Entity Name: Hermitage Cross Creek Crime Prevention and Development District
Address: 7516 Bluebonnet Boulevard #165, Baton Rouge, Louisiana 70810
Telephone: (225) 650-9694 Email hcccpdd@yahoo.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 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, <u>Sammie E. Grimes</u> (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 <u>Hermitage Cross Creek Crime District</u> (entity's name) as of <u>2022</u> (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: <u>N/A</u>
Complete if Applicable: In addition, Sammie E. Grimes (officer's name), who duly sworn,
deposes, and says that <u>Hermitage Cross Creek Crime District</u> (entity's name) received \$75,000 or less
in revenues and other sources for the year ended 2022 (entity's year-end), and accordingly,
is not required to have an audit for the previously mentioned fiscal year.
Schuric C. Strines OFFICER'S SIGNATURE OFFICER'S TITLE
Sworn to and subscribed before me, this 3 day of MILM , 20 73
OFFICIAL SEAL CASSANDRA R. ALLAIN NOTARY PUBLIC SIGNATURE & SEAL OFFICIAL SEAL CASSANDRA R. ALLAIN NOTARY ID # 137528 STATE OF LOUISIANA MILITARY PUBLIC SIGNATURE & SEAL

Entity Name:	Hermitage Cross Creek Crime District	Fiscal Year End:	2022

Statement of Receipts and Disbursements

Statement A

		General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):				
1.Public Funds	\$ 45	5,459.81	\$	_ \$
2. 3.				
3.				
4.				
5.				
6. Total receipts (add lines 1 - 5)	\$		\$	\$
DISBURSEMENTS (Provide Brief Description):				
7. Wages	\$ 38	3,750.00	\$	\$
8. Community Security Lightings	2	2,741.17		
9. Stamps, Office Supplies and Newsletter	2	2,579.11		
10.Equipment Repair/Fence Repair	•	,256.36		
11.				
12.				
13. Total Disbursements (add lines 7 - 12)	\$ 45	5,326.64	\$	\$
14. Change in fund balance (Lines 6 minus 13)	\$	133.17	\$	\$
15. Fund Balance at beginning of year	\$	67.44	\$	\$
16. Fund balance (deficit) at end of year (Add lines 14-15)				
This amount also goes on line 12, Statement B	\$	201.61	\$	\$

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

Entity Name: Hermitage Cross Creek Crime District Fiscal Year End: 2022

Balance Sheet				Staten	nent B
	 General Fund		Other Fund	т	otal
ASSETS (balances at year-end)					
Cash and cash equivalents	\$ 201.61	\$		\$	
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)	\$ 201.61	\$		\$	
LIABILITIES AND FUND BALANCE (at year-end):					
7. Liabilities (brief description):	\$ 0.00	\$		<u> \$ </u>	
8.	 A				
9.	 				
10.	 				
11. Total Liabilities (add lines 7 - 10)		_			
12. Fund balance (amount from Line 16 on Statement A)	 201.61				
13. Other	 				
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 201.61	\$		\$	

Entity Name:	Hermitage Cross Creek Crime District	Fiscal	Year	End:	2022
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Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Sammie E. Grimes, President

Purpose	Dollar Amount
1. Salary	1.
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.

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.)