

# Report in Lieu of Audit

Oregon Secretary of State - Audits Division

Instructions: You must fill in the fields required on this page before moving to the next page.

Save your progress and come back later to complete the form by clicking "Save" in the lower right. You will be given a link to come back and continue.

Fiscal year reported 1st Fiscal year day

reported last day

Is this the final report?

Is this a revised report?

7/1/2020

6/30/2021

Name of municipality

Le Bleu Special Road District

Municipal customer number

001365MUNI

Email

larcon7@gmail.com

Mailing address

30066 LeBleu Rd, Eugene, Oregon 97405

Is this a new or change of

address? Yes

Registered agent name

Larry HEDBERG

Registered agent address

30066 LeBleu Rd, Eugene, Oregon 97405

Is this a new registered agent? Yes

#### Officers

Title, first name, last name

Larry Hedberg

Address

30066 LeBleu Rd, Eugene, Oregon 97405

Email of officer larcon7@gmail.com

Do you have another officer to add? Yes

Title, first name, last name Sandra Fritz

**Address** 

30245 Le Bleu Road, Eugene, Oregon 97405

**Email of 2nd officer** sondrafritz@gmail.com

Do you have another officer to add? Yes

#### **INVOICE**

Bill To:

LE BLEU SPECIAL ROAD DISTRICT 30237 LE BLEU RD

EUGENE, OR 97405

Date: October 19, 2022

Invoice Number: AIE17632

**Amount Due:** \$43.91

Terms: NET 30

Vendor Number: 0GE0001365

If paying via Balance Transfer (BT) use T-Code 730/731 Please note the multiple suffixes (SFX) below if applicable.

#### Gov Ethics Assessment FY23

SFX	Description	Amount
001	Annual billing for Oregon Government Ethics Commission 07/01/22 - 06/30/23. Charges to the local governments, local service districts and special government bodies are based on the requirements of ORS 244.255. Information regarding the calculation of the assessment can be found on the commission's website at www.oregon.gov/ogec. Oregon Government Ethics Tax ID: 93-0637608	\$43.91
	If your company would like to be set up for ACH payments/ direct deposit, please email das.billing@oregon.gov for information.	
	Make checks payable to: <b>Government Ethics Commission</b> Attn: Cashier 155 Cottage St NE Salem, OR 97301	
	PLEASE REFERENCE INVOICE NUMBER ON ALL REMITTANCE DOCUMENTS  Accounts not paid within 30 days of the invoice date will be assessed interest as per the price agreement. In addition, the account may be subject to assignment to the Department of Revenue or a private collection firm, per ORS 293.231, which will result in additional collection fees of up to 35.14%. To prevent additional interest and fees from accruing, please remit payment within 30 days of the invoice date.	
	TOTAL	\$43.91

Title, first name, last name Ted Hicks

Address 30237, Eugene, Oregon 97405

Email of 3rd officer ted@coldcomfort.com

Do you have another officer to add? No

# Fidelity or faithful performance bond (ORS 297.435(2)(c))

Name of company Western Surety Company

Name and title of person(s) covered Ted Hicks

Amount of coverage (should equal or exceed total receipts/revenues [Part A total]) \$5,000.00

#### **Account balances**

**Cash** \$11,382.00

Other assets

\$0.00

Accounts payable \$0.00

Long-term debt

\$0.00

## **Budgeted and actual transactions**

Part A: Revenues/receipts

**General Operating Fund** 

## **General Operating Fund**

Choose revenue/receipt	Budget	Actual
Property Taxes		\$0.00
Charges for Services		\$0.00
Assessments		\$0.00
Grants (state and federal)		\$0.00
Long-term debt proceeds		\$0.00
Other revenues		\$4,001.00
	\$0.00	\$4,001.00

Do you have an additional fund to add?

Part A Total \$4,001.00

#### Part B: Expenditures/disbursements

#### **General Operating Fund**

### **General Operating Fund**

Choose expenditure/disbursem ent	Budget	Actual
Personal services		\$0.00
Material and services		\$0.00
Capital outlay		\$0.00
Debt service		\$0.00
Contingencies		\$0.00
	\$0.00	\$0.00

Part B Total \$0.00

### **Report Summary**

**Total Expenditures/Disbursements** \$0.00

Filing fee (per ORS 297.285)

Total expenditures (Part B total†)	Filing fee
\$0-\$50,000	\$20
\$50,001-\$150,000	\$40

Filing Fee \$20.00

### **Acknowledgment**

By checking this box I hereby certify that the information contained in this report is true and correct to the best of my knowledge and belief.
Yes

Elected official's title and name Larry Hedberg

Elected official's phone number (541) 520-1409

**Date** 

Your email