Entity Name: GRANT PARISH POLICE JURY HERMAN PARK SEWER SYSTEM

Address: 200 MAIN STREET

COLFAX, LA 71417

Telephone: 318-627-3157 Email: SISSYPACE@GPPJ.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@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, JESSIE PACE (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 GRANT PARISH POLICE JURY HERMAN PARK SEWER SYSTEM (entity's name) as of 12/31/2020 (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, JESSIE PACE (officer's name), who duly sworn, deposes, and says that GRANT PARISH POLICE JURY HERMAN PARK SEWER SYSTEM (entity's name) received \$75,000 or less in revenues and other sources for the year ended 12/31/2020 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

OFFICER'S SIGNATURE

Sworn to and subscribed before me, this 21th day of 4 th day of 2021

NOTARY PUBLIC SIGNATURE & SEAL Melinda Graves Lasnier

90050

Statement of Receipts and Disbursements

Statement A

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):	\$8,848.00	\$	\$8,848.00
1. DEPOSITS	φο,040.00	Φ	_ \$0,040.00
<u>2.</u> 3.		_	
4.		_	
5.		_	
6. Total receipts (add lines 1 - 5)	\$8,848.00	\$	\$8,848.00
DISBURSEMENTS (Provide Brief Description):			
7. UTILITIES	\$1,905.99	\$	\$1,905.99
8. MAINTENANCE / REPAIRS	\$8,957.70		\$8,957.70
9.			
10.			
11.			
12.			_
13. Total Disbursements (add lines 7 - 12)	\$10,863.69	_ \$	\$10,863.69
14. Change in fund balance (Lines 6 minus 13)	\$-2,015.69	\$	\$-2,015.69
15. Fund Balance at beginning of year	\$9,933.17	\$	\$9,933.17
16. Fund balance (deficit) at end of year (Add lines 14-15)This amount also goes on line 12, Statement B	\$7,917.48	\$	\$7,917.48

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		3	Statement B
	General Fund	Other Fund	Total
ASSETS (balances at year-end)			
Cash and cash equivalents	\$7,917.48	\$	\$7,917.48
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)	\$7,917.48	\$	\$7,917.48
LIABILITIES AND FUND BALANCE (at year-end):	•		
7. Liabilities (brief description):	\$	\$	_ \$
8.			
9.			
10.			
11. Total Liabilities (add lines 7 - 10)			
12. Fund balance (amount from Line 16 on Statement A)			
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$7,917.48	\$	\$7,917.48

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: JESSIE PACE, PARISH MANAGER / SECRETARY / TREASURER GRANT PARISH POLICE JURY

Purpose	Dollar Amount		
1. Salary	1.		
2. Benefits-insurance	2.		
Benefits-retirement	3.		
Benefits-other (describe)	4.		
5. Benefits-other (describe)	5.		
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.		

X 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.)

Instructions to Prepare Sworn Financial Statements for the Louisiana Legislative Auditor

The enclosed financial statements have four pages:

The first page is an affidavit in which you will affirm that your revenues are in line with the reporting requirements for a sworn financial statement:

Governmental agencies: Affirm that you received \$75,000 or less in total revenues during the year.

Non-profit entities: Affirm that you received \$75,000 or less in public funds during the year.

- --Public funds are those received from a state or local governmental entity, or federal funds passed from a state or local governmental entity.
- -PLEASE NOTE: Non-profit entities are not required to submit a financial report to the Legislative Auditor during any year in which they did not receive any public funds. Please notify us in writing that your entity did not receive any public funds during the year under consideration. Please inform us prior to the due date of your report to stay in compliance with the state law.

The second page is Statement A. This statement tells the Legislative Auditor how much public funds your agency took in and paid out during the year. . See instructions below.

The third page is Statement B. This statement tells the Legislative Auditor what your ending balances are in the various accounts as listed on the form. See instructions below.

The fourth page is Statement C. This statement is the schedule of compensation, benefits, and other payments made to the head of your agency or the chief executive officer. It is **required** to be completed by Act 706 of the 2014 Legislative Session. See instructions below.

<u>Instructions to Prepare Statement A</u>: The cash basis of accounting is presumed unless the entity notes otherwise on Statement A.

Receipts - Monies Received During the Year:

- The General Fund column is used to report any monies your agency receives or expends for general purposes. The Other Fund column is used to report any monies your agency receives or expends for special purposes, such as restricted grant funds or utilities.
- Line 1-5. List the types and amounts of your agency's receipts, or monies your agency received, during the
 year. Give a brief explanation of what these receipts were (taxes, fees, grants from which federal/state/local
 sources, etc.) A separate page may be used if necessary.
- 3. Line 6. Enter total of lines 1-5.

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.

