The Safety Place

 The Safety Place
 (Entity Name)

 Baton Rouge, EBR, LA
 (City, Parish/State RECEIVED MAR 08 2021

 MAR 08 2021
 LEGISLATIVE AUDITOR

TRANSMITTAL LETTER

ANNUAL FINANCIAL STATEMENTS

12/31/2020 (Date)

Ms. Gayle Fransen **Engagement Manager** Louisiana Legislative Auditor 1600 North Third Street Baton Rouge, LA 70802

Dear Ms. Fransen:

In accordance with Louisiana Revised Statute 24:513, enclosed are the Affidavit and Revenue Certification Form and the annual financial statements for my entity, as of and for the year ended _____ 2020 (entity's year-end). The statements include all funds under the control of this entity. The accompanying financial statements have been prepared on the cash basis of accounting.

Sincerely,

Officer's Signature

Chystar H. Richon

Enclosures

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENT FOR YOUR RECORDS

Affidavit and Revenue Certification

The Safety Place ENTITY NAME East Baton Rouge Parish Baton Rouge, LA (City), State

ANNUAL SWORN FINANCIAL STATEMENTS AND CERTIFICATION OF REVENUES \$75,000 OR LESS (if applicable)

The annual sworn financial statements are required by Louisiana Revised Statute 24:514 to be filed with the Legislative Auditor within 90 days after the close of the fiscal year. The certification of revenues of \$75,000 or less, if applicable, is required by Louisiana Revised Statute 24:513(J)(1)(c)(i)(aa). ************************

Crystal Pichon Personally came and appeared before the undersigned authority, (enter officer name), who, duly swom, deposes and says that the financial statements herewith given present fairly the financial position of The Safety Place (enter entity name) as of fairly the financial position of (enter entity 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.

(Complete if applicable)

Pichon In addition, Crystal , (officer name), who, duly sworn, deposes and says that The Safety Place (entity name) received \$75,000 or less in revenues and other 12/31/2020 sources for the year ended , and accordingly, is not required to have an audit for the previously mentioned year.

Officer's Signature

Sworn to and subscribed before me this

Y PUBLIC SIGNATURE

Amy Burleigh Notary Public #61141 State of Louisiana Parish of Ascension My Commission is for Life

For Office Use Only

Under provisions of state law, this report will become a public document on the Monday following the release date. A copy of the report will be submitted to appropriate public officials and be available for public inspection at the Baton Rouge office of the Louisiana Legislative Auditor and, where appropriate, at the office of the parish clerk of court.

> 4/14/2021 Release Date

Pleas	e Complete This Section	
Officer's Name	Crystal Pichon	
Officer's Title	Chief Executive Officer	
Address 20	41 Silverside Dr.	
City, Zip Baton	Rouge, LA 70808	
Ph: Cell/Land	225-372-3991	
E-mail crystal	@safetyplacela.org	

Please return the completed form within 90 days of your entity's year-end to Louisiana Legislative Auditor - Local Government Services; Post Office Box 94397, Baton Rouge, LA 70804-9397 - Updated 8/3/16

Statement A Page 3

The Safety Place

(Agency Name)

Statement of Cash Receipts and Disbursements

For the Year Ended 2020 (Year-End)

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description): 1. LA Highway Safety Commission 2.	\$ 69,716.00	\$	\$ 69,716.00
<u>2.</u> <u>3.</u> <u>4.</u>			
5. 6. Total receipts (add lines 1 - 5)	\$ 69,716.00	\$	\$ 69,716.00
DISBURSEMENTS (Provide Brief Description): 7. Personnel Services/Payroll	\$ 29,177.00	D \$	\$ 29,177.00
8. Travel 9. Contractual Services	2,284.00	0	<u> </u>
10. Operating Expenses 11. Supplies 12. Supplies	1,653.00 2,736.00	0	<u>1,653.00</u> <u>2,736.00</u>
12. Indirect Costs 13. Total Disbursements (add lines 7 - 12)	6012.00 \$ 69,716.00		<u>6012.0</u> 0 <u>\$69,716.0</u> 0
14. Change in fund balance (Lines 6 minus 13) 15. Fund Balance at beginning of year	\$ 0.00 \$ 0.00	\$ \$	\$ 0.00 \$ 0.00
16. Fund balance (deficit) at end of year (Add lines 14-15) This amount also goes on line 12, Statement B	\$ 0.00	\$	\$ 0.00

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Statement B Page 4

The Safety Place

(Agency Name)

Balance Sheet, on 12/31/2020 (Year-End)

	General Fund	Other Fund	Total
ASSETS (balances at year-end) -Give brief description: 1. Cash and cash equivalents on hand	\$ 0.00	\$	\$ 0.00
2. Investments (fair value) on hand	·		
Office furnishings (Cost of desks, etc)			
Equipment (Cost of fax machine, etc)		_	
5. Other (brief description)			
6. Total Assets (add lines 1 - 5)	\$ 0.00	\$	\$ 0.00
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (give brief description): 8.	\$ 0.00	\$	\$ 0.00
<u>8.</u> 9.			
10.	_		
11. Total Liabilities (add lines 7 - 10)	0.00		0.00
12. Fund balance (amount from Line 16 on Statement A) 13. Other	0.00		0.00
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 0.00	\$	\$ 0.00

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The Safety Place

(Agency Name)

Schedule of Compensation, Benefits and Other Payments to Agency Head or Chief Executive Officer (Required Form - Please Submit Completed Form Per Attached Instructions)

For the Year Ended 12/31/2020 (Year-End)

Agency Head Name and Title: Crystal Pichon-Chief Executive Officer

Purpose	Dollar Amount	
1. Salary	1. 0.00	
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. 0.00	

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.)

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