

Holmesville Water System, Inc.

Downsville, Union/Louisiana

TRANSMITTAL LETTER

ANNUAL FINANCIAL STATEMENTS

July 14, 2021

Ms. Gayle Fransen
Engagement Manager
Louisiana Legislative Auditor
1600 North Third Street
Baton Rouge, LA 70802

Dear Ms. Fransen:

In accordance with Louisiana Revised Statute 24:513, enclosed are the Affidavit and Revenue Certification Form and the annual financial statements for my entity, as of and for the year ended December 31, 2020. The statements include all funds under the control of this entity. The accompanying financial statements have been prepared on the cash basis of accounting.

Sincerely,



Officer's Signature

Robert Riser

Officer's Name

Enclosures

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENT 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

Affidavit and Revenue Certification

**Holmesville Water System, Inc.
Union Parish
Downsville, 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).

Personally came and appeared before the undersigned authority, **Robert Riser**, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of **Holmesville Water System, Inc.** as of **December 31, 2020**, and the results of operations for the year then ended, in accordance with the basis of accounting described within the accompanying financial statements.

9/22/2021
(Complete if applicable)

In addition, **Robert Riser**, who, duly sworn, deposes and says that **Holmesville Water System, Inc.** received \$75,000 or less in revenues and other sources for the year ended **December 31, 2020**, and accordingly, is not required to have an audit for the previously mentioned year.

Robert Riser
Officer's Signature



Sworn to and subscribed before me this 20th day of July, 2021.

Joel G. Taylor
NOTARY PUBLIC SIGNATURE & SEAL

JOEL G. TAYLOR
Notary Public
Notary ID No. 038502
Union Parish, Louisiana

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| <p align="center">For Office Use Only</p> <p>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.</p> <p>Release Date <u>9/22/2021</u></p> |
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| <p align="center">Please Complete This Section</p> <p>Officer's Name <u>Robert Riser</u> Officer's Title <u>President</u> Address <u>336 Pittman Rd</u> City, ZIP <u>Downsville LA, 71279</u> Ph: Cell/Land <u>318-982-7299</u> E-mail <u>judyriser@yahoo.com</u></p> |
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Holmesville Water System, Inc.Statement of Cash Receipts and Disbursements
For the Year Ended December 31, 2020

| | <u>General Fund</u> | <u>Other Fund</u> | <u>Total</u> |
|--|-------------------------|-----------------------|---------------------|
| RECEIPTS (Provide Brief Description): | | | |
| 1. Water Charges | \$ 452,412 | \$ - | \$ 452,412 |
| 2. Meter Installs | 19,050 | - | 19,050 |
| 3. Grant – LDHH Loan Forgiveness | 26,258 | - | 26,258 |
| 4. Interest Income | 399 | - | 399 |
| 5. | - | - | - |
| 6. Total receipts (add lines 1 - 5) | <u>\$ 498,119</u> | <u>\$ -</u> | <u>\$ 498,119</u> |
| DISBURSEMENTS (Provide Brief Description): | | | |
| 7. Personnel Costs | \$ - | \$ - | \$ - |
| 8. Contracted Services | 124,430 | - | 124,430 |
| 9. Operating Expenses | 109,509 | - | 109,509 |
| 10. Interest Expense | 54,115 | - | 54,115 |
| 11. Utilities | 34,739 | - | 34,739 |
| 12. Supplies and Equipment | 45,918 | - | 45,918 |
| 13. Total Disbursements (add lines 7 - 12) | <u>\$ 368,711</u> | <u>\$ -</u> | <u>\$ 368,711</u> |
| 14. Change in fund balance (Lines 6 minus 13) | \$ 129,408 | \$ - | \$ 129,408 |
| 15. Fund Balance at beginning of year | \$ 1,296,162 | \$ - | \$ 1,296,162 |
| 16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B | <u>\$ 1,425,570</u> | <u>\$ -</u> | <u>\$ 1,425,570</u> |

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

Holmesville Water System, Inc**Balance Sheet, on December 31, 2020**

| | <u>General Fund</u> | <u>Other Fund</u> | <u>Total</u> |
|---|-------------------------|-----------------------|---------------------|
| ASSETS (balances at year-end) -Give brief description: | | | |
| 1. Cash and cash equivalents on hand | \$ 574,720 | \$ - | \$ 574,720 |
| 2. Investments (fair value) - Certificates of Deposit | 25,237 | - | 25,237 |
| 3. Equipment (Cost of fax machine, etc) | 3,071 | - | 3,071 |
| 4. Water System/Land | 3,689,394 | - | 3,689,394 |
| 5. Accumulated Depreciation | (1,016,942) | - | (1,016,942) |
| 6. Total Assets (add lines 1 - 5) | <u>\$ 3,275,480</u> | <u>\$ -</u> | <u>\$ 3,275,480</u> |
| LIABILITIES AND FUND BALANCE (at year-end): | | | |
| 7. Liabilities (give brief description): | | | |
| 8. Meter Deposits | \$ 39,200 | \$ - | \$ 39,200 |
| 9. Notes Payable | 1,810,710 | - | 1,810,710 |
| 10. | - | - | - |
| 11. Total Liabilities (add lines 7 - 10) | 1,849,910 | - | 1,849,910 |
| 12. Fund balance (amount from Line 16 on Statement A) | 1,425,570 | - | 1,425,570 |
| 13. Other | - | - | - |
| 14. Total Liabilities and Fund Balance (add lines 11 - 13) | <u>\$ 3,275,840</u> | <u>\$ -</u> | <u>\$ 3,275,840</u> |

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

Holmesville Water System 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, 2020

Agency Head Name and Title: Robert Riser, President

| 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. |
| 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. |

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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