Sworn Financial Statements and Certification of Revenues \$75,000 or Less Entity Name: <u>Scottish Society of the Louisiana Highlands</u>

Address: P.O. Box 44431, Shreveport, LA 71134

Telephone: <u>318-393-2693</u>

Email: scottishsociety@gmail.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 <u>ereports@lla.la.gov</u>, 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, SHELIA R. HOH (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 SCOTTISH SOCIETY OF THE LOUISIANA HIGHLANDS (entity's name) as of 12/31/2022 (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

<u>Complete if Applicable:</u> In addition, SHELIA R. HOH (officer's name), who duly sworn, deposes, and says that SCOTTISH SOCIETY OF THE LOUISIANA HIGHLANDS (entity's name) received \$75,000 or less in revenues and other sources for the year ended 12/31/2022 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

OFFICER'S SIGNATURE Shelia Hoh

State of Louisiana Parish of Bossier

Sworn to and subscribed before me, this 28 day of Feb

NOTARY PUBLIC SIGNATURE & SEAL

ALAN A. WARREN Notary Public ID#87267 Caddo Parish, Louisiana My Commission is for Life PRESIDENT OFFICER'S TITLE

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### Sworn Financial Statements and Certification of Revenues \$75,000 or Less Entity Name: SCOTTISH SOCIETY OF THE LOUISIANA HIGHLANDS Fiscal Year End: 2022

Statement of Receipts and Disbursements

Statement A

	General Fund	Other Fund
<b>RECEIPTS (Provide Brief Description):</b>		
1.BURNS SUPPER REVENUE	4546	<u>\$</u>
2. TARTAN FESTIVAL REVENUE	24506.73	
3. WEBSTER PARISH GRANT	4000	
4. MEMBER DUES/DONATION	955	<b>.</b>
5	<u> </u>	
6. Total receipts (add lines 1 - 5)	\$34,007.73	\$
DISBURSEMENTS (Provide Brief Description):		
7. BURNS SUPPER EXPENSES		\$
8. TARTAN FESTIVAL EXPENSES	24953.79	
9. INSURANCE	1515.93	
10. EXPENSES (P,O BOX, STAMPS, ETC.)	240	
11. CELTIC MUSIC EXPO	480	·
12. T-SHIRTS	641	
13. POSTER/FLYER PRINTING	1135.87	
14. WEB HOSTING	210	<b></b>
15. GOLF CART RENTAL FOR FESTIVAL	141.77	
16. PETTY CASH OUT	147	
17. SCOTTISH HERITAGE SUPPLIES	320	
18. Total Disbursements (add lines 7 - 18)	33955.94	
19. Change in fund balance (Lines 6 minus 18)	51.79	\$
20. Fund Balance at beginning of year	24716.76	\$
21. Fund balance (deficit) at end of year (Add lines 14-15)		
This amount also goes on line 12, Statement B	\$24,768.55	

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.* 

# Sworn Financial Statements and Certification of Revenues \$75,000 or Less Entity Name: SCOTTISH SOCIETY OF THE LOUISIANA HIGHLANDS Fiscal Year End: 2022

#### Statement B **Balance Sheet** Other General Fund Fund ASSETS (balances at year-end) 1. Cash and cash equivalents \$24,915.55 \$ 2. Investments (fair value) 3. Office furnishings (Cost of desks, etc) 4. Equipment (Cost of fax machine, etc) 365 5. Other (T-Shirt and Heritage Inventory) \$25,280.55 6. Total Assets (add lines 1 - 5) \$ LIABILITIES AND FUND BALANCE (at year-end): \$0.00 7. Liabilities (brief description): \$ 8. 9. 10. 0 11. Total Liabilities (add lines 7 - 10) 12. Fund balance (amount from Line 21 on Statement A) \$24,768.55 512 13. Other (Petty Cash and Inventory) 14. Total Liabilities and Fund Balance (add lines 11 - 13) \$ \$25,280.55

## Statement C

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

Agency Head Name and Title: Shelia R. Hoh, President

Purpose	Dollar Amount
1. Salary	1 \$0
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 \$0

<u>X</u> 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.)

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