

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

Entity Name: **Board of Louisiana River Pilot Review and Oversight**

Address: **2805 Harvard Avenue, Metairie, LA 70006**

Telephone: **(504) 285-3700** Email: **LJ@riverpilotoversight.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](mailto:ereports@lla.la.gov), faxing to 225-3393986, 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, **Lee A. Jackson, Jr.** (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 **Board of Louisiana River Pilot Review and Oversight** (entity's name) as of **12/31/2024** (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, **Lee A. Jackson, Jr.** (officer's name), who duly sworn, deposes, and says that **Board of Louisiana River Pilot Review and Oversight** (entity's name) received \$75,000 or less in revenues and other sources for the year ended **12/31/2024** (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

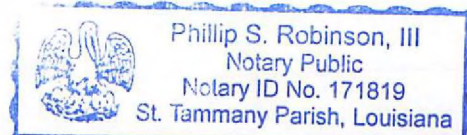
\_\_\_\_\_  
OFFICER'S SIGNATURE

**Chairperson**

\_\_\_\_\_  
OFFICER'S TITLE

Sworn to and subscribed before me, this 20<sup>th</sup> day of March, 20 25

\_\_\_\_\_  
NOTARY PUBLIC SIGNATURE



Updated: 08/01/2023

**Statement of Receipts and Disbursements**
**Statement A**

	General Fund	Other Fund	Total
<b>RECEIPTS (Provide Brief Description):</b>			
1. <u>Interest</u>	<u>\$23.<sup>06</sup></u>		<u>\$23.<sup>06</sup></u>
2.			
3.			
4.			
5.			
6. <b>Total receipts</b> (add lines 1 - 5)	<u>\$23.<sup>06</sup></u>		<u>\$23.<sup>06</sup></u>
<b>DISBURSEMENTS (Provide Brief Description):</b>			
7. <u>Per Diem for Judge Meunier</u>	<u>\$813.<sup>54</sup></u>		<u>\$813.<sup>54</sup></u>
8. <u>Website Hosting: Michael Delesclerier reimbursement</u>	<u>\$390.<sup>00</sup></u>		<u>\$390.<sup>00</sup></u>
9. <u>Court Reporter Services</u>	<u>\$375.<sup>00</sup></u>		<u>\$375.<sup>00</sup></u>
10. <u>Contract Professional Services; Phillip S. Robinson, III</u>	<u>\$8,860.<sup>32</sup></u>		<u>\$8,860.<sup>32</sup></u>
11.			
12.			
13. <b>Total Disbursements</b> (add lines 7 - 12)	<u>\$10,438.<sup>86</sup></u>		<u>\$10,438.<sup>86</sup></u>
14. Change in fund balance ( Lines 6 minus 13)	<u>\$10,415.<sup>80</sup></u>		<u>\$10,415.<sup>80</sup></u>
15. Fund Balance at beginning of year	<u>\$29,421.<sup>33</sup></u>		<u>\$29,421.<sup>33</sup></u>
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12. Statement B	<u>\$39,837.<sup>13</sup></u>		<u>\$39,837.<sup>13</sup></u>

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

**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
<b>ASSETS</b> (balances at year-end)			
1. Cash and cash equivalents	<u>\$39,837.<sup>13</sup></u>		<u>\$39,837.<sup>13</sup></u>
2. Investments (fair value )			
3. Office furnishings (Cost of desks, etc )			
4. Equipment (Cost of fax machine, etc )			
5. Other (brief description )			
6. <b>Total Assets</b> (add lines 1 - 5)	<u>\$39,837.<sup>13</sup></u>		<u>\$39,837.<sup>13</sup></u>
<b>LIABILITIES AND FUND BALANCE</b> (at year-end):			
7. Liabilities (brief description):			
8.			
9.			
10.			
11. <b>Total Liabilities</b> (add lines 7 - 10)			
12. Fund balance (amount from Line 16 on Statement A)	<u>\$39,837.<sup>13</sup></u>		<u>\$39,837.<sup>13</sup></u>
13. Other			
14. <b>Total Liabilities and Fund Balance</b> (add lines 11 - 13)	<u>\$39,837.<sup>13</sup></u>		<u>\$39,837.<sup>13</sup></u>

**Schedule of Compensation, Benefits and Other Payments to Entity Head****Agency Head Name, Title: Lee A. Jackson, Jr., Chairperson**

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

**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-forprofit (quasi-public) entities to report on the Act 706 schedule **only** those payments to the agency head that are derived from the public funds.)