Disbursements - Money Spent During the Year:

- 4. Lines 7-12. List the types and amounts of your agency's disbursements, or monies your agency paid out, during the year. Give a brief description of what these disbursements were for (payroll, rent, utilities, etc.).
- 5. Line 13. Enter total of lines 7-12.
- 6. Line 14. Enter the difference between Line 13 and Line 6. If line 13 is greater than line 6, indicate that the line 14 amount is a negative number.
- 7. Line 15. Enter your agency's fund balance, this is the amount carried over from last year, if applicable.
- 8. Line 16. Enter the total of lines 14 and 15; this is the Fund Balance.
- 9. If line 16 of Statement A is zero, and all of the amounts in Statement B are zero, you do not need to submit Statement B.

Instructions to Prepare Statement B:

Assets:

Line 1. Cash and cash equivalents on hand. Enter your agency's ending cash balance (this includes petty cash, all checking and savings accounts, and CD's with maturity less than 3 months).

Line 2. <u>Investments on hand</u>. Enter your agency's ending investment balance. Leave blank if your agency has no investments.

Line 3. Office furnishings. Enter the cost of your agency's office furnishings, less any depreciation (if applicable). Leave blank if your agency is not keeping track of this information.

Line 4. Equipment. Enter the cost of your agency's equipment, less any depreciation (if applicable). Leave blank if your agency is not keeping track of this information.

Line 6. Total Assets. Enter total of lines 1 - 5.

Liabilities and Fund Balance:

Lines 7-10. <u>Liabilities</u>. List the type and amount of any bills your agency owes to outside parties, but has not paid out at the end of the year (payroll, payments due to vendors, etc.).

Line 11. Total Liabilities. Enter the total of lines 7 - 10.

Line 12. Fund balance. Enter the amount, if any, from line 16 of Statement A.

Line 13. Other. Leave blank unless you have other fund balances.

Line 14. Total Liabilities and Fund Balance. Enter the total of lines 11, 12, and 13.

[NOTE: Line 6 should equal line 14 — Total Assets = Total Liabilities Plus Fund Balance.]

Instructions to Prepare Statement C:

This statement is the schedule of compensation, benefits, and other payments made to the head of your entity or the chief executive officer. It is **required to be completed and submitted** per Act 706 of the 2014 Legislative Session.

- Enter your agency name at the top of page.
- 2. Enter the name and title of the head or chief executive officer of your agency.
- 3. Enter the amounts of compensation and/or benefits received in the appropriate lines.
- 4. Enter the total of lines 1-17 on line 18.
- 5. <u>If the head or chief executive officer of your agency does not receive any compensation or benefits, please check the statement at the bottom of the form.</u>
- Note for Non-profit Entities: Act 462 of the 2015 Legislative Session amends Act 706 to allow not-for-profit (quasi-public) entities to report on the Act 706 schedule only those payments to the agency head that are derived from public funds.

Instructions to Complete and Submit Financial Statement Forms:

- 1. Take Statement A, Statement C, (and Statement B if you have filled it out) and the affidavit page to a notary public. Fill out all the information in the affidavit form in the presence of the notary. The notary will witness your signature and affix his or her seal to the affidavit.
- 2. MAKE AND RETAIN A COPY OF ALL INFORMATION THAT YOU SEND TO THE LEGISLATIVE AUDITOR FOR YOUR RECORDS.
- 3. Send to the Legislative Auditor the affidavit, Statement A and Statement C, (and statement B if applicable) on or before ninety days of your agency's fiscal year end.

You can submit a pdf copy of the report by email to: ereports@lla.la.gov

Or by fax to 225-339-3986, or by regular mail to:

Louisiana Legislative Auditor – Local Government Services Post Office Box 94397 Baton Rouge, LA 70804-9397

