Entity Name: IBERIA CRIME STOPPERS INC.

Address: P O BOX 11235, NEW IBERIA, LA 70562-1235

Telephone: (337) 364-8477 (TIPS line)

(337) 321-4289 (Treasurer's direct work line)

Email: Klesenno @ CFIRSTBANK. COM

This annual sworn financial statement is required to be filed with the Legislative Auditor within 90 days of the end of the entity's fiscal year by sending a pdf copy by email to ereports@lla.la.gov, faxing to 225-339-3986, or mailing to Louisiana Legislative Auditor - Local Government Services, P.O. Box 94397, Baton Rouge, LA 70804-9397.

AFFIDAVIT

Personally came and appeared before the undersigned authority, Kenneth P. LeJeune, who, duly sworn, deposes and says that the financial statements herewith given present fairly, in all material respects, the financial position of IBERIA CRIME STOPPERS INC. as of December 31, 2021 and the results of operations for the year then ended, in accordance with the basis of accounting described within the accompanying financial statements; that the entity has maintained a system of internal control structure sufficient to safeguard assets and comply with laws and regulations; and that the entity has complied with all laws and regulations, except as follows:

Complete if Applicable: In addition, Kenneth P. LeJeune, who duly sworn, deposes, and says that IBERIA CRIME STOPPERS INC. received \$75,000 or less in revenues and other sources for the year ended December 31, 2021, and accordingly, is not required to have an audit for the previously mentioned fiscal

year.

OFFICER'S SIGNATURE

Sworn to and subscribed before me, this 29 day of March

ARY PUBLIC SIGNATURE & SEAL

LUCAS MENARD Notary Public State of Louisiana Notary ID # 145568 Lafayette Parish

Entity Name: IBERIA CRIME STOPPERS INC.

Fiscal Year End: December 31, 2021

Statement of Receipts and Disbursements

Statement A

	General Fund		Other Fund	Total	
RECEIPTS (Provide Brief Description):	œ.	0.200	œ.	\$	0.200
1. ACT 50 receipts	\$	9,308	φ	_ φ	9,308
2.Unclaimed rewards/tips		4,076			4,076
3.					
<u>4.</u> 5.					
6. Total receipts (add lines 1 - 5)	\$	13,384	\$	\$	13,384
DISBURSEMENTS (Provide Brief Description): 7. Crime scene information software	\$	2,197	\$	\$	2,197
8. Rewards and Tips	· -	5,350	<u> </u>	_ -	5,350
9. CrimeStopper (Navigate 360) annual fee		1,800			1,800
10.Signs		316			316
11.Subscription – Crime stopper USA		200			200
12.					
13. Total Disbursements (add lines 7 - 12)	\$	9,863	\$	\$	9,863
14. Change in fund balance (Lines 6 minus 13)	\$	3,521	\$	\$	3,521
15. Fund Balance at beginning of year	\$	25,288	\$	\$	25,288
16. Fund balance (deficit) at end of year (Add lines 14-15)	100				· · · · · · · · · · · · · · · · · · ·
This amount also goes on line 12, Statement B	\$	28,809	\$	_ \$_	28,809

Identify the Basis of Accounting, if not using Cash-Basis:

NOTE: If the entity receives any funds from pre- or post-adjudication court costs, fines, and/or fees, the entity must use one or more of the following categories in the receipts description fields: Civil Fees; Bond Fees; Asset Forfeiture/Sale; Pre-Trial Diversion Program; Criminal Court Costs/Fees; Criminal Contempt Fines; Other Criminal Fines; Restitution; and Probation/Parole/Supervision Fees.

Entity Name: IBERIA CRIME STOPPERS INC. Fiscal Year End: <u>December 31, 2021</u>

Balance Sheet					State	ment B
	General Fund				Total	
ASSETS (balances at year-end)						
Cash and cash equivalents	\$	28,809	\$		\$	28,809
Investments (fair value)						
Office furnishings (Cost of desks, etc)				= 14		
Equipment (Cost of fax machine, etc)						
5. Other (brief description)						
6. Total Assets (add lines 1 - 5)	\$	28,809	\$		_ \$	28,809
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description):	\$		\$		\$	
8.						
9.						
10.	5.A		-			
11. Total Liabilities (add lines 7 - 10)		0				0
12. Fund balance (amount from Line 16 on Statement A)		28,809				28,809
13. Other	•	00.000	•			00.000
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$	28,809	\$		\$	28,809

Entity Name: IBERIA CRIME STOPPERS INC. Fiscal Year End: <u>December 31, 2021</u>

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Lee Tatford, President

Purpose	Dollar Amount			
1. Salary	1. Zero			
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. Zero			

______ 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.)