

Affidavit and Revenue Certification

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Southern Rep Theatre ENTITY NAME
Orleans Parish
New Orleans, 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 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, AIMEE HAYES (enter officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of SOUTHERN REP THEATRE (enter entity name) as of 6/30/2019 (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, AIMEE HAYES (officer name), who, duly sworn, deposes and says that SOUTHERN REP THEATRE (entity name) received \$75,000 or less in revenues and other sources for the year ended FY19 (6/30/19) and accordingly, is not required to have an audit for the previously mentioned year.

[Handwritten Signature]
Officer's Signature

Sworn to and subscribed before me this 8 day of October, 2019.

[Handwritten Signature]
NOTARY PUBLIC SIGNATURE & SEAL

 CHRISTIAN FICHTENKORT
Notary Public # 138566
State of Louisiana
Commissioned for Life

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 <u>10-16-2019</u>

Please Complete This Section
Officer's Name <u>AIMEE HAYES</u>
Officer's Title <u>PRODUCING ARTISTIC DIRECTOR</u>
Address <u>4079 CLEMATIS 2514 BAYOU</u>
City, Zip <u>NO LA 70119</u>
Ph: Cell/Land <u>504 453 6581</u>
E-mail <u>AHAYES@SOUTHERNREP.COM</u>

SOUTHERN REP

(Agency Name)

Statement of Cash Receipts and Disbursements

For the Year Ended 6/30/17

(Year-End)

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1. <u>LA DIVISION OF THE ARTS</u>	\$	\$ 9,000	\$ 9,000
2.			
3.			
4.			
5.			
6. Total receipts (add lines 1 - 5)	\$	\$	\$
DISBURSEMENTS (Provide Brief Description):			
7. <u>PEL HUGHES PRINTING</u>	\$	\$ 4500	\$
8. <u>ARTISTIC SERVICES (FOR PLAYS-</u>		4500	
9. <u>DESIGNER, DIRECTOR, WRITER)</u>			
10.			
11.			
12.			
13. Total Disbursements (add lines 7 - 12)	\$	\$ 9,000	\$ 9,000
14. Change in fund balance (Lines 6 minus 13)	\$	\$	\$
15. Fund Balance at beginning of year	\$	\$	\$
16. Fund balance (deficit) at end of year (Add lines 14-15)	\$	\$	\$
--This amount also goes on line 12, Statement B	\$	\$	\$

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

SOUTHWESTERN REPURPOSE
(Agency Name)

Balance Sheet, on 6/30/2019
(Year-End)

	General Fund	Other Fund	Total
ASSETS (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$	\$	\$ 68,764
2. Investments (fair value) on hand			
3. Office furnishings (Cost of desks, etc)			49,197
4. Equipment (Cost of fax machine, etc)			2327
5. Other (brief description) <u>LEASEHOLD IMPROVEMENTS</u>			213,461
6. Total Assets (add lines 1 - 5)	\$	\$	\$ 333,748
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (give brief description):			
8. <u>ACCTS PAYABLE</u>	\$	\$	\$ 53,831
9. <u>OTHER LIABILITIES</u>			37,104
10. <u>LINE OF CREDIT</u>			383,393
11. Total Liabilities (add lines 7 - 10)			474,328
12. Fund balance (amount from Line 16 on Statement A)			
13. Other <u>TOTAL EQUITY</u>			-140,580
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$	\$	\$ 333,748

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Southern Pop Theatre (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 6/30/2019 (Year-End)

Agency Head Name and Title: Amel Hays, Producing Artistic Director

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.)

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