

Affidavit and Revenue Certification

Greater Mount Olive Missionary Baptist Church Outreach Ministry

East Baton Rouge Parish

Baton Rouge, LA

**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, Jacqueline Dixon, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of Greater Mount Olive Missionary Baptist Church Outreach Ministry as of June 30, 2019, 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, Jacqueline Dixon, (officer name), who, duly sworn, deposes and says that Greater Mount Olive Missionary Baptist Church Outreach Ministry received \$75,000 or less in revenues and other sources for the year ended June 30, 2019, and accordingly, is not required to have an audit for the previously mentioned year.

Jacqueline Dixon
Officer's Signature

Sworn to and subscribed before me this 4 day of December, 2019.

[Signature]
NOTARY PUBLIC SIGNATURE & SEAL
Tunde M. Animas haw #19287

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 12-11-2019

Please Complete This Section

Officer's Name _____
Officer's Title _____
Address _____
City, Zip _____
Ph: Cell/Land _____
E-mail _____

Greater Mount Olive Missionary Baptist Church Outreach Ministry**Statement of Cash Receipts and Disbursements
For the Year Ended June 30, 2019**

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1. LYFE Grant Funds	\$	\$ 10,000.00	\$10,000.00
2. GOHSEP		4,136.00	4,136.00
3. Transfers from affiliates	483.00		483.00
4.			
5.			
6. Total receipts (add lines 1 - 5)	\$ 483.00	\$ 14,136.00	\$14,619.00
DISBURSEMENTS (Provide Brief Description):			
7. Supplies-classroom supplies	\$	\$ 1,195.00	\$ 1,195.00
8. Professional Services -teachers & support staff		6,114.00	6,114.00
9. Indirect Costs-program coordinator		3,150.00	3,150.00
10. Bank supplies-checks	20.00		20.00
11. Transfers to affiliates	19,133.00		19,133.00
12.			
13. Total Disbursements (add lines 7 - 12)	\$ 19,153.00	\$ 10,459.00	\$29,612.00
14. Change in fund balance (Lines 6 minus 13)	\$ (18,670.00)	\$ 3,677.00	\$ (14,993.00)
15. Fund Balance at beginning of year	\$ 19,133.00	83,689	\$ 102,822
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	\$ 463.00	\$ 87,366	\$ 87,829

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

Greater Mount Olive Missionary Baptist Church
Outreach Ministry

Balance Sheet, on June 30, 2019

	General Fund	Other Fund	Total
ASSETS (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$	\$ 87,829	\$
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. Total Assets (add lines 1 - 5)	\$	\$ 87,829	\$
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)		87,829	
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$	\$ 87,829	\$

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENTS 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

Greater Mount Olive Missionary Baptist Church Outreach Ministry

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, 2019

Agency Head Name and Title: Jacqueline Dixon, Director

Purpose	Dollar Amount
1. Salary	1. 3150
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	10.998
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. 4148

☒ 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.)