Affidavit and Revenue Certification

Madison Parish Tourism Commission Madison Parish Tallulah, Louisiana

### 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>Albertine Johnson</u>, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of the Madison Parish Tourism Commission as of December 31, 2019, 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>Albertine Johnson</u>, who, duly sworn, deposes and says that the Madison Parish Toursim Commission received \$75,000 or less in revenues and other sources for the year ended <u>December 31, 2019</u>, and accordingly, is not required to have an audit for the previously mentioned year.

Whenline (. Officer's Signature

day of Ebruary

Sworn to and subscribed before me this  $14^{\text{H}}$ 

NOTARY PUBLIC SIGNATURE



#### 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 MAR 0 4 2020

Please Complete This Section Officer's Name <u>Albertine Johnson</u> Officer's Title <u>Director</u> Address <u>305 Dabney St</u> City, Zip <u>Tallulah, LA 71282</u> Ph: Cell/Land <u>318-574-8519</u> E-mail

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

# Madison Parish Tourism Commission

# Statement of Cash Receipts and Disbursements For the Year Ended <u>December 31, 2019</u>

		General Fund	Other Fund		Total
RECEIPTS (Provide Brief Description):					
1. Police Jury	\$	20,800	\$	\$	20,800
2. Hotel/Motel Bed Tax		19,780			19,780
3. Teddy Bear Festival		314			314
4.					
5.					
6. Total receipts (add lines 1 - 5)	\$	40,894	\$	\$	40,894
DISBURSEMENTS (Provide Brief Description):					
7. Salaries and wages	\$	30,000	\$	\$	30,000
8. Advertising		110			100
9. Office		384			384
10. Dues		1,088			1,088
11. Professional fees		750			750
12. Payroll tax		2,295			2,295
13. Telephone/utilities		944			944
14. Teddy Bear Festival		3,969			3,969
15. Total Disbursements (add lines 7 - 14)	\$	39,540	\$	\$	39,540
16. Change in fund balance (Lines 6 minus 13)	\$	1,354	\$	\$	1,354
17. Fund Balance at beginning of year	\$	61,871	\$	\$	61,871
18. Fund balance (deficit) at end of year (Add lines 14-15)	Ψ	01,071	Ψ	Ψ	01,011
This amount also goes on line 12, Statement B	\$	63,225	\$	\$	63,225

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

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Statement B Page 4

# Madison Parish Tourism Commission

# Balance Sheet, on December 31, 2019

	 General Fund	 Other Fund	 Total
ASSETS (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$ 64,870	\$	\$ 64,870
2. Investments (fair value) on hand	 		 
3. Office furnishings (Cost of desks, etc)	 	 	 
4. Equipment (Cost of fax machine, etc)	 	 	 
5. Other (brief description)			
6. Total Assets (add lines 1 - 5)	\$ 64,870	\$	\$ 64,870
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (give brief description):			
8. Payroll liabilities	\$ 1,645	\$	\$ 1,645
9.		 	 
10.	 	 	 
11. Total Liabilities (add lines 7 - 10)	1,645		1,645
12. Fund balance (amount from Line 16 on Statement A)	63,225		63,225
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 64,870	\$	\$ 64,870

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#### Madison Parish Tourism Commission

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

Agency Head Name and Title: Albertine Johnson, Director

Purpose		<b>Dollar Amount</b>		
1. Salary	1.	30,000		
2. Benefits-insurance	2.			
3. Benefits-retirement	3.			
4. Benefits-other – social security, medicare	4.	2,295		
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.	32,295		

\_\_\_\_ 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