

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

Entity Name: Alpha Daughters of Zion Outreach Center-A Safe Space

Address: 171 Keller St., Hahnville, LA 70057

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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, Ms. Shirley Parram-Sims, Executive Director, (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 Alpha Daughters of Zion Outreach Center-A Safe Space as of December 31, 2022 (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: NA

Complete if Applicable: In addition, Ms. Shirley Parram-Sims, Executive Director (officer's name), who duly sworn, deposes, and says that Alpha Daughters of Zion Outreach Center-A Safe Space (entity's name) received \$75,000 or less in public revenues and other sources for the year ended December 31, 2021 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

Shirley Parram-Sims
OFFICER'S SIGNATURE

Executive Director
OFFICER'S TITLE

Sworn to and subscribed before me, this 28th day of March, 2023

Tennell D. Wilson JP 45-1
NOTARY PUBLIC SIGNATURE & SEAL

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Statement of Receipts and Disbursements

Statement A

| | General Fund | Other Fund | Total |
|---|-------------------------|-----------------------|-------------------|
| RECEIPTS (Provide Brief Description): | | | |
| ADOZ Survivor Assistance | | 16,000 | 16,000 |
| VOCA | | 13,230 | 13,230 |
| United Way Grant | 131,401 | | 131,401 |
| Individual & Corporate Contributions | 147,028 | | 147,028 |
| Fundraising Income – Gala | 21,815 | | 21,815 |
| Other Miscellaneous Income | 184 | | 184 |
| Total receipts | \$ 300,428 | \$ 29,230 | \$ 329,658 |
| DISBURSEMENTS (Provide Brief Description): | | | |
| Program Service Expense | \$ 108,173 | \$ 36,915 | \$ 145,088 |
| General & Administrative | 7,731 | | 7,731 |
| Payroll | 73,904 | | 73,904 |
| Utilities | 8,913 | | 8,913 |
| Fundraising | 21,284 | | 21,284 |
| Total Disbursements | \$ 220,005 | \$ 36,915 | \$ 256,920 |
| Change in fund balance | \$ 80,423 | \$ (7,685) | \$ 72,738 |
| Fund Balance at beginning of year | \$ 198,367 | \$ 16,047 | \$214,414 |
| Fund balance (deficit) at end of year | | | |
| --This amount also goes on line 12, Statement B | \$ 278,790 | \$ 8,362 | \$ 287,152 |

Identify the Basis of Accounting, if not using Cash-Basis: Modified 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 receipt's 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.*

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Balance Sheet

Statement B

| | <u>General Fund</u> | <u>Other Fund</u> | <u>Total</u> |
|---|-------------------------|-----------------------|-------------------|
| ASSETS (balances at year-end) -Give brief description: | | | |
| 1. Cash ADOZ and VOCA | \$ | \$ 8,362 | \$ 8,362 |
| 2. Building Fund | 22,322 | | 22,322 |
| 3. Cash General Fund | 242,308 | | 242,308 |
| 4. Office furnishings & Equipment | 1,582 | | 1,582 |
| 5. Auto, trucks & vans | 12,000 | | 12,000 |
| 6. Total Assets (add lines 1 - 5) | \$ 278,212 | \$ 8,362 | \$ 286,574 |
| LIABILITIES AND FUND BALANCE (at year-end): | | | |
| 7. Liabilities (give brief description): | | | |
| 8. Payroll Liabilities | \$ (578) | \$ | \$ (578) |
| 9. Other | | | |
| 10. | | | |
| 11. Total Liabilities (add lines 7 - 10) | (578) | | (578) |
| 12. Fund balance (amount from Line 16 on Statement A) | 278,790 | 8,362 | 287,152 |
| 13. Other | | | |
| 14. Total Liabilities and Fund Balance (add lines 11 - 13) | \$ 278,212 | \$ 8,362 | \$ 286,574 |

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Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Ms. Shirley Parram-Sims, 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. |

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.)