Affidavit and Revenue Certification

	Musicians for Music		ENTITY NAME
_	Orleans	Parish	
	New Orleans, LA	_(City), State	

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, Self Sworn statement, Vathick Fisher (enter officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of Musicians for Music (enter entity name) as of December 31, 2017 (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.

(Complete if applicable)

Patricia Fisher In addition. , (officer name), who, duly sworn, deposes and says that Musicians for Music (entity name) received \$75,000 or less in revenues and other sources for the year ended ____ Decemebr 31, 2017 and accordingly, is not required to have an audit for the previously mentioned year.

Janer

Officer's Signature

Sworn to and subscribed before me this 8th day of June 20 18

Self Sworn statement

Cases Willigan Moll Louisiana Bar # 35925 LifetimeCommission

NOTARY PUBLIC SIGNATURE & SEA Casey W. Moll (LA BAN # 35925)

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

> JUN 2 0 2018 Release Date

Please	Complete This Section	
Officer's Name	Patricia Fisher	
Officer's Title	Director	
Address	921 Stewart Ct.	2
City, Zip	New Orleans, LA 70119	
Ph: Cell/Land	504-343-1124	1
E-mail	ecoslatinos@gmail.com	

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

Musicians for Music

(Agency Name)

Statement of Cash Receipts and Disbursements

For the Year Ended 12/31/2017 (Year-End)

	General Fund		Other Fund		Total
RECEIPTS (Provide Brief Description): 1. Louisiana Dvision of the Arts	\$	\$	6300	¢	
	φ	- -		\$	6300
			4250		4250
T OUR MEMORY CHAINS			10,270	-	10,270
 Regional Grants=-2263, Federal Grants 3250 Earned Income 863, Private Support 7,853, interest 5 		-	5,513	-	5,513
6. Total receipts (add lines 1 - 5)	\$	\$	8,721 35.054	\$	8,721 35,054
DISBURSEMENTS (Provide Brief Description): 7. Outside Artists	\$	\$	19,225	\$	19,225
8. Outside Other		_	2,845	_	2,845
9. Travel			7,315		7,315
10. Marketing		_	1,904		1,904
11. Repairs		_	476		476
12. Supplies 341, fees 15			356		356
13. Total Disbursements (add lines 7 - 12)	\$	\$	32,121	\$	32,121
14. Change in fund balance (Lines 6 minus 13)	\$	\$	2,933	\$	2,933
15. Fund Balance at beginning of year	\$	\$	10,997	\$	10,997
16. Fund balance (deficit) at end of year (Add lines 14-15) This amount also goes on line 12, Statement B	\$	\$	13,930	\$	13,930

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

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Statement B Page 4

Musicians for Music

(Agency Name)

Balance Sheet, on <u>12/31/2017</u> (Year-End)

	General Fund	Other Fund	Total
ASSETS (balances at year-end) -Give brief description: 1. Cash and cash equivalents on hand	\$	\$ 13,930	\$ 13,930
 Investments (fair value) on hand Office furnishings (Cost of desks, etc) 			
4. Equipment (Cost of fax machine, etc)			
 Other (brief description) Total Assets (add lines 1 - 5) 	\$	\$ 13,930	\$ 13,930
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (give brief description):			
<u>8.</u> 9.	\$	\$	\$
9. 10.			
11. Total Liabilities (add lines 7 - 10)			
12. Fund balance (amount from Line 16 on Statement A) 13. Other		13,930	13,930
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$	\$ 13,930	\$ 13,930

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(Agency Name)

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 12/31/2017 (Year-End)

Agency Head Name and Title: Patricia Fisher, Director

Purpose	Dollar Amount
1. Salary (Only 1360 for Sublic Funds	1. 2,845 (36
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.
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. 2,845 36

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.)

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