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

Entity Name: American Rose Society
Address: 8877 Jefferson Paige Rd., Shreveport, LA 71119
Telephone: 318-938-5402 Email: executivedirector@rose.org
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@fla.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, JonCokern
(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 American Rose Society
(entity's name) as of12/31/2021 (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: n/a
Complete if Applicable: In addition, Jon Corkern (officer's name), who duly
sworn, deposes, and says that American Rose Society (entity's name) received \$75,000
or less in revenues and other sources for the year ended12/31/2021(entity's year-end), and
accordingly, is not required to have an audit for the previously mentioned fiscal year.
Executive Director
OFFICER'S SIGNATURE OFFICER'S TITLE
Sworn to and subscribed before me, this 22 day of Upul, 2022
Nancy McBryde #27168
DV DUDGE SIGNATURE & SEAL
RY PUBILIC SIGNATURIT & SEAL Parish of Caddo Commission is for Life

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### **Statement of Receipts and Disbursements**

#### Statement A

Cash

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):	. 2.000		s 3,000
<u>1.</u> 2.	\$ 3,000	\$	\$ 3,000
3.	-		
4.	-		
5.	1.		R
6. Total receipts (add lines 1 - 5)	\$ 3,000	\$	\$ 3,000
DISBURSEMENTS (Provide Brief Description): 7.	\$ 3,000	\$	\$ 3,000
8.	-		
9.			
10.			
11.			
12.			
13. Total Disbursements (add lines 7 - 12)	\$ 3,000	\$	\$ 3,000
14. Change in fund balance (Lines 6 minus 13)	\$ -0-	\$	s -0-
15. Fund Balance at beginning of year	\$ -0-	<u> </u>	\$ -0-
16. Fund balance (deficit) at end of year (Add lines 14-15)		<u> </u>	

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.

Identify the Basis of Accounting, if not using Cash-Basis: \_\_

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#### **Statement C**

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

Agency Head Name and Title: \_\_\_\_ American Rose Society - Jon Corkern, Executive Director

Purpose	<b>Dollar Amount</b>
1. Salary	1.72,000
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 - Holiday Bonus	17. 6,000
18. TOTAL (enter total of line 1-17)	18.78,000

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.)