PROFES SIGNAL SPECIALTHE (Entity Name) BATION ROUGE EAST INTOW ROUGE, LOUISINGE IT, Parish/State)

TRANSMITTAL LETTER

ANNUAL FINANCIAL STATEMENTS

(Date) 3/24/2020

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 ___/2/3//15 (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

Officer's Name, Title

Enclosures

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

Affidavit and Revenue Certification

| PROFESSIONAL | SPECIALTIES | | _ ENTITY NAME |
|---|---|---|--|
| | EAST BATON RO | Leg E Parish | |
| | BATICU ROUGE LA | _(City), State | |
| ANNUAL SWORN FINANCIAL STATE CERTIFICATION OF REVENUES \$7 | | oplicable) | |
| The annual sworn financial statemer Legislative Auditor within 90 days aft less, if applicable, is required by Loui | er the close of the fisc | cal year. The certification | 24:514 to be filed with the on of revenues of \$75,000 or |
| Personally came and appeared befo (enter officer name), who, duly swon fairly the financial position of PRIZELLES (case) | n, deposes and says OFES STONAL SAG entity's year-end), and | that the financial statem CTALTIES I the results of operation | _(enter entity name) as of s for the year then ended, in |
| (Complete if applicable) In addition, NAMACO LCCO **ESSTEMAL SPECIALTES** sources for the year ended 12/3//2 the previously mentioned year. | (entity_name) | received \$75,000 or le | orn, deposes and says that ess in revenues and other required to have an audit for |
| Sworn to and subscribed before me t | his 24 day of MA | mff fficer's Signature RCH , 2020. | |
| | TARY PUBLIC SIGNA JACK IN. DAM | TURE & SEAL 105 13AR#4481 | |
| For Office Use Only | | Please Comp | olete This Section |
| Under provisions of state law, this report will become a put | | Officer's Name DONAL | |
| Monday following the release date. A copy of the report will appropriate public officials and be available for public inspections. | | Officer's Title Address /232 | S ACADIAN THWY |

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

office of the parish clerk of court.

Release Date ____

City, Zip <u>BR LA 70806</u> Ph: Cell/Land 225-413-7203

E-mail donald Luther Ocox. net

70806

| Apri | E | SSIONAL | JAECT | KIZ | <u> </u> | |
|---------|----|---------|-------|---------|----------|---|
| (Agency | Na | me) | | | | |
| | | 40 1 5 | | d Diabo | - | _ |

Statement of Cash Receipts and Disbursements
For the Year Ended 12/3/2017
(Year-End)

| | General Fund | Other <u>Fund</u> | Total |
|--|---------------------|----------------------|-------------------|
| RECEIPTS (Provide Brief Description): | _ | | |
| 1. SOL CHECK # 0000369455 2/22/19 | \$ 5986.50 | <u>\$</u> | <u> \$5986.50</u> |
| 2. 3. | | | |
| 4. | | | |
| 5. | | - | |
| 6. Total receipts (add lines 1 - 5) | \$ 5986.50 | \$ | \$5986.50 |
| DISBURSEMENTS (Provide Brief Description): 7. AMKO FENCE BALANCE FOR FENCE 8. 9. | \$5986.50 | \$ | \$ 5986.50 |
| 10. | | | |
| 11. | | <u> </u> | |
| 12. | ¢ 5007 = | <u> </u> | 0.500 |
| 13. Total Disbursements (add lines 7 - 12) | \$ 5986.50 | <u>\$</u> | <u>\$5986.50</u> |
| 14. Change in fund balance (Lines 6 minus 13) 15. Fund Balance at beginning of year | \$ <u>0</u> \$ 0 | \$ \$ | \$ <u>0</u> |
| 16. Fund balance (deficit) at end of year (Add lines 14-15)This amount also goes on line 12, Statement B | \$ | \$ | \$ |

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| (Teal-Life) | | | | | | |
|--|-------------|-----------------|---------------|---------------|-------------|-------------|
| | | General Fund | | Other Fund | | Total |
| ASSETS (balances at year-end) -Give brief description: 1. Cash and cash equivalents on hand | \$ | | \$ | | \$ | 0 |
| 2. Investments (fair value) on hand | | | | | | 0 |
| 3. Office furnishings (Cost of desks, etc) | | | | | | <u>Q</u> |
| 4. Equipment (Cost of fax machine, etc) | | | - | | | <u> </u> |
| 5. Other (brief description) TOTAL FOR FENCE | | | # 5° | 1,865 NB | . ~ | 9,8650 |
| 6. Total Assets (add lines 1 - 5) | . <u>\$</u> | | <u> </u> | | <u> \$3</u> | 9,805 |
| LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (give brief description): 8. 9. | \$ | 0 | \$_ | 0 | . <u>\$</u> | 0_ |
| 10. | | | | | | |
| 11. Total Liabilities (add lines 7 - 10) | | 0 | - | 0 | | 0 |
| 12. Fund balance (amount from Line 16 on Statement A) | | | | | | |
| 13. Other | | | | | | |
| 14. Total Liabilities and Fund Balance (add lines 11 - 13) | \$_ | 0 | \$ | 0 | \$ < | \supset |

PROFESSIONAL SPECIALTIES

Balance Sheet, on 12/31/2019

(Agency Name)

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

(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 12/2/12019 (Year-End)

Agency Head Name and Title: DOWALD A. LUTHER JR DIRECTOR

| Purpose | Dollar Amount | | | |
|---|-------------------|--|--|--|
| 1. Salary | 1. Q - | | | |
| 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. <i>😝</i> | | | |
| 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.)