Pointe Coupee Parish Poydras Fund	(Entity Name)
New Roads Pointe Coupee, LA	(City, Parish/State)

TRANSMITTAL LETTER

ANNUAL FINANCIAL STATEMENTS

(Date) March 3, 2020

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 <u>December 31, 2019</u> (entity's year-end). 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

Tephen T. Day d, you

Officer's Name, Title

Enclosures

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

Affidavit and Revenue Certification

Officer's Title _______

Ph; Cell/Land

Pointe CouperParish Poydras F. Pointe Couper No. 1800-16 14	fundENTITY NAME			
Pointe Course	Parish			
New Roads, LA	(City), State			
ANNUAL SWORN FINANCIAL STATEMENTS AND CERTIFICATION OF REVENUES \$75,000 OR LESS (i	if applicable)			
	Louisiana Revised Statute 24:514 to be filed with the fiscal year. The certification of revenues of \$75,000 or tute 24:513(J)(1)(c)(i)(aa).			
Personally came and appeared before the undersigned	d authority. Stephen P. David			
airly the financial position of Pointe Course Vars	(enter entity name) as of and the results of operations for the year then ended, in			
accordance with the basis of accounting described with	in the accompanying infancial statements.			
ounte Coupentarish found Funct (entity nan	officer name), who, duly sworn, deposes and says that ne) received \$75,000 or less in revenues and other, and accordingly, is not required to have an audit for			
Seph	Officers Signature			
Sworn to and subscribed before me this 3 ¹⁴ day of <u>MARCH</u> , 2020.				
Paticia 7 Jarreau NOTARY PUBLIC/SIGNATURE & SEAL #017386				
For Office Use Only	Please Complete This Section			
Inder provisions of state law, this report will become a public document on the	Officer's Name			

Address

City, Zip____

E-mail _

Rouge office of the Louisiana Legislative Auditor and, where appropriate, at the

8/5/2020

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

office of the parish clerk of court.

Release Date _

Pante Louseelan (Agency Name)	sh lovetrus Fund	
(Agency Name)	1	

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

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):	\$89 63 .28	\$	\$8963,2B
<u>1.</u> <u>2.</u>		- Ψ	
3. 4. 5.			
5. 6. Total receipts (add lines 1 - 5)	\$6963.28	\$	\$8163.2B
DISBURSEMENTS (Provide Brief Description):	. 44-4 . 4		. 4104 40
7. Commissioner's Pay	\$2696.23	<u> </u>	\$2696.23
8. Scholarships	1500.00		1500,00
9. Pointe Course Historical Society	1253.40	<u> </u>	<u> 1353.40</u>
10. Property Toxes	60,90		60.90
11. All other	388.60		388.60
13. Total Disbursements (add lines 7 - 12)	\$5899.13	\$	\$5899.13
14. Change in fund balance (Lines 6 minus 13)	\$3064.15	\$	\$ 3064.15
15. Fund Balance at beginning of year	\$492,261,16	\$	\$492,261.16
16. Fund balance (deficit) at end of year (Add lines 14-15)	• –		
This amount also goes on line 12, Statement B	\$495,325.31		\$49 <i>5,315.31</i>

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

Pointe Coupee Parish Poydras Fund
(Agency Name)

Balance Sheet, on December 31, 2019

(Year-End)

	General Fund	Other Fund	Total
ASSETS (balances at year-end) -Give brief description:	\$492,794.1 6	œ	e40 9 n a.()
Cash and cash equivalents on hand Investments (fair value) on hand		. <u>\$</u>	\$492,794.16
Office furnishings (Cost of desks, etc)	3,884.50		3854.50
4. Equipment (Cost of fax machine, etc)		·	
5. Other (brief description)		 -	
6. Total Assets (add lines 1 - 5)	\$496,478.66	\$	\$496,678.66
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (give brief description):			
8.	\$ -0-	\$	\$ - O-
9.	·	· <u> </u>	
10.			
11. Total Liabilities (add lines 7 - 10)	-D-		-0-
12. Fund balance (amount from Line 16 on Statement A)			
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$496,478.66	\$	\$496,678.66

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

Par	ate Co	udee Parish	Poveras Fund	(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 December 31, 2019 (Year-End)

Agency Head Name and Title: Stephen P. David, Commissioner

Purpose	Dollar Amount
1. Salary	1 2696.23
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 Office Expenses	17. 50.00
18. TOTAL (enter total of line 1-17)	18.2146.23

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.)