HERMAN PARK SEWER SYSTEM Profit & Loss Detail

January through December 2020

Туре	Date	Num	Name	Memo	Clr	Split	Amount	Balance
Ordinary Income/Expens	Α.							
Income								
OTHER REVENUE								
Deposit	01/07/2020	DEP		SOUTH GRA		CASH-CHECK	720.00	720.00
Deposit	02/03/2020	DEP		Deposit		CASH-CHECK	720.00	1,440.00
Deposit	03/09/2020			SEWER BILL		CASH-CHECK	720.00	2,160.00
Deposit	04/07/2020			SEWER BILL		CASH-CHECK	752.00	2,912.00
Deposit	05/05/2020			SEWER BILL		CASH-CHECK	752.00	3,664.00
Deposit	06/05/2020			SEWER BILL		CASH-CHECK	752.00	4,416.00
Deposit	07/08/2020	DEP		SEWER BILL		CASH-CHECK	768.00	5,184.00
Deposit	08/04/2020	DEPO		Deposit		CASH-CHECK	736.00	5,920.00
Deposit	09/09/2020	DEPO		Deposit		CASH-CHECK	736.00	6,656.00
Deposit	11/01/2020	DEPO		PAYMENT F		CASH-CHECK	720.00	7,376.00
Deposit	11/18/2020	DEPO		Deposit		CASH-CHECK	736.00	8,112.00
Deposit	12/04/2020	DEP	SOUTH GRANT WA	PAYMENT F		CASH-CHECK	736.00	8,848.00
Total OTHER REVE	ENUE						8,848.00	8,848.00
Total Income							8,848.00	8,848.00
Expense								
REPAIRS AND MA	TINTENANCE							
Check	01/16/2020	1109	ADAM TARVER, LLC	INV #105 MAI		CASH-CHECK	300.00	300.00
Check	02/24/2020	1111	ADAM TARVER, LLC	JANUARY 2020		CASH-CHECK	300.00	600.00
Check	03/26/2020	1114	ADAM TARVER, LLC	INVOICE#107		CASH-CHECK	600.00	1,200.00
Check	05/05/2020	1117	TURNAGE ENVIRO	OPERATION		CASH-CHECK	300.00	1.500.00
Check	05/05/2020	1117	TURNAGE ENVIRO	LOCKS FRO		CASH-CHECK	25.90	1,525.90
Check	06/09/2020	1119	TURNAGE ENVIRO	Invoice # 202		CASH-CHECK	400.00	1,925.90
Check	07/07/2020	1121	TURNAGE ENVIRO	INV # 2020-160		CASH-CHECK	400.00	2.325.90
Check	08/13/2020	1122	TURNAGE ENVIRO	INV # 2020-1		CASH-CHECK	400.00	2,725.90
Check	09/09/2020	1125	TURNAGE ENVIRO	INV #2020-208		CASH-CHECK	520.85	3,246.75
Check	10/06/2020	1127	TURNAGE ENVIRO	INV#2020-225		CASH-CHECK	400.00	3.646.75
Check	11/12/2020	1129	TURNAGE ENVIRO	INV # 2020-251		CASH-CHECK	400.00	4,046.75
Check	12/01/2020	1130	TURNAGE ENVIRO	INV # 2020-273		CASH-CHECK	400.00	4,446.75
Check	12/16/2020	1132	ELECTRIC MOTOR	INV # 152230		CASH-CHECK	4,510.95	8,957.70
Total REPAIRS AN	D MATINTENAM	NCE					8,957.70	8,957.70
UTILITIES								
Check	01/06/2020	1108	SOUTH GRANT WA	ACCT#30000		CASH-CHECK	20.50	20.50
Check	01/08/2020	EFT	CLECO	UTILITY BILL		CASH-CHECK	169.28	189.78
Check	02/04/2020	1110	SOUTH GRANT WA	ACCOUNT# 0		CASH-CHECK	20.50	210.28
Check	02/11/2020	EFT	CLECO			CASH-CHECK	186.24	396.52
Check	03/05/2020	1112	SOUTH GRANT WA	ACCT #03000		CASH-CHECK	20.50	417.02
Check	03/11/2020	DEBIT		CLECO POW		CASH-CHECK	179.50	596.52
Check	04/07/2020	1115	SOUTH GRANT WA	ACCT# 03000		CASH-CHECK	20.50	617.02
Check	04/08/2020	DEBIT		CLECO POW		CASH-CHECK	154.40	771.42
Check	05/05/2020	1116	SOUTH GRANT WA	ACCT# 03000		CASH-CHECK	20.50	791.92
Check	05/12/2020	DEBIT		CLECO POW		CASH-CHECK	166.22	958.14
Check	06/09/2020	1118	SOUTH GRANT WA	Acct # 03000		CASH-CHECK	20.50	978.64

HERMAN PARK SEWER SYSTEM Profit & Loss Detail

January through December 2020

Туре	Date	Num	Name	Memo	Clr	Split	Amount	Balance
Check	06/09/2020	DEBIT	CLECO			CASH-CHECK	165.45	1,144.09
Check	07/07/2020	1120	SOUTH GRANT WA	ACCT # 0300		CASH-CHECK	20.50	1,164.59
Check	07/09/2020	DEBIT	CLECO	CLECO POW		CASH-CHECK	152.81	1,317.40
Check	08/07/2020	DEBIT	CLECO			CASH-CHECK	148.60	1,466.00
Check	08/07/2020	1123	SOUTH GRANT WA	ACCT # 0300		CASH-CHECK	20.50	1,486.50
Check	09/09/2020	DEBIT	CLECO			CASH-CHECK	173.40	1,659.90
Check	09/09/2020	1124	SOUTH GRANT WA	ACCT # 0300		CASH-CHECK	20.50	1,680.40
Check	10/06/2020	1126	SOUTH GRANT WA	ACCT# 03000		CASH-CHECK	20.50	1,700.90
Check	10/09/2020	DEBIT	CLECO			CASH-CHECK	67.48	1,768.38
Check	11/10/2020	DEBIT	CLECO			CASH-CHECK	52.76	1,821.14
Check	11/12/2020	1128	SOUTH GRANT WA	ACCT # 0300		CASH-CHECK	20.50	1,841.64
Check	12/04/2020	1131	SOUTH GRANT WA	ACCT#03000		CASH-CHECK	20.50	1,862.14
Check	12/09/2020	DEBIT	CLECO	CLECO POW		CASH-CHECK	43.85	1,905.99
Total UTILITIES						0-	1,905.99	1,905.99
Total Expense						_	10,863.69	10,863.69
Net Ordinary Income							-2,015.69	-2,015.69
t Income							-2,015.69	-2,015.69