Entity Name: Bogue Chitto-Pearl River Soil and Water Conversation District

Address: 1111 Washington Street, Franklinton, LA 70438

Telephone: 985-322-3048 Email: pamela.tagert@la.nacdnet.net

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, Hezzie Crain (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 Bogue Chitto-Pearl River Soil and Water Conversation District (entity's name) as of 6/30/2021 (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.

Complete if Applicable: In addition, Hezzie Crain (officer's name), who duly sworn, deposes, and says that Bogue Chitto-Pearl River Soil and Water Conversation District (entity's name) received \$75,000 or less in revenues and other sources for the year ended 6/30/2021 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

Supervisor

Sworn to and subscribed before me, this $\frac{33}{3}$ day of $\frac{4495}{3}$

NOTARY PUBLIC SIGNATURE & SEAL

na Hodge

Acknowledgement By-Witness Before me appeared ANNA Hodge)

who says seller signed by free will and signature is genuine.

> BRENDA M. PARKER Notary Public Notary ID No. 6373

Washington Parish, Louisiana

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Statement of Receipts and Disbursements

Statement A

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1.State Funds	\$12,573	\$	\$12,573
2. Farm Bill	31,946		31,946
3.Rentals		1,202	1,202
4.Interest	47	17	64
5.			
6. Total receipts (add lines 1 - 5)	\$44,566	\$1,219	\$45,785
DISBURSEMENTS (Provide Brief Description): 7.Operating Services	\$338	\$1,430	\$1,768
8.Depreciation	1,800	V 1,100	1,800
9.Personal Services	11,125		11,125
10.Supplies	3,600	45	3,645
11.Travel	1,452	69	1,521
12.			and the second
13. Total Disbursements (add lines 7 - 12)	\$18,315	\$1,544	\$19,859
14. Change in fund balance (Lines 6 minus 13)	\$26,251	\$(325)	\$25,926
15. Fund Balance at beginning of year	\$186,844	\$36,883	\$223,727
16. Fund balance (deficit) at end of year (Add lines 14-15)This amount also goes on line 12, Statement B	\$213,095	\$36,558	\$249,653
14. Change in fund balance (Lines 6 minus 13) 15. Fund Balance at beginning of year	\$26,251 \$186,844	\$(325) \$36,883	\$25,926 \$223,727

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

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.

Balance Sheet	Statement B		
	General Fund	Other Fund	Total
ASSETS (balances at year-end)			
Cash and cash equivalents	\$114,313	\$36,558	\$150,871
2. Investments (fair value)	73,442		73,442
3. Office furnishings (Cost of desks, etc)			
4. Equipment (Cost of fax machine, etc)	22,201		22,201
5. Other (Accounts Recievable)	3,139		3,139
6. Total Assets (add lines 1 - 5)	\$213,095	\$36,558	\$249,653
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description):	\$	\$	\$
8.			
9.			
10.			
11. Total Liabilities (add lines 7 - 10)			
12. Fund balance (amount from Line 16 on Statement A)	213,095	36,558	249,653
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$213,095	\$36,558	\$249,653

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Hezzie Crain, Chairman

Purpose	Dollar Amount
1. Salary	1.
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.\$373
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.\$ 373

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.)