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**Affidavit and Revenue Certification**

CULTURAL CROSSROADS OF MINDEN, INC

Webster Parish  
Minden, Louisiana

**ANNUAL SWORN FINANCIAL STATEMENTS AND  
CERTIFICATION OF REVENUES \$75,000 OR LESS (if applicable)**

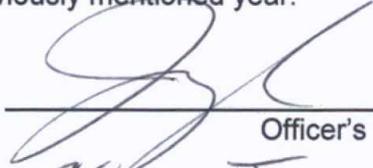
The annual sworn financial statements are *required* by Louisiana Revised Statute 24:514 to be filed with the Legislative Auditor within 90 days after the close of the fiscal year. The certification of revenues of \$75,000 or less, if applicable, is required by Louisiana Revised Statute 24:513(J)(1)(c)(i)(aa).

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Personally came and appeared before the undersigned authority, Julie Vogel, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of Cultural Crossroads of Minden, Inc. as of December 31, 2017, 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, Julie Vogel, who, duly sworn, deposes and says that Cultural Crossroads of Minden, Inc. received \$75,000 or less in revenues and other sources for the year ended December 31, 2017, and accordingly, is not required to have an audit for the previously mentioned year.

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

Sworn to and subscribed before me this 28 day of June, 2018.

  
\_\_\_\_\_  
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>JUL 25 2018</u>

Please Complete This Section
Officer's Name <u>Julie Vogel</u>
Officer's Title <u>President</u>
Address <u>712 Buchanan St</u>
City, Zip <u>Minden, 71055</u>
Ph: Cell/Land <u>(318) 286-9472</u>
E-mail <u>jvogel99@yahoo.com</u>

**CULTURAL CROSSROADS OF MINDEN, INC****Statement of Cash Receipts and Disbursements****For the Year Ended December 31, 2017**

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
<b>RECEIPTS (Provide Brief Description):</b>			
1. Contributions, gifts, grants, etc	\$ 36,837	\$ -	\$ 36,837
2. Program Service Revenue	4,115		4,115
3. Interest	219		219
4. Other Revenue	447		447
5			-
<b>6. Total receipts (add lines 1 - 5)</b>	<b>41,618</b>	<b>-</b>	<b>41,618</b>
<b>DISBURSEMENTS (Provide Brief Description):</b>			
7. (See attached Profit and Loss)	50,912	-	50,912
8			-
9			-
10			-
11			-
12			-
<b>13. Total Disbursements (add lines 7 - 12)</b>	<b>50,912</b>	<b>-</b>	<b>50,912</b>
14. Change in fund balance ( Lines 6 minus 13)	(9,294)	-	(9,294)
15. Fund Balance at beginning of year	249,382	-	249,382
16. Fund balance (deficit) at end of year (Add lines 14-15)	\$ 240,088	-	\$ 240,088
--This amount also goes on line 12, Statement B			

Cultural Crossroads of Minden, Inc.

Expense Detail

January through December 2017

Jan - Dec 17

Expense	
7002 · Bank Charges	152
7003 · Labor-independent	20,595
7005 · Depreciation	10,465
7007 · Dues & subscriptions	87
7010 · Food	822
7020 · Insurance	1,127
7023 · Reimbursement expense	3,957
7025 · Miscellaneous	(299)
7036 · Professional Fees	4,645
7040 · Rent	3,357
7042 · Repairs & maintenance	438
7045 · Supplies	2,419
7049 · Prizes/awards	250
7050 · Utilities	2,897
<b>Total Expense</b>	<b>50,912</b>

**CULTURAL CROSSROADS OF MINDEN, INC****Balance Sheet, on December 31, 2017**

	General Fund	Other Fund	Total
<b>ASSETS</b> (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$ 62,089	\$ -	\$ 62,089
2. Investments (fair value) on hand	-	-	-
3. Office furnishings (Cost of desks, etc)	-	-	-
4. Equipment (Cost of fax machine, etc)	177,032	-	177,032
5. Other prepaid insurance	1,246	-	1,246
6. <b>Total Assets</b> (add lines 1 - 5)	<b>240,367</b>	<b>-</b>	<b>240,367</b>
<b>LIABILITIES AND FUND BALANCE</b> (at year-end):			
7. Liabilities (give brief description):			
8. Accounts payable	279	-	279
9	-	-	-
10	-	-	-
11. <b>Total Liabilities</b> (add lines 7 - 10)	<b>279</b>	<b>-</b>	<b>279</b>
12. Fund balance (amount from Line 16 on Statement A)	240,088	-	240,088
13. Other	-	-	-
14. <b>Total Liabilities and Fund Balance</b> (add lines 11 - 13)	<b>\$ 240,367</b>	<b>\$ -</b>	<b>\$ 240,367</b>

**CULTURAL CROSSROADS OF MINDEN, INC**

**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

**Agency Head Name and Title: Julie Vogel, President**

<b>Purpose</b>	<b>Dollar Amount</b>
1. Salary	1.
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.\$1,847.77
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.)

**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

**Agency Head Name and Title: Chris Broussard, Past President**

<b>Purpose</b>	<b>Dollar Amount</b>
1. Salary	1.
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. \$3,288.05
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.)

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