

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

Entity Name: Main Street Homer Address: 419 West Main Street Homer, Louisiana 71040 Email: JHand@mainstreethomer.com Telephone: 318-548-5621

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

| Perso | onally came and appe | eared before | e the undersi | gned authori | ty, Jame | s Hand | | (officer's |
|--------|---------------------------------------|--------------|----------------|---------------|-------------|-------------|----------------|---------------|
| name | e), who, duly sworn, | deposes an | d says that th | e financial s | tatements | herewith g | iven present f | airly, in all |
| mate | rial respects, the fin | ancial posi | tion of Main | n Street Ho | mer | | (entity' | s name) as |
| of _ | June 30, 2024 | | | | | ations for | the year then | ended, in |
| accon | dance with the basis | s of accoun | ting describe | ed within the | e accompa | nying finar | icial statemen | ts; that the |
| entity | y has maintained a s | ystem of in | ternal contro | l structure s | ufficient t | o safeguard | assets and co | mply with |
| | and regulations; a ws: not applicable | | e entity ha | s complied | with all | laws and | regulations, | except as |

| Complete if Applicable: In addition, James Hand | (officer's name), who duly sworn, |
|--|--|
| deposes, and says that Main Street Homer | (entity's name) received \$75,000 or less |
| | e 30, 2024 (entity's year-end), and accordingly, |
| is not required to have an audit for the previously ment | ioned fiscal year. |
| OFFICER'S STONATURE | President OFFICER'S TITLE |
| 1 ant | of <u>august</u> , 20 24 |
| Moneratin Klame | |
| ±D 52691 Parish, LA | |
| Swom Financial Statement | Lindated: 08/07/202 |

Updated: 08/07/2023

Entity Name: Main Street Homer

Fiscal Year End: June 30, 2024

Statement of Receipts and Disbursements

Statement A

| | General Fund | Other Fund | Total |
|--|-----------------|-------------------|---------------|
| RECEIPTS (Provide Brief Description): | | | |
| 1. Donations & grants from state & local governments | \$ 20,000.00 | | \$ 20,000.00 |
| 2. Donations & grants from individuals, businesses & | \$ 36,397.71 | | \$ 36,397.71 |
| 3. Revenue from fundraising events | \$ 15,668.15 | | \$ 15,668.15 |
| 4. Other revenue (program revenue) | | | \$ 0.00 |
| 5. | | | \$ 0.00 |
| 6. Total receipts (add lines 1 - 5) | \$ 72,065.86 | \$ 0.00 | \$ 72,065.86 |
| DISBURSEMENTS (Provide Brief Description): | | | |
| 7. Contract service fees | \$ 21,650.00 | | \$ 21,650.00 |
| 8. Facilities & equipment costs | \$ 21,424.16 | | \$ 21,424.16 |
| 9. Insurance & operational costs | \$ 5,602.77 | | \$ 5,602.77 |
| 10. Conference, meetings, & related travel | \$ 2,480.03 | | \$ 2,480.03 |
| 11. Cost of fundraising events | \$ 3,697.84 | | \$ 3,697.84 |
| 12. Other | \$ 7,610.15 | | \$ 7,610.15 |
| 13. Total Disbursements (add lines 7 - 12) | \$ 62,464.95 | \$ 0.00 | \$ 62,464.95 |
| 14. Change in fund balance (Lines 6 minus 13) | \$ 9,600.91 | \$ 0.00 | \$ 9,600.91 |
| 15. Fund Balance at beginning of year | \$ 246,284.02 | + 0.00 | \$ 246,284.02 |
| 16. Fund balance (deficit) at end of year (Add lines 14-15) This amount also goes on line 12, Statement B | 255884.93 | 0 | 255884.93 |

Identify the Basis of Accounting, if not using Cash-Basis: 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.*

Sworn Financial Statement

Fiscal Year End: _______ June 30, 2024

Balance Sheet

Statement B

| eral d | Other Fund | Total |
|-----------|---------------|--------------------------|
| | | |
| | | |
| 03.39 | | \$ 25,203.39 |
| | | \$ 0.00 |
| | | \$ 0.00 |
| | | \$ 0.00 |
| 45.14 | | \$ 343,045.14 |
| 48.53 | \$ 0.00 | \$ 368'248.53 |
| 63.60 | | \$ 2,363.60 |
| | | |
| 00.00 | | \$ 110,000.00 |
| | | \$ 0.00 |
| | | \$ 0.00 |
| | | |
| 63.60 | \$ 0.00 | \$ 112,363.60 |
| 5884.93 | 0 | 255884.93 |
| | | * • • • • |
| 48.53 | \$ 0 00 | \$ 0.00 \$ 368,248.53 |
| 41 | 8.53 | 8.53 \$ 0.00 |

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Amri Douglas, Executive Director, Consultant
Agency Head Name, Title:

| Purpose | Dollar Amount |
|---|---------------|
| 1. Salary | |
| 2. Benefits-insurance | |
| 3. Benefits-retirement | |
| 4. Benefits-other (describe) | |
| 5. Benefits-other (describe) | |
| 6. Benefits-other (describe) | |
| 7. Car allowance | |
| 8. Vehicle provided by government (if reported on your W-2) | |
| 9. Per diem | |
| 10. Reimbursements | |
| 11. Travel | \$ 723.75 |
| 12. Registration fees | |
| 13. Conference travel | |
| 14. Housing | |
| 15. Unvouchered expenses (example: travel advances, etc.) | |
| 16. Special meals | |
| 17. Other | \$ 11,250.00 |
| 18. TOTAL (enter total of line 1-17) | \$ 11,973.75 |

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