Sworn Financial Statements and Certification of Revenues \$75,000 or Less
Entity Name: NORTH KENILWORTH SECURITY & IMPROVEMENT DISTRICT Address: 7428 BENSON ST, N.O. LA. 20121
Address: 7428 BENSON ST, N.O. LA. 20121 Telephone: 504-324-6044 Email: CADSILVER FOX @ YAHOO. 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 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,
(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 NORTH KENILWORTH SECTIMP I. (entity's name) as of 19/21/2020 (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, except as follows:
Complete if Applicable: In addition, CARROLL A DENESSE (officer's name), who duly sworn, deposes, and says that NORTH KENILWORTH HOTH (entity's name) received \$75,000 or less in revenues and other sources for the year ended 12/31/2020 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year. OFFICER'S SIGNATURE OFFICER'S TITLE
Sworn to and subscribed before me, this 22 day of 50 , 20 PRECEIVEL
NOTARY PUBLIC SIGNATURE & SEAL

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Statement of Receipts and Disbursements

Statement A

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description): 1. LIBERTY BANKS TRUST	\$ 51331,73\$		\$ 5/331.13
2. 3. FNTEREST LIBERTY BANK		\$4.59	84.58
4.		9 1 70	00
5.			
6. Total receipts (add lines 1 - 5)	\$51331.73\$	8438	\$ 51416.31
DISBURSEMENTS (Provide Brief Description): 7. SECURITY 8. TRAVELERS INSURANCE 9. LIBERTY BANK FEE 10. ST MARIA GORETTI RENTH 11. ENONAC DUES 12. OLIVER BALL CENVELOPS 13. Total Disbursements (add lines 7 - 12)	200.00	7	\$
13. Total Disbursements (add lines 7 - 12)	\$ 560 36 00		20170101
14. Change in fund balance (Lines 6 minus 13)	s -4804, 34s		\$ 4804.34
15. Fund Balance at beginning of year	\$ 38683.98\$		\$ 3868319
16. Fund balance (deficit) at end of year (Add lines 14-15) -This amount also goes on line 12, Statement B	\$ 33879164\$		\$ 33879.44

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.

NRHOA 2020 Expenses Paid

DATE	SECURITY EXPERTS AND LEADERS	TRAVELERS INSURANCE	LIBERTY BANK	ST. MARIA GORETTI	ENONAC	OLIVER BALL
12/19/2019	1012					
1/8/2020	1012	1882				
1/8/2020	828					
1/8/2020	1012					
1/8/2020	1012					
1/20/2020	1012					
1/28/2020	1012					
2/8/2020	1012					
2/8/2020	1012					
2/8/2020	1012					
2/17/2020	989					
2/28/2020	1012					
2/28/2020	1012					
3/20/2020			45			
4/16/2020	998.66					
4/16/2020	989					
4/16/2020	1012					
4/16/2020	849.85					
4/16/2020	943					
6/16/2020	1012					
	1012					
6/16/2020						
6/25/2020	1012					
6/25/2020	1012					
7/15/2020	1012					
7/15/2020	998.89					
7/15/2020	1012					
7/15/2020	1012					
7/15/2020	998					
8/3/2020	1012					
8/3/2020				300		
8/24/2020				333	200	
8/26/2020					200	
9/9/2020	926.44					
9/9/2020	1012					
	995.21					
9/14/2020	1012					
9/14/2020						
9/14/2020	1012					
9/14/2020	1012					
9/14/2020	1012					
9/14/2020	966					
9/14/2020	1012					
10/13/2020	1012					
11/2/2020	1012					
11/2/2020	1012					
11/2/2020	1012					
11/10/2020	997.51					116.95 Envelopes
11/10/2020	966					
11/10/2020	943					
11/10/2020	989					
10/2/2020	1012					
10/29/2020	1012					
	1012					
10/29/2020						
10/29/2020	1012					
10/29/2020	759					
11/23/2020	1012					
12/14/2020	1012					
12/14/2020	1012					
12/14/2020	1012					
TOTAL	53,592.12	1882	45	300	200	116.95

56 34 34

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DDA Account:

2370468

Branch: 03 Acct Branch:

00003

Portfolio Number:

219734 Class: ENTERPRISE CHECKING

Tax ID Number:

E46-4707269

Handling Code:

Payee Name Control:

NORT

Reprint Option:

Name:

NORTH KENILWORTH

TAX

Name 2:

Name 3:

Reporting Level:

Address:

PO BOX 870714

Delivery Point: Foreign Address:

14

Addl Addr:

LA 70187-0714

CSZ:

NEW ORLEANS

FORM 1099-INT

Interest:

84.58

Federal Tax Withheld:

State Tax Withheld:

2nd TIN

Code:



2020 Deposits and Interest

	Deposit	Interest
1/14/2020	297.00	
1/31/2020		4.58
2/28/2020	300,00	3.56
3/20/20	1062.15	
3/20/20	1398.93	
3/20/20	2049.67	Adjustment Correction 45,00
3/20/20	17,077.50	
3/31/20		5.46
4/09/20	17,077.50	
4/20/20	10,395.00	
4/20/20	297.00	
4/23/20	2,144.85	
4/29/20	2,225.07	
4/30/20		7.50
5/15/20	297.00	
5/29/20		8.77
6/01/20	1223.81	
6/17/20	1485.00	
6/30/20		9.76
7/31/20	120	8.94
8/18/20	891.00	
8/19/20	297.00	
8/31/20		8.52
9/30/20		7.60
10/23/20	297.00	
10/30/20		7.10
12/09/20	297.00	6.03 12/31/20
Total	58,221.46	84.58

NORTH KE	ENILWORTH	from City of n.C),
<u>PERIOD</u> January 1 - 31, 2020	AMOUNT 31,482.00	TOTAL 31,482.00	
February 1 - 29, 2020	10,395.00	10,395.00	
March 1 - 31, 2020	2,144.85	2,144.85	
April 1 - 17, 2020 April 18 - 30, 2020	2,225.07 297.00	2,522.07	
May 1 - 15, 2020 May 16 - 31, 2020	1,223.81 1,485.00	2,708.81	
June 1 - 15, 2020 June 16 - 30, 2020	-	-	
July 1 - 15, 2020 July 16 - 30, 2020	891.00 297.00	1,188.00	
August 1 - 15, 2020 August 16 - 30, 2020	-	~	
September 1 - 15, 2020 September 16 - 30, 2020	- 297.00	297.00	
October 1 - 15, 2020 October 16 - 30, 2020	- 297.00	297.00	
November 1 - 15, 2020	297.00		

297.00

51,331.73

November 16 - 30, 2020

December 1 - 15, 2020 December 16 - 20, 2020

2020 distribution as of 1/27/21

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Balance Sheet			Statement B	
	General Fund	Other Fund	Total	
ASSETS (balances at year-end)	\$ 42 095.5	2-	s 42093	5 3
Cash and cash equivalents	\$ 70 070 4	15	\$ 72010	100
Investments (fair value)				
Office furnishings (Cost of desks, etc)	-		- 0	
Equipment (Cost of fax machine, etc)			-	
Other (brief description)	· dans	V 100500 111-00	de AG	EED
6. Total Assets (add lines 1 - 5)	\$42095.53	\$	\$ \$2,093	シャンク
LIABILITIES AND FUND BALANCE (at year-end):			4	
7. Liabilities (brief description):	\$ 0	\$	\$	
8.				
9.				
10.				
11. Total Liabilities (add lines 7 - 10)	A	,	0	
12. Fund balance (amount from Line 16 on Statement A)	338196	4	33.879	64
13. Other		/		
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 33879.69	15	\$33879	64

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Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: CARROLL A. DENESSE TREASURER

Purpose	Dollar Amount
1. Salary	1. 0
2. Benefits-insurance	2. 0
Benefits-retirement	3. 0
Benefits-other (describe)	4. 0
5. Benefits-other (describe)	5. 0
6. Benefits-other (describe)	6. 0
7. Car allowance	7. 0
8. Vehicle provided by government (if reported on your W-2)	8. 0.
9. Per diem	9. 0
10. Reimbursements	10. ()
11. Travel	11. 0
12. Registration fees	12. 0
13. Conference travel	13. 0
14. Housing	14. 0
15. Unvouchered expenses (example: travel advances, etc.)	15. 0
16. Special meals	16. 0
17. Other	17.
18. TOTAL (enter total of line 1-17)	18.

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.)