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

Entity Name: Sewerage District NO. 2
Address: P.O. Box 2406 Slidell, LA 70459
Telephone: 985-377-2230 Email: jane. whitty a yahoo. 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 <a href="mailto:ereports@lla.la.gov">ereports@lla.la.gov</a> , 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, Mary J. Whitty (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 Sewerage District No. 2 as of December 31, 2021 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, Mary J. Whitty, who duly sworn, deposes, and says that Sewerage
District No. 2 received \$75,000 or less in revenues and other sources for the year ended December 31,
2021, and accordingly, is not required to have an audit for the previously mentioned fiscal year.
May Albuty OFFICER'S SIGNATURE  Secretary-Treasurer OFFICER'S TITLE
Sworn to and subscribed before me, this _/o day of _ February, 2022
and the second s
NOTARY PUBLIC SIGNATURE & SEAL
CHELSEA D. DAZET NOTARY PUBLIC PARISH OF ST. TAMMANY LOUISIANA
NOTARY ID NO. 92724

Please submit a pdf copy of the completed form to: ereports@lla.la.gov - Updated 12/20

MY COMMISSION EXPIRES AT DEATH

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

#### Statement of Receipts and Disbursements

#### Statement A

	(	General		Other		
		Fund		Fund	Total	
RECEIPTS (Provide Brief Description):						
1.Maint Fees		47,199	\$		\$	
2.Interest Income		27				
3.Late fees		1,322				
4.						
5.						
6. Total receipts (add lines 1 - 5)	\$	48,548	\$		\$48,548	
DISBURSEMENTS (Provide Brief Description):						
7.Repairs and Maint	\$	24,757	\$		\$	
8.Utilities		5,901				
9.Salary		6,600				
10.Admin costs		4,050				
11.Water testing and permits		2,315				
12.						
13. Total Disbursements (add lines 7 - 12)	\$	43,623	\$		\$43,623	
14. Change in fund balance (Lines 6 minus 13)	\$		\$		\$4,925	
	\$		\$		\$4,925 \$115,429	
<ul> <li>14. Change in fund balance (Lines 6 minus 13)</li> <li>15. Fund Balance at beginning of year</li> <li>16. Fund balance (deficit) at end of year (Add lines 14-15)</li> </ul>						

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	
ASSETS (balances at year-end)			
1. Cash and cash equivalents	\$ 103,326	\$	\$
2. Investments (fair value)			
3. Office furnishings (Cost of desks, etc)			
Equipment and Land	18,086		
5. Other –Accts Receivable	2,530		
6. Total Assets (add lines 1 - 5)	\$ 123,942	\$	\$123,942
<b>LIABILITIES AND FUND BALANCE</b> (at year-end): 7. Liabilities (brief description):	\$	\$	\$
8. Prepaids	 3.588	<u> </u>	
9.			
10.			
11. Total Liabilities (add lines 7 - 10)	3,588		
12. Fund balance (amount from Line 16 on Statement A)	120,354		
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 123,942	\$	\$123,942

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#### Statement C

### Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Wayne G. Day, Chairman

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.		

\_\_XX\_\_ 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.)