Entity Name: _	Village of Longstreet, Lon	uisiana		
Address: <u>P.O.</u>	Box 187, Keatchie, LA	71046		
Telephone: (3	18) 697-2008	Email:	wsuezg@aol.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 <u>ereports@lla.la.gov</u>, 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, <u>Wanda Sue Fields</u>, <u>Mayor</u> (officer's name), who, duly sworn, deposes and says that the financial statements herewith given present fairly, in all material respects, the financial position of <u>Village of Longstreet</u>, <u>Louisiana</u> (entity's name) as of <u>June 30</u>, <u>2020</u> (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; 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.

<u>Complete if Applicable:</u> In addition, <u>Wanda Sue Fields, Mayor</u> (officer's name), who duly sworn, deposes, and says that <u>Village of Longstreet</u>, <u>Louisiana</u> (entity's name) received \$75,000 or less in revenues and other sources for the year ended <u>June 30, 2020</u> (entity's year-end), 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 _____ day of _____

Ř'S TITLE

20 21

NØTARY PUBLIC SIGNATURE & SEAL

MISSY LAWRENCE, NOTARY PUBLIC DESOTO PARISH, LOUISIANA MY COMMISSION IS FOR LIFE NOTARY ID # 53245

Please submit a pdf copy of the completed form tos ereports@lla.la.gov - Updated 12/20

Statement of Receipts and Disbursements

Statement A

		General Fund	Other Fund		Total
RECEIPTS (Provide Brief Description):					
1. Franchise Taxes	\$	3,918	\$	\$	3,918
2. Insurance Premium Tax		4,415			4,415
3. Non-potable Water Sales		25,650			25,650
4. Interest Income		27	8- 8 IN		27
5.					
6. Total receipts (add lines 1 - 5)	\$	34,010	\$	\$	34,010
7. Salaries 8. Utilities	\$	55,798 5,370	\$	\$	55,798 5,370
9. Payroll Taxes		4,269			4,269
10. Grounds/Maintenance		5,606			5,606
11. Office Supplies	unter ander	9,877			9,877
12. Other General Govt		12,373			12,373
13. Total Disbursements (add lines 7 - 12)	\$	93,293	\$	\$	93,293
14. Change in fund balance (Lines 6 minus 13)	\$	(59,283)	\$	\$	(59,283)
	\$ \$	<u>(59,283)</u> 186,291	<u>\$</u>	\$ \$	

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.*



Mayor Sue Fields and the Board of Aldermen Village of Longstreet, Louisiana Longstreet, Louisiana

Management is responsible for the accompanying financial statements of the Village of Longstreet, Louisiana, which comprise the balance sheet as of June 30, 2020, and the related statement of cash receipts and disbursements for the year then ended, included in the accompanying prescribed form. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. We did not audit or review the financial statements included in the accompanying prescribed form nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on these financial statements.

Other Matters

The financial statements included in the accompanying prescribed form are intended to comply with the requirements of Louisiana Revised Statute 24:514 and are not intended to be a presentation in accordance with accounting principles generally accepted in the United States of America.

The schedule of compensation, benefits and other payments to agency head or chief executive officer is presented for purposes of additional analysis and is not a required part of the basic financial statement. The information is the representation of management. The information was subject to our compilation engagement; however, we have not audited or reviewed the schedule and accordingly, do not express an opinion, a conclusion, nor provide any assurance on such supplementary information.

Dees Gardner, Certified Public Accountants, LLC

Mansfield, Louisiana July 13, 2021

Balance Sheet

Statement B

		General Fund	Other Fund	 Total
ASSETS (balances at year-end)				
1. Cash and cash equivalents	\$	133,860	\$	\$ 133,860
2. Investments (fair value)				
3. Office furnishings (Cost of desks, etc)				
Equipment (Cost of fax machine, etc)				
5. Other				
6. Total Assets (add lines 1 - 5)	\$	133,860	\$	\$ 133,860
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description): Current liabilities 8.	\$	6,852	\$	\$ 6,852
9.				
10.				
11. Total Liabilities (add lines 7 - 10)		6,852		6,852
12. Fund balance (amount from Line 16 on Statement A)	12	127,008		 135,030
13. Other	-			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$	133,860	\$	\$ 133,860

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Wanda Sue Fields, Mayor

Purpose		Dollar Amount		
1. Salary	1.	2,400		
2. Benefits-insurance	2.			
3. Benefits-retirement	3			
4. Benefits-other Payroll Taxes	4.	184		
5. Benefits-other (describe)	5.			
6. Benefits-other (describe)				
7. Car allowance				
8. Vehicle provided by government (if reported on your W-2)				
9. Per diem	9.			
10. Reimbursements	10.	49		
11. Travel		319		
12. Registration fees				
13. Conference travel	13.			
14. Housing	14.			
15. Unvouchered expenses (example: travel advances, etc.)				
16. Special meals	16.			
17. Other	17.			
18. TOTAL (enter total of line 1-17)	18.	2,952		

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.)