Entity Name: West Buton Roose Transportation Arthority
Address: 880 North Alexander Port Allen, LA 70767
Telephone: 225-383-4755 Email: jeson. Manule @ wbriousi). 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 , faxing to 225-339-3986, or mailing to Louisiana Legislative Auditor — Local Government Services, P.O. Box 94397, Baton Rouge, LA 70804-9397.
AFFIDAVIT
Personally came and appeared before the undersigned authority,
(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 west but days Tours attack a Manifester
(entity's name) as of (2) (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:
Complete if Applicable: In addition, Terran March (officer's name), who duly
sworn, deposes, and says that west below forgettrusportation A sturit (entity's name) received \$75,000
or less in revenues and other sources for the year ended (entity's year-end), and
accordingly, is not required to have an audit for the previously mentioned fiscal year.
OFFICER'S SIGNATURE Suretage Tresure- OFFICER'S TITLE
OFFICER'S TITLE
Sworn to and subscribed before me, this 20 day of august, 2021
Louis W. DELAHAYE NOTARY PUBLIC SIGNATURE & SEAL TD#17940 BAR ROLL NO. 17940

Statement of Receipts and Disbursements

Statement A

*	_	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):	•	- 62	•	262
1. Tutoras r	<u>\$</u>	2-	_ \$	\$ 2
2. 3.	-		-	
3.	-		-0-	
4. 5.			—)(x	- ·
6. Total receipts (add lines 1 - 5)	\$	262	S	\$ 2 ==
DISBURSEMENTS (Provide Brief Description): 7. 8. 9.	\$	g	\$	\$ 1
10.			8 8	
11.			¥ 2	
12.		,		
13. Total Disbursements (add lines 7 - 12)	\$	Ø	\$	\$ 9
14. Change in fund balance (Lines 6 minus 13) 15. Fund Balance at beginning of year	\$,	262	\$	\$ 262 \$ 5,234 53
16. Fund balance (deficit) at end of year (Add lines 14-15)This amount also goes on line 12, Statement B	\$.	5,25714	\$	\$ 5,237 14

Idontification Danie of Accounting	If not voine Cook Donier	
Identify the Basis of Accounting	i, it not using Cash-basis.	

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.

Balance Sheet			Statement B
	General Fund	Other Fund	Total
ASSETS (balances at year-end)	طور		- 14
Cash and cash equivalents	\$ 5, 237 4	\$	\$ 5, 237 24
2. Investments (fair value)			
3. Office furnishings (Cost of desks, etc)			
4. Equipment (Cost of fax machine, etc)			
5. Other (brief description)	. (4)		14
6. Total Assets (add lines 1 - 5)	\$ 5,232 19	\$	\$ 5,23714
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (brief description):	\$	\$	\$ >
8.			
9.	100-		
10.			
11. Total Liabilities (add lines 7 - 10)	D		&
12. Fund balance (amount from Line 16 on Statement A)	5.237 14		5,23719
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$5,2371	\$	\$ 5,23714

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Rilag Berthelot Jr.

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

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.)