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Affidavit and Revenue Certification

Hospital Service District No. 1
Claiborne Parish, State of Louisiana
Haynesville, Louisiana

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

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, Keith Killgore, Chairman, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of Hospital Service District No. 1, Claiborne Parish, State of Louisiana as of December 31, 2018, and the results of operations for the final six (6) months then ended, in accordance with the basis of accounting described within the accompanying financial statements.

In addition, Keith Killgore, Chairman, who, duly sworn, deposes and says that Hospital Service District No. 1, Claiborne Parish, State of Louisiana received \$75,000 or less in revenues and other sources for the final six (6) months of operations ended December 31, 2018, and accordingly, is not required to have an audit for the previously mentioned year.

Keith Killgore

Officer's Signature

Sworn to and subscribed before me this 23rd day of January, 2019.

Joyce E. Teague #7364

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 FEB 27 2019

Please Complete This Section
Officer's Name: Keith Killgore
Officer's Title: Chairman
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Bobby G. Lester, CPA

Hospital Service District No. 1
Parish of Claiborne, State of Louisiana
d/b/a North Claiborne Hospital
Hanesville, Louisiana

The accompanying prescribed Statement A, page 3, Statement of Cash Receipts and Disbursements for the final six (6) months ended December 31, 2018, Statement B, Page 4, Balance Sheet on December 31, 2018, and Statement C, Page 5, Schedule of Compensation, Benefits and Other Payments to Agency Head or Chief Executive Officer from the Louisiana Legislative Auditor's office for Hospital Service District No. 1, Claiborne Parish, State of Louisiana d/b/a North Claiborne Hospital, were not subjected to an audit, review, or compilation engagement by us and we do not express an opinion, a conclusion, nor provide any assurance on the Statements A, B, and C.

Certified Public Accountants
Alexandria, Louisiana

January 23, 2019

Hospital Service District No. 1, Claiborne Parish, State of Louisiana

Statement of Cash Receipts and Disbursements
For the Final Six (6) Months Ended
December 31, 2018

	General Fund	Proprietary Fund	Total
RECEIPTS (Provide Brief Description):			
1. Rent	\$-0-	\$27,000.	\$27,000.
2. Miscellaneous	-0-	446.	446.
3. Interest	-0-	666.	666.
4.			
5.			
6. Total receipts (add lines 1 - 5)	\$-0-	\$28,112.	\$28,112.
DISBURSEMENTS (Provide Brief Description):			
7. Salaries, payroll taxes & benefits	\$-0-	9,539.	\$9,539.
8. Maintenance & repairs	-0-	11,325.	11,325.
9. Accounting & legal	-0-	4,680.	4,680.
10. Telephone & supplies	-0-	1,208.	1,208.
11. Insurance	-0-	2,433.	2,433.
12. IGT-Cash to Claiborne HSD#3	-0-	206,711.	206,711.
13. Total Disbursements (add lines 7 - 12)	\$-0-	\$235,896	\$235,896
14. Change in fund balance (Lines 6 minus 13)	\$-0-	\$(207,784.)	\$(207,784.)
15. Fund Balance at beginning of year (Off \$2 rounding)	\$-0-	\$643,687.	\$643,687.
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	\$-0-	\$435,903.	\$435,903.

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

Hospital Service District No. 1, Claiborne Parish, State of
Louisiana

Balance Sheet, on December 31, 2018

	General Fund	Proprietary Fund	Total
ASSETS (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$-0-	\$-0-	\$-0-
2. Investments (fair value) on hand	-0-	-0-	-0-
3. Property, Plant & Equipment (PPE)	-0-	2,051,295.	2,051,295.
4. PPE Accumulated Depreciation	-0-	(1,621,396.)	(1,621,396.)
5. Other (brief description) Utility Deposit	-0-	10.	10.
6. Total Assets (add lines 1 - 5) Transfer to Claiborne HSD #3	\$-0-	\$429,909.	\$429,909.
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (give brief description):			
8.	\$-0-	\$-0-	\$-0-
9.			
10.			
11. Total Liabilities (add lines 7 - 10)	-0-	-0-	-0-
12. Fund balance (amount from Line 16 on Statement A)	-0-	435,903.	435,903.
13. Other-Elimination of prior period accruals	-0-	(5,994.)	(5,994.)
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$-0-	\$429,909	\$429,909.

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Hospital Service District No. 1, Claiborne Parish, State of Louisiana
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 Final Six (6) Months Ended December 31, 2018

Agency Head Name and Title: Keith Killgore, Chairman

Purpose	Dollar Amount
1. Salary	\$0.00
2. Benefits-insurance	\$0.00
3. Benefits-retirement	\$0.00
4. Benefits-other (describe)	\$0.00
5. Benefits-other (describe)	\$0.00
6. Benefits-other (describe)	\$0.00
7. Car allowance	\$0.00
8. Vehicle provided by government (if reported on your W-2)	\$0.00
9. Per diem	\$0.00
10. Reimbursements	\$0.00
11. Travel	\$0.00
12. Registration fees	\$0.00
13. Conference travel	\$0.00
14. Housing	\$0.00
15. Unvouchered expenses (example: travel advances, etc.)	\$0.00
16. Special meals	\$0.00
17. Other	\$0.00
18. TOTAL (enter total of line 1-17)	\$0.00

XX 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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