## **Statement of Affirmation**

## Annual Operating Budget FY2016-2017

The charter school listed below is implementing Board-approved internal control procedures to assure the financial data contained in the report is truthful. I hereby certify that to the best of my knowledge and belief, the data reported in the attached Annual Operating Budget (Actual data for FY2015-2016 and Budgeted data for FY2016-2017) constitutes a true and full report of revenues and expenditures, both budgeted and actual.

Charter School N	lame	
School Principal	(print or type name)	
Signature	(School Principal)	(Date)
Board President	(print or type name)	
Signature	(Board President)	(Date)
Board Approval	Date (If the Annual Operating Budget submitted by J accordance with the Louisiana Local Gover submittal of the budget adopted in accordance w Government Budget Act is required no later that	rnment Budget Act, with the Louisiana Local
	bmit this completed form via email to Kar	•

Karen.McCarvy@la.gov on or before August 1, 2016.

(You may also submit via fax to 225-219-4205)