Rayne City Marshal

(Entity Name)

Rayne, Acadia/Louisiana (City, Parish/State)

TRANSMITTAL LETTER

ANNUAL FINANCIAL STATEMENTS

(Date) October 6, 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 <u>September 30, 2021</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 Slanature

alex Joe Ja Crang Alex Joe Lacroix

Officer's Name

Enclosures

Mora L Folier #000 876 notary Public

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

Rayne City Marsal ENTITY NAME Acadia Parish

Rayne, Louisiana (City), State

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, <u>Alex Lacroix</u> (enter officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of <u>Rayne City Marshal</u> (enter entity name) as of <u>September 31, 2021</u> (entity's year-end), and the results of operations for the year then ended, in accordance with the basis of accounting described within the accompanying financial statements.

(Complete if applicable)

In addition, <u>Alex Lacroix</u>, (officer name), who, duly sworn, deposes and says that <u>Rayne City Marshal</u> (entity name) received \$75,000 or less in revenues and other sources for the year ended <u>September 30, 2021</u>, and accordingly, is not required to have an audit for the previously mentioned year.

<u>Elly for the Charge</u> Officer's Signature

Sworn to and subscribed before me this 10-day of Ottober, 20 21

#100876

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 10-20-2021

Officer's Name Alex Joe Lacroix
Officer's Title Rayne City Marshal
Address P.O. Box 31
City, Zip Rayne, LA 70578
Ph: Cell/Land (H)337-334-5566 (W)337-334-2112
E-mail ibs7514@gmail.com

Please Complete This Section

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

Statement A Page 3

Rayne City Marshal

(Agency Name)

Statement of Cash Receipts and Disbursements

For the Year Ended <u>9/30/2021</u> (Year-End)

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1.Service Fees	\$ 14,078.21	\$	\$14,078.21
2.			
3.			
4.			
5.	· · · · · · · · · · · · · · · · · · ·		
6. Total receipts (add lines 1 - 5)	\$ 14,078.21	\$	\$14,078.21
DISBURSEMENTS (Provide Brief Description): 7. Please see attached Note 1 8. 9.	\$21,961.01	\$	\$21,961.01
10.			
11.			
12.			
13. Total Disbursements (add lines 7 - 12)	\$21,961.01	\$	\$21,961.01
14. Change in fund balance (Lines 6 minus 13)	\$ -7,882.80	\$	\$-7,882.80
15. Fund Balance at beginning of year	\$70,377.51	\$	\$70,337.51
16. Fund balance (deficit) at end of year (Add lines 14-15) This amount also goes on line 12, Statement B	\$62,454.71	\$	\$62,454.71

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Statement B Page 4

Rayne City Marshal

(Agency Name)

Balance Sheet, on September 30, 2021 (Year-End)

ASSETS (balances at year-end) -Give brief description: \$17,271.21 \$74,332.44 \$91,603.65 2. Investments (fair value) on hand \$17,271.21 \$74,332.44 \$91,603.65 3. Office furnishings (Cost of desks, etc)		General Fund	Other Fund	Total
2. Investments (fair value) on hand 3. Office furnishings (Cost of desks, etc) 4. Equipment (Cost of fax machine, etc) 5. Other (brief description) Accounts Receivable 6. Tot a Assets (add lines 1 - 5) \$17,961.30 \$74,332.44 \$92,293.74 LI ABI LI TI E \$ND FUND BALANCE (at year-end): 7. Liabilities (give brief description): 8. 9. 10. 11. Total Liabilities (add lines 7 - 10) 12. Fund balance (amount from Line 16 on Statement A) 62,451.71 13. Other		¢17 071 01	\$74 222 AA	¢01 602 65
3. Office furnishings (Cost of desks, etc) 4. Equipment (Cost of fax machine, etc) 5. Other (brief description) Accounts Receivable 6. Tot #Assets (add lines 1 - 5) \$17,961.30 \$74,332.44 \$92,293.74 LI ABI LI TI E\$ND FUND BALANCE (at year-end): 7. Liabilities (give brief description): 8. 9. 10. 11. Total Liabilities (add lines 7 - 10) 12. Fund balance (amount from Line 16 on Statement A) 62,451.71 13. Other		φ17,271.21	0/4,332.44	\$91,003.05
4. Equipment (Cost of fax machine, etc) 690.09 5. Other (brief description) Accounts Receivable 690.09 6. Tot #Assets (add lines 1 - 5) \$17,961.30 LI ABI LI TI E\$ND FUND BALANCE (at year-end): 7. Liabilities (give brief description): 8. \$ 9.				
5. Other (brief description) Accounts Receivable 690.09 690.09 6. Tot & Assets (add lines 1 - 5) \$17,961.30 \$74,332.44 \$92,293.74 LI ABI LI TI E&ND FUND BALANCE (at year-end): 7. Liabilities (give brief description): \$ \$ \$ 8. 9. 9. 9. 9. 9. 9. 9. 10. 11. Total Liabilities (add lines 7 - 10) 5 \$ \$ \$ 12. Fund balance (amount from Line 16 on Statement A) 62,451.71 62,451.71 62,451.71 13. Other 29,842.03 29,872.03 29,872.03				
6. Tot &Assets (add lines 1 - 5) \$17,961.30 \$74,332.44 \$92,293.74 LI ABI LI TI E&ND FUND BALANCE (at year-end): 7. Liabilities (give brief description): \$ \$ \$ 8. \$ \$ \$ \$ \$ \$ 9. 10. 11. Total Liabilities (add lines 7 - 10) - - - 12. Fund balance (amount from Line 16 on Statement A) 62,451.71 62,451.71 62,451.71 13. Other 29,842.03 29,872.03 29,872.03		690.09		690.09
7. Liabilities (give brief description): 8. \$ 9.			\$74,332.44	
8. \$ \$ \$ 9. 10. - - 10. - - - 11. Total Liabilities (add lines 7 - 10) - - - 12. Fund balance (amount from Line 16 on Statement A) 62,451.71 62,451.71 62,451.71 13. Other 29,842.03 29,872.03 29,872.03				
10. 11. Total Liabilities (add lines 7 - 10) 12. Fund balance (amount from Line 16 on Statement A) 62,451.71 13. Other 29,842.03 29,872.03		\$	\$	\$
11. Total Liabilities (add lines 7 - 10) 12. Fund balance (amount from Line 16 on Statement A) 62,451.71 13. Other 29,842.03	9.			
12. Fund balance (amount from Line 16 on Statement A) 62,451.71 62,451.71 13. Other 29,842.03 29,872.03	10.			
13. Other 29,842.03 29,872.03	11. Total Liabilities (add lines 7 - 10)			
	12. Fund balance (amount from Line 16 on Statement A)	62,451.71		62,451.71
14. Total Liabilities and Fund Balance (add lines 11 - 13) \$ 92,293.74 \$ \$92,293.74	L			29,872.03
	14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 92,293.74	\$	\$92,293.74

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Rayne City Marshal

(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 September 30, 2021 (Year-End)

Agency Head Name and Title: Alex Joe Lacroix, Rayne City Marshal

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. 793.47	
8. Vehicle provided by government (if reported on your W-2)	8.	
9. Per diem	9.	
10. Reimbursements	10. 1,571.36	
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. 2,634.83	

_____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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