

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

Entity Name: Leland Volunteer Fire Dept

Address: 151 Leland Loop Sicily Island LA 71368

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

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](mailto: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, J. W. Posey (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 Leland Volunteer Fire Dept. (entity's name) as of 2022 (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: NA

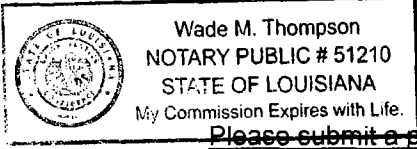
Complete if Applicable: In addition, J. W. Posey (officer's name), who duly sworn, deposes, and says that Leland Volunteer Fire Dept. (entity's name) received \$75,000 or less in revenues and other sources for the year ended 2022 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

J. W. Posey Chief  
OFFICER'S SIGNATURE

Chief  
OFFICER'S TITLE

Sworn to and subscribed before me, this 27th day of March, 2023

Wade M. Thompson  
NOTARY PUBLIC SIGNATURE & SEAL



Please submit a pdf copy of the completed form to: [ereports@lla.la.gov](mailto:ereports@lla.la.gov) - Updated 12/20

10215-22 3/31/23

Selma Volunteer Fire Dept.  
(Agency Name)

**Statement of Cash Receipts and Disbursements**  
For the Year Ended 12-31-22  
(Year-End)

	General Fund	Other Fund	Total
<b>RECEIPTS (Provide Brief Description):</b>			
1. <u>Catahoula Police Jury</u>	\$ 8616.90	\$	\$
2. <u>Selma Water</u>	4643.38		
3. <u>Interest</u>	231.04		
4.			
5.			
6. <b>Total receipts</b> (add lines 1 - 5)	<u>\$13,491.32</u>	\$	\$
<b>DISBURSEMENTS (Provide Brief Description):</b>			
7. <u>Supplies (261.17) (upkeep) 650.00</u>	\$ 911.17	\$ 911.17	\$
8. <u>Repairs</u>	640.00	640.00	
9. <u>Electric (762.77) Phone 979.44</u>	1742.21	1742.21	
10. <u>Fuel (634.91) Bunkers (184.00)</u>	818.91	818.91	
11. <u>Parts</u>	91.59	91.59	
12. <u>Truck Exp (2564.00) Tire Exp (190.00) Garage Exp (100.00)</u>	777.00	3531.00	
13. <b>Total Disbursements</b> (add lines 7 - 12)	\$	<u>\$7234.88</u>	\$
14. Change in fund balance (Lines 6 minus 13)	\$ 6256.44	\$	\$
15. Fund Balance at beginning of year	\$ 69687.46	\$	\$
16. Fund balance (deficit) at end of year (Add lines 14-15)			
--This amount also goes on line 12, Statement B	\$	\$	\$

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

Seland Volunteer Fire Dept.  
 (Agency Name)

Balance Sheet, on 12-31-22  
 (Year-End)

	General Fund	Other Fund	Total
<b>ASSETS</b> (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$	\$	\$
2. Investments (fair value) on hand			
3. Office furnishings (Cost of desks, etc)			
4. Equipment (Cost of fax machine, etc)			
5. Other (brief description)			
6. <b>Total Assets</b> (add lines 1 - 5)	\$	\$	\$
<b>LIABILITIES AND FUND BALANCE</b> (at year-end):			
7. Liabilities (give brief description):			
8.	\$	\$	\$
9.			
10.			
11. <b>Total Liabilities</b> (add lines 7 - 10)			
12. Fund balance (amount from Line 16 on Statement A)	69,687.46		
13. Other			
14. <b>Total Liabilities and Fund Balance</b> (add lines 11 - 13)	\$	\$	\$

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\_\_\_\_\_ (Agency Name)

**Schedule of Compensation, Benefits and Other Payments to Agency Head or Chief Executive Officer (Required Form - Please Submit Completed Form Per Attached Instructions)**

For the Year Ended 2002 (Year-End)

Agency Head Name and Title: Local Volunteer Fire Dept., J.W. Passey, Chief

Purpose	Dollar Amount
1. Salary	1.
2. Benefits-insurance	2.
3. Benefits-retirement	3.
4. Benefits-other (describe)	4.
5. Benefits-other (describe)	5.
6. Benefits-other (describe)	6.
7. Car allowance	7.
8. Vehicle provided by government (if reported on your W-2)	8.
9. Per diem	9.
10. Reimbursements	10.
11. Travel	11.
12. Registration fees	12.
13. Conference travel	13.
14. Housing	14.
15. Unvouchered expenses (example: travel advances, etc.)	15.
16. Special meals	16.
17. Other	17.
18. TOTAL (enter total of line 1-17)	18.

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.)

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

Please return the completed form within 90 days of your entity's year-end to Louisiana Legislative Auditor – Local Government Services, Post Office Box 94397, Baton Rouge, LA 70804-9397 – Updated 8/3/16