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Affidavit and Revenue Certification

Pentecost Missionary Baptist Church Slidell ENTITY NAME

St Tammany Parish

Slidell, La (City), State

**ANNUAL SWORN FINANCIAL STATEMENTS AND
CERTIFICATION OF REVENUES \$50,000 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 \$50,000 or less, if applicable, is required by Louisiana Revised Statute 24:513(l)(1)(c)(i).

Personally came and appeared before the undersigned authority, Gary Wood (officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of Director _____ (entity name) as of November 2014 _____ (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)

In addition, Gary Wood (officer name), who, duly sworn, deposes and says that Pentecost Missionary Baptist Church Slidell (entity name) received \$50,000 or less in revenues and other sources for the year ended 2014, and accordingly, is not required to have an audit for the previously mentioned year.

Gary Wood

Officer Signature

Sworn to and subscribed before me this 18 day of December, 2014

[Signature]

NOTARY PUBLIC



Officer's Name Gary Wood

Officer's Title Director

Address 36138 Shady Lane Slidell, La 70460

Fax/E-mail 985-641-5527/985-641-5430/pbchu@bellsouth.net

Under provisions of state law, this report is a public document. A copy of the report has been submitted to the entity and other appropriate public officials. The report is available for public inspection at the Baton Rouge office of the Legislative Auditor and, where appropriate, at the office of the parish clerk of court.

Release Date MAY 06 2015

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

Pentecost Missionary Baptist Church Slidell (Agency Name)**Statement of Cash Receipts and Disbursements**
For the Year Ended 2014 (Year-End)

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description)			
1 Church Auxiliaries/Ministries Donations	\$2200	\$ 0	\$ 2200
2 Loan from Church	5000	0	5000
3 Camp	37477	0	37477
4 State money	0	32925	0
5	0	0	0
6 Total receipts (add lines 1 - 5)	\$44677	\$32925	\$77602
DISBURSEMENTS (Provide Brief Description)			
7 Trans/Field Trips	\$ 8793	\$ 0	\$ 8798
8 Elec Checks/Bank Charges	1696	0	1696
9 Salaries Paid by Camp Fees	20690	0	20690
10 Op Cost (5213)/Loan Paid Back to Church (5000)	10213	0	10213
11 Pon/Supplies/Equip	0	18736	18736
12 State Funded Salaries	0	16450	16450
13 Total Disbursements (add lines 7 - 12)	\$41392	\$ 35186	\$ 76578
14 Change in fund balance (Lines 6 minus 13)	\$ 3285	\$ -2261	\$ 1024
15 Fund Balance at beginning of year	\$ 1094	\$ 0	\$ 1094
16 Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	\$ 4379	\$ -2261	\$ 2118

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

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Statement B

Pentecost Missionary Baptist Church Slidell (Agency Name)

Balance Sheet, on Dec 2014 (Year-End)

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
ASSETS (balances at year-end) -Give brief description			
1 Cash and cash equivalents on hand	\$ 1024	\$ 0	\$ 1024
2 Investments (fair value) on hand	0	0	0
3 Office furnishings (Cost of desks, etc)	0	0	0
4 Equipment (Cost of fax machine, etc)	0	0	0
5 Other (brief description)			
6 Total Assets (add lines 1 - 5)	<u>\$ 1024</u>	<u>\$ 0</u>	<u>\$ 1024</u>
LIABILITIES AND FUND BALANCE (at year-end)			
7 Liabilities (give brief description)			
8	\$ 0	\$ 0	\$ 0
9	0	0	0
10	0	0	0
11 Total Liabilities (add lines 7 - 10)	0	0	0
12 Fund balance (amount from Line 16 on Statement A)	4379	-2261	1024
13 Other	0	0	0
14 Total Liabilities and Fund Balance (add lines 11 - 13)	<u>\$4379</u>	<u>\$-2261</u>	<u>\$1024</u>

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Statement C

Schedule of Compensation, Benefits and Other Payments to Agency Head or Chief Executive Officer

Agency Head Name: Pentecost Missionary Baptist Church Summer Camp

Purpose	Amount
Salary	0
Benefits-insurance	0
Benefits-retirement	0
Benefits-other (describe)	0
Benefits-other (describe)	0
Benefits-other (describe)	0
Car allowance	0
Vehicle provided by government (enter amount reported on W-2)	0
Per diem	0
Reimbursements	0
Travel	0
Registration fees	0
Conference travel	0
Housing	0
Unvouchered expenses (example: travel advances, etc.)	0
Special meals	0
Other	0



Signature **Gary Wood**

I did not receive a salary for the camp. My time was volunteered along with our assistant director.

GARY WOOD
Gary Wood
Director / Pastor