

Affidavit and Revenue Certification

FRIENDS OF SAFETY TOWN ENTITY NAME
CADDO Parish
SHREVEPORT LA (City), State

ANNUAL SWORN FINANCIAL STATEMENTS AND CERTIFICATION OF REVENUES \$75,000 OR LESS (if applicable)

The annual sworn financial statements are *required* by Louisiana Revised Statute 24:514 to be filed with the Legislative Auditor within 90 days after the close of the fiscal year. The certification of revenues of \$75,000 or less, if applicable, is required by Louisiana Revised Statute 24:513(J)(1)(c)(i)(aa).

Personally came and appeared before the undersigned authority, RON ROBERTS (enter officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of FRIENDS OF SAFETY TOWN (enter entity name) as of JUNE 30, 2021 (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.

(Complete if applicable)

In addition, RON ROBERTS, (officer name), who, duly sworn, deposes and says that FRIENDS OF SAFETY TOWN (entity name) received \$75,000 or less in revenues and other sources for the year ended JUNE 30, 2021, and accordingly, is not required to have an audit for the previously mentioned year.

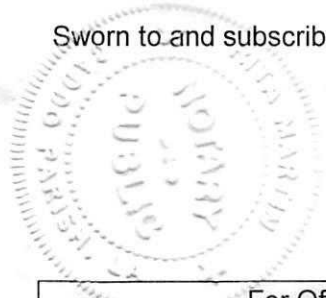
Ron Roberts
Officer's Signature

Sworn to and subscribed before me this 24th day of Sept, 2021.

Rita Martin
NOTARY PUBLIC SIGNATURE & SEAL

RITA MARTIN

NOTARY PUBLIC, CADDO PARISH, LA
MY COMMISSION IS FOR LIFE
NOTARY ID # 47683

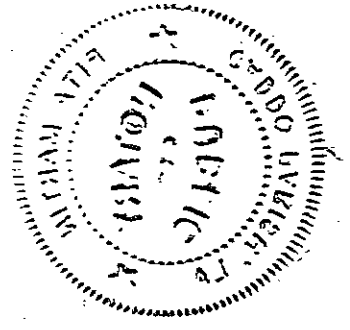


For Office Use Only
Under provisions of state law, this report will become a public document on the Monday following the release date. A copy of the report will be submitted to appropriate public officials and be available for public inspection at the Baton Rouge office of the Louisiana Legislative Auditor and, where appropriate, at the office of the parish clerk of court.
Release Date 01-19-2022

Please Complete This Section
Officer's Name RON ROBERTS
Officer's Title TREASURER
Address PO BOX 4278
City, Zip SHREVEPORT LA 71134
Ph: Cell/Land 318-222-2222
E-mail RROBERTS@CRICPA.COM

Please return the completed form within 90 days of your entity's year-end to Louisiana Legislative Auditor – Local Government Services, Post Office Box 94397, Baton Rouge, LA 70804-9397 - Updated 8/3/16

NOTARY PUBLIC
MY COMMISSION IS FOR ONE
YEAR PUBLIC NOTARY
RITA MARTIN



FRIENDS OF SAFETY TOWN (Entity Name)
SHREVEPORT, CADDO, LA (City, Parish/State)

TRANSMITTAL LETTER

ANNUAL FINANCIAL STATEMENTS

(Date) 09/23/2021

Ms. Gayle Fransen
Engagement Manager
Louisiana Legislative Auditor
1600 North Third Street
Baton Rouge, LA 70802

Dear Ms. Fransen:

In accordance with Louisiana Revised Statute 24:513, enclosed are the Affidavit and Revenue Certification Form and the annual financial statements for my entity, as of and for the year ended 06/30/2020 (entity's year-end). The statements include all funds under the control of this entity. The accompanying financial statements have been prepared on the cash basis of accounting.

Sincerely,



Officer's Signature

RON ROBERTS, TREASURER

Officer's Name



Enclosures

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENT FOR YOUR RECORDS

Please return the completed form within 90 days of your entity's year-end to Louisiana Legislative Auditor –
Local Government Services, Post Office Box 94397, Baton Rouge, LA 70804-9397 - Updated 8/3/16

Friends of Safety Town (Agency Name)

Statement of Cash Receipts and Disbursements
For the Year Ended June 30, 2021 (Year-end)

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1.General Contributions	\$ 5,233		\$ 5,233
2. Louisiana Highway Safety Commission	-		-
3. Interest income	12,345		12,345
4.Bossier City Marshall	-		-
5.State of Louisiana	-		-
6. Total receipts (add lines 1 - 5)	\$ 17,578	-	\$ 17,578
DISBURSEMENTS (Provide Brief Description):			
7. Educational Material	\$ 6,543		\$ 6,543
8. Bank fees	384		384
9. Awards	761		761
10.Depreciation	11,765		11,765
11. Other Expenses	12,047		12,047
12.Maintenance	1,577		1,577
13. Total Disbursements (add lines 7 - 12)	\$ 33,077	-	\$ 33,077
14. Change in fund balance (Line 6 minus 13)	\$ (15,499)		\$ (15,499)
15. Fund Balance at beginning of year	\$ 1,156,587		\$ 1,156,587
16. Fund balance (or deficit) at end of year (Add lines 14-15)	\$ 1,141,088	-	\$ 1,141,088

--This amount also goes on line 12, Statement B

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENT FOR YOUR RECORDS

Friends of Safety Town (Agency Name)

Balance Sheet, On June 30, 2021 (Year-end)

	General <u>Fund</u>	Other <u>Fund</u>	<u>Total</u>
ASSETS (balances at end of year)-Give brief description:			
1. Cash and cash equivalents on hand	\$ 386,601		\$ 386,601
2. Investments (fair value) on hand	504,436		504,436
3. Office furnishings (Cost of desks, etc)			-
4. Equipment (Cost of fax machine, etc)	221,111		221,111
5. Other (brief description) Buildings	368,426		368,426
Accumulated Depreciation	(339,486)		(339,486)
6. Total Assets (add lines 1 - 5)	\$ 1,141,088	-	\$ 1,141,088
LIABILITIES AND FUND BALANCE (balances at end of year):			
Liabilities (give brief description):			
7. Accounts Payable	\$ -		\$ -
8			
9			
10			
11. Total Liabilities (add lines 7 - 10)	\$ -	-	\$ -
12. Fund balance (amount from Line 16 on Statement B)	1,141,088		1,141,088
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 1,141,088	-	\$ 1,141,088
	\$ -		

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENT FOR YOUR RECORDS

Friends of Safety Town (Agency Name)

Schedule of Compensation, Benefits and Other Payments to Agency Head or Chief Executive Officer (Required Form-Please Submit Completed Form Per Attached Instuctions

For the year ended June 30, 2021 (Year-end)

Agency Head Name / Title: Steve Prator, Chairman

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

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

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENTS FOR YOUR RECORDS