

Updated: 08/07/2023

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

Entity Name: Evangeline Parish Drainage District - Bay	ou Petite Passe Gravity No. 15 (1357-DL
Address: 449 Goyo Road, Washington, LA 70589	
Telephone: 337-459-1272 Email: k_des	hotels@yahoo.com
This annual sworn financial statement is required to be filed the end of the entity's fiscal year by sending a pdf copy by en 3986, or mailing to Louisiana Legislative Auditor – Local Rouge, LA 70804-9397.	nail to ereports@lla.la.gov, faxing to 225-339-
AFFIDAVIT	
Personally came and appeared before the undersigned author	rity, Karl Deshotels (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 Evangeline Pa	rish Drainage District - B (entity's name) as
of (entity's year-end) and the resu	Its of operations for the year then ended, in
accordance with the basis of accounting described within the	
entity has maintained a system of internal control structure	
laws and regulations; and that the entity has complied	
follows:	
Complete if Applicable: In addition, Karl Deshotels	(officer's name), who duly sworn,
deposes, and says that Bayou Petite Passe Drainage Dis	trict (entity's name) received \$75,000 or less
in revenues and other sources for the year ended 202	
is not required to have an audit for the previously mentioned	l fiscal year.
TO HOO	Sacratary Transurar
OFFICER'S SIGNATURE	Secretary - Treasurer OFFICER'S TITLE
Sworn to and subscribed before me, this 29th day of	January , 20_24
anala Balna	
NOTARY PUBLIC SIGNATURE # 35296	

Sworn Financial Statement

Entity Name: Evangeline Parish Drainage District - B

Fiscal Year End: ____

2023

Statement of Receipts and Disbursements			Statement A
	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1. Interest Earned	\$ 3,999.79		\$ 3,999.79
2.			\$ 0.00
3.	Allyna		
4.			\$ 0.00
4.			\$ 0.00
5.		.,	\$ 0.00
6. Total receipts (add lines 1 - 5)	\$ 3,999.79	\$ 0.00	\$ 3,999.79
DISBURSEMENTS (Provide Brief Description):			
7. Per Diem for Board of Directors	\$ 140.00		\$ 140.00
8. Accounting Expenses	\$ 250.00		\$ 250.00
9.	-		\$ 0.00
10.			\$ 0.00
11.			\$ 0.00
12.	· ————————————————————————————————————		
13. Total Disbursements (add lines 7 - 12)	\$ 390.00	\$ 0.00	\$ 0.00 \$ 390.00
14. Change in fund balance (Lines 6 minus 13)	\$ 3,609.79	\$ 0.00	\$ 3,609.79
15. Fund Balance at beginning of year	\$ 122,332.10		\$ 122,332.10
16. Fund balance (deficit) at end of year (Add lines 14-15)This amount also goes on line 12, Statement B	\$ 125,941.89	\$ 0.00	\$ 125,941.89

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.

Entity Name: Evangeline Parish Drainage District - B

Fiscal Year End: ____

2023

Balance Sheet

Statement B

	General Fund	Other Fund	Total
ASSETS (balances at year-end)			
Cash and cash equivalents	ው ፖ ር ፖፖር ር ላ		¢ 70 772 04
	\$ 70,772.94		\$ 70,772.94
2. Investments (fair value)	\$ 58,498.65		\$ 58,498.65
3. Office furnishings (Cost of desks, etc)			\$ 0.00
4. Equipment (Cost of fax machine, etc)			\$ 0.00
5. Other (brief description)	,		\$ 0.00
6. Total Assets (add lines 1 - 5)	\$ 129,271.59	\$ 0.00	\$ 129,271.59
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description):	\$ 0.00		\$ 0.00
8.			\$ 0.00
9.			\$ 0.00
10.			\$ 0.00
11. Total Liabilities (add lines 7 - 10)	\$ 0.00	\$ 0.00	\$ 0.00
12. Fund balance (amount from Line 16 on Statement A)	\$ 125,941.89	\$ 0.00	\$ 125,941.89
13. Other			\$ 0.00
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 125,941.89	\$ 0.00	\$ 125,941.89

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name, Title:_____

Purpose	Dollar Amount		
1. Salary	\$ 0.00		
2. Benefits-insurance	\$ 0.00		
3. Benefits-retirement	\$ 0.00		
4. Benefits-other (describe)	\$ 0.00		
5. Benefits-other (describe)	\$ 0.00		
6. Benefits-other (describe)	\$ 0.00		
7. Car allowance	\$ 0.00		
8. Vehicle provided by government (if reported on your W-2)	\$ 0.00		
9. Per diem	\$ 35.00		
10. Reimbursements	\$ 0.00		
11. Travel	\$ 0.00		
12. Registration fees	\$ 0.00		
13. Conference travel	\$ 0.00		
14. Housing	\$ 0.00		
15. Unvouchered expenses (example: travel advances, etc.)	\$ 0.00		
16. Special meals	\$ 0.00		
17. Other	\$ 0.00		
18. TOTAL (enter total of line 1-17)	\$ 35.00		

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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