Entity Name:	. Uл	ON	PARISH	TOURIST	COMMISSION	
Address:	P. 0.	Box	328			
Telephone:	318 - 2	.85 - 4	7333	Email: unionpa	rishtourist@att.net	

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, $M'_{inor} P_{a++on}$ (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 Union Parish Tourist Commission (entity's name) as of December 31, 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; 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:

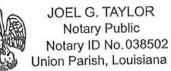
Complete if Applicable: In addition, Minor Patton (officer's name), who duly sworn, deposes, and says that Union Parish Tourist Commission (entity's name) received \$75,000 or less in revenues and other sources for the year ended December 31, 2021 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

OFFICER'S SIGNATURE

Executive Director **OFFICER'S TITLE**

Sworn to and subscribed before me, this 3rd day of February, 2022

RE & SEAL



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Entity Name: Union Parish Tourist Commission Fiscal Year End: 12-31-2021

Statement of Receipts and Disbursements

Statement A

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1. Occupancy Tax	\$ 18,175	\$	\$ 18 175
2. La. Dept. of Treasury Grants	27,787		27,787
3. Union Parish Police Jury Grant	7,988	<u> </u>	7,988
4.	·		
5.	- <u>- </u>		· · · · · ·
6. Total receipts (add lines 1 - 5)	\$ 53,950	<u>\$</u>	\$ 53,950
DISBURSEMENTS (Provide Brief Description):			
7. Fishing Tournaments and Events	\$ 21,770	\$	\$ 21,770
8. Advertising	14,167		14,167
9. Contract Labor	12,000		12,000
10. Office Expense and Utilities	10,157	-	10,157
<u>11.</u>			
<u>12.</u>	· · · · · · · · · · · · · · · · · · ·		
13. Total Disbursements (add lines 7 - 12)	\$ 58,094	<u>\$</u>	\$ 58,094
14. Change in fund balance (Lines 6 minus 13)	\$ < 4,144 >	\$	\$ < 4, 144>
15. Fund Balance at beginning of year	\$ 50,053	\$	\$ 50,053
16. Fund balance (deficit) at end of year (Add lines 14-15)	_		
This amount also goes on line 12, Statement B	\$ 45,909	\$	\$ 45,909

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: Union Parish Tourist Commission Fiscal Year End: 12-31-2021

Balance Sheet

Statement B

		General Fund	Other Fund	Total
ASSETS (balances at year-end)				
1. Cash and cash equivalents	\$	45,909	\$	\$ 45,909
2. Investments (fair value)	_			
3. Office furnishings (Cost of desks, etc)	_			
4. Equipment (Cost of fax machine, etc)				
5. Other (brief description)				
6. Total Assets (add lines 1 - 5)	\$	45,909	\$	\$ 45,909
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description): 8.	\$		\$	\$
<u>9.</u>				····
10.	-		· · · · · · · · · · · · · · · · · · ·	
11. Total Liabilities (add lines 7 - 10)	-	270 ²	4	
12. Fund balance (amount from Line 16 on Statement A)		45,909		45,909
13. Other			•	
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$	49,909	\$	\$ 45,909

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Entity Name: Union Parish Tourist Commission Fiscal Year End: 12-31-2021

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Joseph Cusimano - President

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. NONE		

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.)