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

Entity Name: JONESVILLE FIRE PROTECTION DISTRICT
Address: P.O. BOX 367 JONESVILLE, LA 71343
Telephone: 318-481-1266 Email: jvillelafiredist@aol.com
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 , 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, <u>MICHAEL W BENNETT</u> (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 <u>JONESVILLE FIRE PROTECTION DISTRICT</u>
·(entity's name) as of <u>DECEMBER 31,2021</u> (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:
Complete if Applicable: In addition, MICHAEL W BENNETT (officer's name), who duly sworn,
deposes, and says that JONESVILLE FIRE PROTECTION DISTRICT (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.
Milalu But CHIEF OFFICER'S TITLE
Sworn to and subscribed before me, this 29 day of March, 2022
NOTARY PUBLIC SIGNATURE & SEAL

Please submit a pdf copy of the completed for

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Statement of Receipts and Disbursements

Statement A

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description): 1. 2% FIRE REDATE 2. Acct Receivable	\$770046	\$	\$
3. LDAF Grant 4. Misc. Rev 5. Water METER FEE	5/32082 263315 40,880.00		
6. Total receipts (add lines 1 - 5) other DISBURSEMENTS (Provide Brief Description):	\$ 1400,00	\$	\$
8. SEE ATTACHED	\$	\$	\$
10. PROFIT + LOSS 11. 12.			
13. Total Disbursements (add lines 7 - 12)	\$50,000	\$	\$
14. Change in fund balance (Lines 6 minus 13) -15. Fund Balance at beginning of year	\$ 956426	\$	\$
Fund balance (deficit) at end of year (Add lines 14-15) —This amount also goes on line 12, Statement B	\$173,37610	\$	\$

Identify the Basis of Accounting, if not using Cash-Basis:

NOTE: If the entity receives any funds from pre- or post-adjudication court costs, fines, and/or fees, the entity must use one or more of the following categories in the receipts description fields: Civil Fees; Bond Fees; Asset Forfeiture/Sale; Pre-Trial Diversion Program; Criminal Court Costs/Fees; Criminal Contempt Fines; Other Criminal Fines; Restitution; and Probation/Parole/Supervision Fees.

Balance Sheet			Statement B
. The state of the	General Fund	Other Fund	Total
ASSETS (balances at year-end) 1. Cash and cash equivalents 2. Investments (fair value)	\$173,376	\$	<u>\$</u>
3. Office furnishings (Cost of desks, etc) 4. Equipment (Cost of fax machine, etc) 5. Other (brief description) 6. Total Assets (add lines 1 - 5)	\$13,376	\$	\$
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description): 8.	\$	\$	\$
9. 10. 11. Total Liabilities (add lines 7 - 10)	0		
12. Fund balance (amount from Line 16 on Statement A) 13. Other 14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$173,376	\$	\$

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Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: MICHAEL W BENNETT - CHIEF

Purpose	Dollar Amount
1. Salary	1.
2. Benefits-insurance	2.
3. Benefits-retirement	3.
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 Stinena	17. 3,6000
18. TOTAL (enter total of line 1-17)	18. 3, 60000

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.)

Jonesville Fire District Profit & Loss January through December 2021

	Jan - Dec 21
Ordinary Income/Expense	
Income 2% Fire Rebate	7 700 46
Accounts Recievable	7,700.46
Deposits	2,630.00
Earned revenues	5,320.82
Miscellaneous revenue	2,633.75
Total Earned revenues	2,633.75
Town of Jonesville Meter Fee	40,880.00
Total Income	59,165.03
Expense	
Annual Equipment Hose/Pump Test	2,282.00
Communications	4,082.09
Equipment	4,750.85
Foam	4,446.24
Fuel	1,151.27
Grantwriting Fee	2,250.00
Insurance	10,845.97
Miscellaneous/ other	2,380.27
PPE	8,783.36
Rental	160.00
Station Maintenance	
Engine 1	59.84
Engine 3	1,278.78
Station Maintenance - Other	632.36
Total Station Maintenance	1,970.98
Stipend	
MBennett	3,600.00
Total Stipend	3,600.00
T-shirts	492.80
Training	1,225.43
Uniforms	1,579.51
Total Expense	50,000.77
Net Ordinary Income	9,164.26
Other Income/Expense	
Other Income	
reimbursement	400.00
Total Other Income	400.00
Net Other Income	400.00