

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: 318-481-0576 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, MICHAEL W BENNETT (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 JONESVILLE FIRE PROTECTION DISTRICT (entity's name) as of 2025 (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 2025 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

Michael W. Bennett
 OFFICER'S SIGNATURE

Fire Chief
 OFFICER'S TITLE

Sworn to and subscribed before me, this 6 day of February, 2026

Julia Lofton
 NOTARY PUBLIC SIGNATURE



Entity Name: Jonesville Fire Protection District Fiscal Year End: 2025

Statement of Receipts and Disbursements

Statement A

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1.	42,160 ⁰⁴		42,160 ⁰⁴
2.	SEE ATTACHED		
3.			
4.	Sheet		
5.			
6. Total receipts (add lines 1 - 5)	42,160 ⁰⁴		42,160 ⁰⁴
DISBURSEMENTS (Provide Brief Description):			
7.	49,893 ⁹⁸		49,893 ⁹⁸
8.	SEE ATTACHED		
9.			
10.	Sheet		
11.			
12.			
13. Total Disbursements (add lines 7 - 12)	49,893 ⁹⁸		49,893 ⁹⁸
14. Change in fund balance (Lines 6 minus 13)	-7733 ³⁴		-7733 ³⁴
15. Fund Balance at beginning of year	139,252 ⁴⁵		139,252 ⁴⁵
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	131,519 ¹¹		131,519 ¹¹

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.

Entity Name: Jonesville Fire Protection District Fiscal Year End: 2025

Balance Sheet

Statement B

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
ASSETS (balances at year-end)			
1. Cash and cash equivalents	131,519 ⁰⁰		131,519 ⁰⁰
2. Investments (fair value)			
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)	<u>131,519⁰⁰</u>		<u>131,519⁰⁰</u>
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (brief description):			
8.			
9.			
10.			
11. Total Liabilities (add lines 7 - 10)			
12. Fund balance (amount from Line 16 on Statement A)	131,519 ⁰⁰		131,519 ⁰⁰
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	<u>131,519⁰⁰</u>		<u>131,519⁰⁰</u>

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name, Title MICHAEL W. BENNETT - Chief

Purpose	Dollar Amount
1. Salary	
2. Benefits-insurance	
3. Benefits-retirement	
4. Benefits-other (describe)	
5. Benefits-other (describe)	
6. Benefits-other (describe)	
7. Car allowance	
8. Vehicle provided by government (if reported on your W-2)	
9. Per diem	
10. Reimbursements	
11. Travel	
12. Registration fees	
13. Conference travel	
14. Housing	
15. Unvouchered expenses (example: travel advances, etc.)	
16. Special meals	
17. Other <u>Stipend</u>	<u>3,600⁰⁰</u>
18. TOTAL (enter total of line 1-17)	<u>3,600⁰⁰</u>

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 2025

	<u>Jan - Dec 25</u>
Ordinary Income/Expense	
Income	
2% Fire Rebate	11,904.99
Accounts Receivable	1,550.00
Deposits	0.19
Town of Jonesville Meter Fee	28,330.40
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Total Income	41,785.58
Expense	
Communications	6,096.65
Deposit	-0.20
Education	187.10
Equipment	
DeWalt	743.57
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Total Equipment	743.57
Fuel	724.98
Insurance	12,234.67
Miscellaneous/ other	759.76
New Station	20,000.85
Office	1,829.35
Station Maintenance	
Engine 3	1,383.74
Engine 5	76.50
Rescue	487.56
Rescue 1	76.50
SCBA Refill Station	399.46
Service 1	76.50
Tanker 2	450.00
Station Maintenance - Other	180.46
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Total Station Maintenance	3,130.72
Stipend	3,600.00
Training	586.53
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Total Expense	49,893.98
Net Ordinary Income	-8,108.40
Other Income/Expense	
Other Income	
reimbursement	375.06
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Total Other Income	375.06
Net Other Income	375.06
Net Income	<hr/> <hr/> -7,733.34