# Sworn Financial Statements and Certification of Revenues \$75,000 or Less

Entity Name: West Monroe/West Ouachita Chamber of Commerce, Inc Address: 112 Professional Drive, West Monroe, LA 71291 Telephone: 318.680.6411 Email: kkelley@westmonroechamber.org 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, Kris Kelley (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 West Monroe/West Ouachita Chamber of Commerce, Inc as of December 31, 2022 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, Kris Kelley, who duly sworn, deposes, and says that West Monroe/West Ouachita Chamber of Commerce, Inc received \$75,000 or less in revenues and other sources for the year ended December 31, 2022, and accordingly, is not required to have an audit for the previously mentioned fiscal year. **Executive Director** OFFICER'S TITLE Sworn to and subscribed before me, this 7th day of

# **Statement of Receipts and Disbursements**

# Statement A

		General Fund	0	ther Fund Public	_	Total
RECEIPTS (Provide Brief Description):						
1.Memberships	\$	255,081	\$		\$	255,081
2.Program Fees		72,194		16,000		88,194
3.Special Events		32,884				32,884
4.Membership Development		65,532				65,532
5.Other Income		28,596				28,596
6. Total receipts (add lines 1 - 5)	\$	454,287	\$	16,000	\$	470,287
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7.Salaries and Benefits 8.Program Expenses	\$	148,315 120,554	<u>\$</u>	16,000	<u>\$</u>	136,554
8.Program Expenses 9.Office Expenses	\$	120,554 60,451	<u>\$</u>	16,000	<u>\$</u>	136,554 60,451
8.Program Expenses	\$	120,554 60,451 2,276	\$ 	16,000	<u>\$</u> 	136,554 60,451 2,276
8.Program Expenses 9.Office Expenses 10.Depreciation Expense	\$	120,554 60,451	\$ 	16,000	\$ 	136,554 60,451 2,276 6,000
8.Program Expenses 9.Office Expenses 10.Depreciation Expense 11.Professional Fees	\$	120,554 60,451 2,276 6,000	\$  \$	16,000	\$ 	136,554 60,451 2,276 6,000 64,847
8.Program Expenses 9.Office Expenses 10.Depreciation Expense 11.Professional Fees 12.Other Disbursements	\$	120,554 60,451 2,276 6,000 64,847				136,554 60,451 2,276 6,000 64,847 418,443
8.Program Expenses 9.Office Expenses 10.Depreciation Expense 11.Professional Fees 12.Other Disbursements 13. Total Disbursements (add lines 7 - 12)	\$	120,554 60,451 2,276 6,000 64,847 402,443	\$			148,315 136,554 60,451 2,276 6,000 64,847 418,443 51,844 233,219

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			<u>s</u>	tat	ement B
	_	General Fund	Other Fund Public		Total
ASSETS (balances at year-end)					
Cash and cash equivalents	\$	179,330	\$	\$	179,330
2. Investments (fair value)		0			0
3. Office furnishings (Cost of desks, etc)		0			0
4. Accounts Receivable		65,506			65,506
5. Other (brief description) Equipment, Land, buildings		65,739			65,739
& Improvements					
6. Total Assets (add lines 1 - 5)	\$	310,575	\$	\$	310,575
LIABILITIES AND FUND BALANCE (at year-end):	0				
7. Liabilities (brief description):Payroll Liabilities	\$	5,498	\$	\$	5,498
8. Deferred Revenue		18,350			18,350
9. Credit Cards		1,664			1,664
10.					
11. Total Liabilities (add lines 7 - 10)		25,512			25,512
12. Fund balance (amount from Line 16 on Statement A)		285,063			285,063
13. Other					
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$	310,575	\$	\$	310,575

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#### Statement C

## Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title:\_\_Kris Kelley, Executive Director\_\_\_\_

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.
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.)