

AFFIDAVIT AND REVENUE CERTIFICATION

Jefferson Davis Parish Gravity Drainage District #5

Jefferson Davis Parish  
Welsh, 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 revenue \$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, Shirley M. Hudson who, duly sworn, deposes and says that the financial statement herewith given presents fairly the financial position of the Jefferson Davis Parish Gravity Drainage District #5 as of December 31, 2019, and the results of operations for the year then ended, in accordance with the basis of accounting described within the accompanying financial statement.

In addition, Shirley M. Hudson, who duly sworn, deposes and says that the Jefferson Davis Parish Gravity Drainage District #5 received \$75,000 or less in revenues and other sources for the fiscal year ending December 31, 2019, and accordingly, is not required to have an audit for the previously mentioned fiscal year-end.

Shirley M. Hudson  
Shirley M. Hudson, Secretary

Sworn to and subscribed before me, this 12<sup>th</sup> day of February, 2020.

Allen D Crochet #69093

NOTARY PUBLIC SIGNATURE AND SEAL

Under provisions of state law, this report is a public document. A copy of the report has been submitted to the entity and other appropriate public officials. The report is available for public inspection at the Baton Rouge office of the Legislative Auditor and, where appropriate, at the office of the parish clerk of court.

Release Date FEB 26 2020

Officer: Shirley M. Hudson  
Title: Secretary  
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Welsh, LA 70591  
Telephone: 337/523-8949 (cell)  
E-mail: shirley101745@hotmail.com

**JD PARISH GRAVITY DRAINAGE DISTRICT #5**

**Profit & Loss**

**January through December 2019**

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	<u>Jan - Dec 19</u>
<b>Income</b>	
AD VALOREM TAXES	20,212.83
INTEREST INCOME/CD#40000409	783.22
INTEREST INCOME/CD#40000864	162.60
INTEREST INCOME/CD#40002142	177.79
INTEREST INCOME/JD CHECKING	92.28
<b>Total Income</b>	<u>21,428.72</u>
<b>Expense</b>	
ACCOUNTING	2,400.00
DRAINAGE WORK	1,600.00
OTHER/MISCELLANEOUS	58.81
PER DIEM	400.00
<b>Total Expense</b>	<u>4,458.81</u>
<b>Net Income</b>	<u><u>16,969.91</u></u>

JEFFERSON DAVIS GRAVITY DRAINAGE DISTRICT #5  
(Agency Name)

**Statement of Cash Receipts and Disbursements**  
**For the Year Ended** 12-31-2019  
(Year-End)

	General Fund	Other Fund	Total
<b>RECEIPTS (Provide Brief Description):</b>			
1. <u>AD VALOREM TAXES</u>	\$ <u>20212.83</u>	\$	\$
2. <u>INTEREST INCOME</u>	<u>1215.89</u>		
3.			
4.			
5.			
6. <b>Total receipts</b> (add lines 1 - 5)	<u>\$21428.72</u>	\$	<u>\$21428.72</u>
<b>DISBURSEMENTS (Provide Brief Description):</b>			
7. <u>ACCOUNTING</u>	\$ <u>2400.00</u>	\$	\$
8. <u>DRAINAGE WORK</u>	<u>1600.00</u>		
9. <u>OTHER/MISC</u>	<u>58.81</u>		
10. <u>PER DIEM</u>	<u>400.00</u>		
11.			
12.			
13. <b>Total Disbursements</b> (add lines 7 - 12)	<u>\$ 4458.81</u>	\$	\$
14. Change in fund balance (Lines 6 minus 13)	<u>\$16,969.91</u>	\$	\$
15. Fund Balance at beginning of year	<u>\$187379.88</u>	\$	\$
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	<u>\$204,349.79</u>	\$	<u>\$204,349.79</u>

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

JEFF DAVIS GRAVITY DRAINAGE DIST #5  
(Agency Name)

Balance Sheet, on 12-31-2019  
(Year-End)

	General Fund	Other Fund	Total
<b>ASSETS</b> (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$ 99968.06	\$	\$
2. Investments (fair value) on hand	104381.73		
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)	\$204349.79	\$	\$204,349.79
<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)	NA		
12. Fund balance (amount from Line 16 on Statement A)			
13. Other			
14. <b>Total Liabilities and Fund Balance</b> (add lines 11 - 13)	\$204349.79	\$	\$204,349.79

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JEFF DAVIS GRAVITY DRAINAGE DIST. #5 (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 12-31-2019 (Year-End)

Agency Head Name and Title: DAVID A. HEBERT, PRESIDENT BOD

Purpose	Dollar Amount
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. 100
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. 100

\_\_\_\_ 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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