LES	CHRETIENS	INC.	(Entity Name)
ERATH	VERMILION	LA	(City, Parish/State)

TRANSMITTAL LETTER

ANNUAL FINANCIAL STATEMENTS

RECEIVED

APR 0 7 2021

LEGISLATIVE AUDITOR

(Date) 4-05-2021

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 (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

BONNIE BROUSSARD PRESIDENT

Officer's Name, Title

Enclosures

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

## **Affidavit and Revenue Certification**

LES CHRETIENS, INC. ENTITY NAME

VERMILION	Parish			
ERATH LA	(City), State			
ANNUAL SWORN FINANCIAL STATEMENTS AND CERTIFICATION OF REVENUES \$75,000 OR LESS (if	applicable)			
The annual sworn financial statements are required by Legislative Auditor within 90 days after the close of the filess, if applicable, is required by Louisiana Revised Statu	scal year. The certification of revenues of \$75,000 or			
Personally came and appeared before the undersigned (enter officer name), who, duly sworn, deposes and says fairly the financial position of LES CHRETIENS DECEMBER 31, 2020 (entity's year-end), as accordance with the basis of accounting described within	s that the financial statements herewith given present (enter entity name) as of and the results of operations for the year then ended, in			
(Complete if applicable) In addition, BONNIE BROUSSARD, (off LES CHRETIENS, TNC. (entity name sources for the year ended DECEMBER 31, 2020 the previously mentioned year.	) received \$75,000 or less in revenues and other			
Bonne Bronsaud Officer's Signature				
Sworn to and subscribed before me this $\frac{3^{1/2}}{2^{1/2}}$ day of $\frac{3^{1/2}}{2^{1/2}}$	ril , 2021.			
NOTARY PUBLIC SIGNATURE & SEAL Notary Public Republic Parish, La				
For Office Use Only	Please Complete This Section			
Under provisions of state law, this report will become a public document on the	Officer's Name BONNIE BROUSSARD			
Monday following the release date. A copy of the report will be submitted to	Officer's Title PRESIDENT			
appropriate public officials and be available for public inspection at the Baton	Address 4923 ARISTIDE ROAD			
Rouge office of the Louisiana Legislative Auditor and, where appropriate, at the	City, Zip ERATH LA 70533			
office of the parish clerk of court.  Release Date 05-05-2021	Ph: Cell/Land (331) 937-5697 E-mail BBBROUSSRRD@PRODIGY.NET			

LES CHRETTENS, INC

(Agency Name)

Statement of Cash Receipts and Disbursements
For the Year Ended DECEMBER 31, 2020
(Year-End)

		General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):  1. STATE APPROPRIATIONS	\$	7.504	\$	\$ 7,504
2. BAKE SALE	<u> </u>	1,189		1,189
3. 4. 5.	_			
5. 6. Total receipts (add lines 1 - 5)	•	8,693	\$	\$8,693
	Ψ	0,612	Ψ	40,010
DISBURSEMENTS (Provide Brief Description):	\$	980	\$	\$ 980
8. MOWING	<u> </u>	3,955		3,955
9. PROPERTY 10. REPAIRS	_	3,111		3.111
11. UTILITIES		133		133
12. 13. Total Disbursements (add lines 7 - 12)	\$	8,186	\$	\$8,186
14. Change in fund balance (Lines 6 minus 13)	\$	507	\$	\$ 507
<ul><li>15. Fund Balance at beginning of year</li><li>16. Fund balance (deficit) at end of year (Add lines 14-15)</li></ul>	\$	123,979	\$	\$123,979
-This amount also goes on line 12, Statement B	\$	124,486	\$	\$124,486

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

LES CHRETIENSK INC

(Agency Name)

Balance Sheet, on DECEMBER 31, 2020 (Year-End)

General Fund	Other Fund	Total
\$ 11,666	\$	\$ 11,666
	Dia.	
112 820		112,820
\$ 124 486	\$	\$124,486
\$	\$	_ \$
124,486		124 486
\$124,486	\$	\$124.486
	Fund \$ 11,666 112,820 \$ 124,486 \$	Fund Fund  \$ 11,666 \$  112,820  \$ 124,486 \$

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LES	CH	RET	IENS	INC
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(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 3, 2020 (Year-End)

Agency Head Name and Title: BONNIE BROUSSARD PRESIDENT

Purpose	Dollar Amount
1. Salary	1.
2. Benefits-insurance	2.
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.)