

Evangeline Parish Constable
of Ward/District 4
Vilhe Platte (City) Louisiana

Financial Statements
As of and for the Year December 31, 2021

Required by Louisiana Revised Statutes 24:513 and 24:514 to
be filed with the Legislative Auditor
Within 90 days after the close of the fiscal year.

AFFIDAVIT

Personally came and appeared before the undersigned authority, Constable (your name) Tim Causey, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of the Court of Ward 4 Evangeline Parish, Louisiana, as of December 31, 21, and the results of operations for the year then ended, on the cash basis of accounting.

In addition, (your name) _____, who duly sworn, deposes, and says that the Constable of Ward/District 4 and Evangeline Parish received \$200,000 or less in revenues and other sources for the year ended December 31, 21, and accordingly, *is required to provide a sworn financial statement and affidavit* and is not required to provide for an audit, review/attestation, or compilation report for the previously mentioned fiscal year.

Tim Causey
Signature of Constable

Sworn to and subscribed before me, this 31 day of MARCH, 2022

Wade Riley / Wade Riley JP 20-22
NOTARY PUBLIC Signature

Please Complete this Section:

Constable's Name	<u>Tim Causey</u>
Street/P.O.Box Address	<u>1197 Pioneer Rd</u>
City/Zip Code	<u>Vilhe Platte LA 70586</u>
Telephone Number	<u>337-336-1080</u>
Fax Number	
Email Address	<u>Tim.Causey99@yahoo.com</u>

Please return the completed form by March 31 to Office of Legislative Auditor – Local
Government Services, Post Office Box 94397, Baton Rouge, LA 70804-9397

Tim Causey (Constable Name)
Evangeline Parish Constable
 of Ward / District 4
1197 Pioneer Rd Vill. The Platte (City) Louisiana

Statement of Cash Receipts and Disbursements
 For the Year Ended December 31, 2021

	General Fund	Garnishment Fund Activity
CASH RECEIPTS:		
1. State & Parish salary (required, from W-2 Form)	1. <u>4800.00</u>	
2. Fees collected (if collected) (include litter court fees)	2. <u>500.00</u>	
3. Garnishments collected (If applicable)		3. <u>-0-</u>
4. Other _____	4. <u>-0-</u>	
5. Total cash receipts. Add lines 1 through 4	5. <u>5300.00</u>	
CASH DISBURSEMENTS:		
6. Cost of equipment purchased (fax machine, etc.)	6. <u>-0-</u>	
7. Materials and supplies (stationery, postage, etc.)	7. <u>-0-</u>	
8. Travel and other charges		
8a. For yourself	8a <u>500.00</u>	
8b. For employees (If applicable)	8b _____	
9. Other operating expenses (rent, utilities, phone/fax line, etc.)	9 <u>-0-</u>	
10. Garnishments paid to others [From total collections on Line 3]		10. <u>-0-</u>
11. Total disbursements (add lines 6-10)	11. <u>500.00</u>	
12. Balance Available (loss) for payment of salaries (General Fund: Line 5 less Line 11; Garnishment Fund Activity: Line 3 less Line 10)	12. <u>4800.00</u>	12. <u>-0-</u>
Salary and related benefits:		
13. Amount retained by yourself from line 12 as salary	13. <u>-0-</u>	13. _____
14. Amount paid to employees (if applicable)	14. <u>-0-</u>	14. _____
15. Total salaries paid (add lines 13 and 14)	15. <u>-0-</u>	15. _____
FUND BALANCE		
16. Increase (decrease) in fund balance, may be \$0 (line 12 less line 15)	16. <u>-0-</u>	16. _____
17. Fund Balance at beginning of the year, may be \$0 (Ending Fund balance from last year's report)	17. <u>-0-</u>	17. _____
18. Fund balance (deficit) at end of the year, may be \$0 (Add lines 16 and 17)	18. <u>-0-</u>	18. _____

Please return the completed form by March 31 to Office of Legislative Auditor – Local
 Government Services, Post Office Box 94397, Baton Rouge, LA 70804-9397

Tim Causey (Constable Name)
Evangeline Parish Constable
 of Ward/District 4
1197 Pioneer Rd Ville Platte (City) Louisiana

Schedule of Compensation, Benefits and Other Payments to the Constable

Purpose	Amount
Salary	4800.00
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	
Registration fees	80.00
Conference travel	- 0 -
Housing	- 0 -
Unvouchered expenses (example: travel advances, etc.)	- 0 -
Special meals	- 0 -
Other	- 0 -