

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

Entity Name: Concordia PAWS

Address: P O Box 671 Ferriday, LA 71334

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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, Dianne Watson (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 Concordia PAWS (entity's name) as of 12-31-2023 (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: Late report submission

Complete if Applicable: In addition, Dianne Watson (officer's name), who duly sworn, deposes, and says that Concordia PAWS (entity's name) received \$75,000 or less in revenues and other sources for the year ended 12-31-2023 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

Dianne Watson
OFFICER'S SIGNATURE

TREASURER
OFFICER'S TITLE

Sworn to and subscribed before me, this 8 day of May, 2024

Connie J. Brown
NOTARY PUBLIC SIGNATURE 35944

Entity Name: Concordia PAWS

Fiscal Year End: 12-31-2023

Statement of Receipts and Disbursements

Statement A

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
RECEIPTS (Provide Brief Description):			
1. Donations	89,114		89,114
2. Interest	22		22
3. Concordia Parish Police Jury Support	30,000		30,000
4.			
5.			
6. Total receipts (add lines 1 - 5)	<u>119,136</u>		<u>119,136</u>
DISBURSEMENTS (Provide Brief Description):			
7. Veterinary Fees	63,628		63,628
8. Supplies	21,350		21,350
9. Payroll	8,334		8,334
10. Repairs & maintenance	5,335		5,335
11. Utilities	12,240		12,240
12. Other	11,170		11,170
13. Total Disbursements (add lines 7 - 12)	<u>122,057</u>		<u>122,057</u>
14. Change in fund balance (Lines 6 minus 13)	<2,921>		<2,921>
15. Fund Balance at beginning of year	69,005		69,005
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	66,084		66,084

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

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: Concordia PAWS Fiscal Year End: 12-31-2023

Balance Sheet

Statement B

	General Fund	Other Fund	Total
ASSETS (balances at year-end)			
1. Cash and cash equivalents	21,668		21,668
2. Investments (fair value)			
3. Office furnishings (Cost of desks, etc)			
4. Equipment (Cost of fax machine, etc)			
5. Other (brief description) <i>Building: Land net of depreciation</i>	44,500		44,500
6. Total Assets (add lines 1 - 5)	66,168		66,168
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (brief description):			
Payroll taxes	84		84
8.			
9.			
10.			
11. Total Liabilities (add lines 7 - 10)	84		84
12. Fund balance (amount from Line 16 on Statement A)	66,084		66,084
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	66,168		66,168

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name, Title: Sherrie McMahon, President

Purpose	Dollar Amount	
1. Salary	none	
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		
12. Registration fees		
13. Conference travel		
14. Housing		
15. Unvouchered expenses (example: travel advances, etc.)		
16. Special meals		
17. Other		
18. TOTAL (enter total of line 1-17)		✓

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.)