funds under the control of this entity. The statements have been prepared on the cash basis of accounting.

Please advise if additional information is needed.

Sincerely,

Gail Moore  
Mayor  
Village of Gilliam

GM/dag

Enclosures

Affidavit and Revenue Certification

Village of Gilliam ENTITY NAME  
Cadde Parish  
Gilliam, LA (City), State

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, Gail Moore (enter officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of Village of Gilliam (enter entity name) as of June 30, 2020 (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, Gail Moore (officer name), who, duly sworn, deposes and says that Village of Gilliam (entity name) received \$75,000 or less in revenues and other sources for the year ended June 30, 2020, and accordingly, is not required to have an audit for the previously mentioned year.

Gail Moore  
Officer's Signature

Sworn to and subscribed before me this 28 day of September, 2020.

[Signature]  
NOTARY PUBLIC SIGNATURE & SEAL  
JUDY S. DUNN, NOTARY PUBLIC ID# 63407  
& BOSSIER PARISH, LOUISIANA  
MY COMMISSION IS FOR LIFE

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 10-21-2020

Please Complete This Section  
Officer's Name \_\_\_\_\_  
Officer's Title \_\_\_\_\_  
Address \_\_\_\_\_  
City, Zip \_\_\_\_\_  
Ph: Cell/Land \_\_\_\_\_  
E-mail \_\_\_\_\_

Village of Gilliam  
 (Agency Name)

Balance Sheet, on JUNE 30, 2020  
 (Year-End)

	General Fund	Other Fund	Total
<b>ASSETS</b> (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$51404.40	\$	\$
2. Investments (fair value) on hand			
3. Office furnishings (Cost of desks, etc)			
4. Equipment (Cost of fax machine, etc)			
5. Other (brief description)			
6. <b>Total Assets</b> (add lines 1 - 5)	<u>\$51404.40</u>	<u>\$</u>	<u>\$</u>
<b>LIABILITIES AND FUND BALANCE</b> (at year-end):			
7. Liabilities (give brief description):			
8.	\$	\$	\$
9.			
10.			
11. <b>Total Liabilities</b> (add lines 7 - 10)			
12. Fund balance (amount from Line 16 on Statement A)	51404.40		
13. Other			
14. <b>Total Liabilities and Fund Balance</b> (add lines 11 - 13)	<u>\$51404.40</u>	<u>\$</u>	<u>\$</u>

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

Village of Gilliam  
(Agency Name)

**Statement of Cash Receipts and Disbursements**  
**For the Year Ended** JUNE 30, 2020  
(Year-End)

	General Fund	Other Fund	Total
<b>RECEIPTS (Provide Brief Description):</b>			
1. Franchise Tax	\$8878.14	\$	\$
2. Library Funds	9327.00		
3. Occupational License	5554.67		
4. Rental Income	2270.00		
5. Ins. Occupational License	6401.15		
6. Total receipts (add lines 1 - 5)	<del>10146.37</del>	\$	\$
Insurance pay.	# 42,592.33		
<b>DISBURSEMENTS (Provide Brief Description):</b>			
7.	\$	\$	\$
8.			
9. SEE ATTACHED			
10.			
11.			
12.			
13. Total Disbursements (add lines 7 - 12)	<del>37,429.99</del>	\$	\$
14. Change in fund balance (Lines 6 minus 13)	\$ 5162.34	\$	\$
15. Fund Balance at beginning of year	\$46,242.06	\$	\$
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	\$51704.40	\$	\$

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**Spending by Payee**  
7/1/2019 through 6/30/2020

9/27/2020

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Payee	7/1/2019- 6/30/2020
1st Guaranty Bank	29.70
Aep-Swepeco	11,268.60
Allen Walker	1,075.00
Amy Malone	310.00
Bel-Di-Gil Water System	1,152.00
Blake Hansen	40.00
Bob's Printing	333.36
Caddo Parish Farm Bureau	36.00
Carrie Jones	400.00
CenterPoint Energy	299.04
CNA Surety	100.00
Daliah Godfrey	3,029.31
David Allen	453.08
Diane Jackson	765.00
DMR Mechanical LLC	699.29
Farm Bureau	1,213.32
Gail Moore	130.80
Gilliam Service & Supply	130.43
Heron Stevens	500.00
Johnny Walker	675.00
Louisiana City Attorney Association	40.00
Louisiana Municipal Association	125.00
Louisiana Municipal Clerks Association	125.00
Olin Jones	400.00
Postmaster	120.00
Quality Pest Control	150.00
Ranchland	332.00
Red River Crossroads Association	327.16
Rickey's Plumbing Service	125.00
Specialty Electric & Controls	925.00
Tanya Rambus	45.00
The Hartford	804.00
U.S. Postmaster	55.00
United States Treasury	686.35
Wal-Mart	30.55
Woods Roofing	10,500.00
<b>OVERALL TOTAL</b>	<b>37,429.99</b>

Village of Gilliam (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 JUNE 30, 2020 (Year-End)

Agency Head Name and Title: Gail Moore, Mayor

Purpose	Dollar Amount
1. Salary	1. - 0 -
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. - 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.)

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