

Sworn Financial Statements and Certification of Revenues \$75,000 or Less

Entity Name:	Squire Creek Community	/ Development D	ristrict	
Address: 28	9 Squire Creek Parkway;	Choudrant, LA 7	1227	
	318-768-7000		ker@squirecreek	com
the end of the	worn financial statement is re entity's fiscal year by sendin ling to Louisiana Legislative 804-9397.	g a pdf copy by em	ail to <u>ereports@lla</u>	<u>la.gov</u> , faxing to 225-339-
		AFFIDAVIT		
Personally car	me and appeared before the u	ndersigned author	ity, Gray Hipp	(officer's
name), who,	duly sworn, deposes and says	that the financial	statements herewith	n given present fairly, in all
of December	ects, the financial position of er 31, 2023 (entity's year-c	nd) and the resul	ts of operations fo	or the year then ended, in
	rith the basis of accounting d			
entity has ma	intained a system of internal	control structure s	sufficient to safegua	ard assets and comply with
laws and rea	gulations; and that the ent	ity has complied		nd regulations, except as
deposes, and in revenues ar	Applicable: In addition, Gray says that Squire Creek Control of the year e	mmunity Develor nded December 3	omer (entity's nam 31, 2023 (entity's	r's name), who duly sworn, e) received \$75,000 or less year-end), and accordingly,
is not required	d to have an audit for the pre-	viously mentioned	fiscal year.	
Ding	Lich		Chairman	
OFFICER'S	SIGNATURE		OFFICER'S TITI	Æ
Sworn to and Botal NOTARY B	subscribed before me, this	25th day of	June	, 2024
Sworn Financial S	talement	Daniel P.		Undaled: 08/07/202

Statement of Receipts and Disbursements				Statement A
		General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):	_	,		
1. Interest Farned 2.	\$	_	\$39,700	\$39,700
Operating Transfer - IN		5,100		5,100
3.		_	_	_
4.		-	-	_
5.		_	_	_
6. Total receipts (add lines 1 - 5)	\$	5,100	<u>\$ 39,700</u>	\$ 44,800
DISBURSEMENTS (Provide Brief Description):				
7. Professional Fees	_\$_	5, 100	<u>.</u>	\$ 5,100
Insurance		loo		
Repairs a maintenance			60, 259	60,259
Publication Expense			115	
Degreciation Expense		/ -	189,773	189,773
Operating Trunsfer - Out		~ -,	5,100	
13. Total Disbursements (add lines 7 - 12)	\$	5,200	\$ 255,24	\$ 260,447
14. Change in fund balance (Lines 6 minus 13)	.\$	(lon)	6 215.54	125647
15. Fund Balance at beginning of year	\$	2,168	\$ 5, 478,06	1 4 5,480,235
Prior Period Adjustment			(12,802)	> < 12,802>
16. Fund balance (deficit) at end of year (Add lines 14-1 This amount also goes on line 12, Statement B	\$	2,068	\$ 5,249,718	\$ 5,251,786

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.

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

Balance Sheet

Statement B

		General Fund	Other Fund	Total
ASSETS (balances at year-end)	-			
Cash and cash equivalents				4
The second process are second as a process of the second second	\$	2,068	\$ 900,978	\$ 903,046
2. Investments (fair value)		_	-	-
3. Office furnishings (Cost of desks, etc)		_		
4. Equipment (Cost of fax machine, etc)		_	ب	,_
5. Other (brief description) Roadways a other Infrastructure	\$		\$ 4, 363,740	\$ 4,363,740
6. Total Assets (add lines 1 - 5)	\$	2,068	\$ 5,264,718	\$ 5,266,786
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description); Accounts Payable 8.	\$	_	\$ 15,000	\$ 15,000
8.		_	_	_
9.		_		
10.				
11, Total Liabilities (add lines 7 - 10)	\$	-	\$ 15,000	4 15,000
12. Fund balance (amount from Line 16 on Statement A)	\$	2,068		\$ 5,251,786
13. Other				
14. Total Liabilities and Fund Balance (add lines 11 - 13) \$	2,068	\$5,264,718	\$5,266,786

Schedule of Compensation, Benefits and Other Payments to Entity Head

	Gray Hipp, Chairman	
Agency Head Name, Title:		

Purpose	Dollar Amount
1. Salary	
2. Benefits-insurance	
3. Benefits-retirement	
4. Benefits-other (describe)	
5. Benefits-other (describe)	
6. Benefits-other (describe)	
7. Car allowance	
8. Vehicle provided by government (If reported on your W-2)	
9. Per diem	
10. Reimbursements	
11. Travel	
12. Registration fees	
13. Conference travel	
14. Housing	
15. Unvouchered expenses (example: travel advances, etc.)	
16. Special meals	
17. Other	
18. TOTAL (enter total of line 1-17)	\$ 0.00

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.)