Affidavit and Revenue Certification

Donaldsonville Industrial Development Board ENTITY NAME Ascension Parish Donaldsonville, 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, <u>Diane Christy</u> (enter officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of <u>Donaldsonville Industrial Development Board</u> (enter entity name) as of <u>06/30/2015</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.

(Complete if applicable)

In addition, <u>Diane Christy</u>, (officer name), who, duly sworn, deposes and says that <u>Donaldsonville Industrial Development Board</u> (entity name) received \$75,000 or less in revenues and other sources for the year ended <u>06/30/2015</u>, and accordingly, is not required to have an audit for the previously mentioned year.

Officer's Signature

Sworn to and subscribed before me this 38 day of

ene ,201

NOTARY PUBLIC SIGNATURE & SEAL

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.

Release Date JUL 1 9 2017

Please Complete This Section

Officer's Name <u>Diane Christy</u>
Officer's Title <u>Board President</u>
Address <u>35155 Christy Dr</u>

City, Zip Donaldsonville, LA 70346

Ph: Cell/Land 225-717-1000

E-mail christydiane@bellsouth.net

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

Donaldsonville Industrial Development Board

(Agency Name)

Statement of Cash Receipts and Disbursements
For the Year Ended June 30, 2015
(Year-End)

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1. 2. 3.	\$		\$
2.			
3.			
4.			
5.			
6. Total receipts (add lines 1 - 5)	\$	\$	\$
DISBURSEMENTS (Provide Brief Description): 7. Engineering 8. Services 9. Supplies	\$	\$3,018 3,780 549	\$
10.Meals		292	
11.Consulting		3,080	
12. Repairs		2,768	
13. Total Disbursements (add lines 7 - 12)	\$	\$ 13,486	\$
14. Change in fund balance (Lines 6 minus 13)	\$	\$(13,486)	\$
15. Fund Balance at beginning of year	\$	\$ 378,901	\$
16. Fund balance (deficit) at end of year (Add lines 14-15)This amount also goes on line 12, Statement B	\$	\$ 365,415	\$

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

Donaldsonville Industrial Development Board

(Agency Name)

Balance Sheet, on June 30, 2015

(Year-End)

	General Fund	Other Fund	Total
ASSETS (balances at year-end) -Give brief description:			
Cash and cash equivalents on hand	\$	\$ 365,415	\$
2. Investments (fair value) on hand			
Office furnishings (Cost of desks, etc)			
Equipment (Cost of fax machine, etc)			
5. Other (brief description)			
6. Total Assets (add lines 1 - 5)	\$	\$ 365,415	\$
LIABILITIES AND ELIND BALANCE (et voor and):			
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (give brief description):			
	\$	\$	\$
7. Liabilities (give brief description):	\$	\$	\$
7. Liabilities (give brief description): 8.	\$	\$	\$
7. Liabilities (give brief description): 8. 9.	\$	\$	\$
7. Liabilities (give brief description): 8. 9. 10.	\$	\$ 365,415	\$
7. Liabilities (give brief description): 8. 9. 10. 11. Total Liabilities (add lines 7 - 10)	\$		\$

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

Donaldsonville Industrial Development Board (Agency Name)

For the Year Ended June 30, 2015 (Year-End)

Schedule of Compensation, Benefits and Other Payments to Agency Head or Chief Executive Officer (Required Form - Please Submit Completed Form Per Attached Instructions)

Agency Head Name and Ti	itle:			

Purpose	Dollar Amount
1. Salary	1.
2. Benefits-insurance	2.
Benefits-retirement	3.
Benefits-other (describe)	4.
5. Benefits-other (describe)	5.
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.

X 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.)