

Updated: 08/07/2023

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

Entity Name: Bunkie City Marshal
Address: PO Box 74, Bunkie, LA 71322
Telephone: 318-346-7250 Email: citycourtofbunkie@gmail.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, Stephen Gremillion (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 Bunkie City Marshal (entity's name) as
of (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, Stephen Gremillion (officer's name), who duly sworn, deposes, and says that Bunkie City Marshal (entity's name) received \$75,000 or less
in revenues and other sources for the year ended December 31, 2024 (entity's year-end), and accordingly,
is not required to have an audit for the previously mentioned fiscal year.
Marshal Marshal
OFFICER'S SIGNATURE OFFICER'S TITLE
Sworn to and subscribed before me, this stay of April , 20 25
Katherine B. McDonald Notary ID # 021932 Notary ID # 021932 My Commission Expires at Death

Sworn Financial Statement

Entity Name: Bunkie City Marshal Fiscal Year End: 12/31/2024

Statement of Receipts and Disbursements			Statement A
	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
Civil Fees & Criminal Court Costs/Fees	\$ 17,418.69		\$ 17,418.69
2.			\$ 0.00
3.			\$ 0.00
4.			
5.			\$ 0.00
C. Total receipts (-14 lines 4 5)			\$ 0.00
6. Total receipts (add lines 1 - 5)	\$ 17,418.69	\$ 0.00	\$ 17,418.69
DISBURSEMENTS (Provide Brief Description):			
7. Legal and Accounting	\$ 440.00		\$ 440.00
8.	Ψ 440.00		φ 440.00
Salaries & Wages	\$ 14,013.75		\$ 14,013.75
9. Payroll Taxes	\$ 1,232.01		\$ 1,232.01
10.	+ 1,1=====		- + 1,
Interest Expense	\$ 1,431.59		\$ 1,431.59
11. Supplies	\$ 453.55		\$ 453.55
12.	A 000 70		
Miscellaneous	\$ 860.73	0.00	\$ 860.73
13. Total Disbursements (add lines 7 - 12)	\$ 18,431.63	\$ 0.00	\$ 18,431.63
		# 0.00	¢ 4 040 04
14. Change in fund balance (Lines 6 minus 13)		\$ 0.00	-\$ 1,012.94
	\$ 1,012.94		
14. Change in fund balance (Lines 6 minus 13) 15. Fund Balance at beginning of year	\$ 21,111.84		\$ 21,111.84

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.

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

Entity Name: Bunkie City Marshal Fiscal Year End: 12/31/2024

Balance Sheet

Statement B

	General Fund	Other Fund	Total
ASSETS (balances at year-end)			1000
Cash and cash equivalents			
	\$ 2,384.57		\$ 2,384.57
2. Investments (fair value)			
			\$ 0.00
3. Office furnishings (Cost of desks, etc)			00.00
4. Equipment (Cost of fax machine, etc)			\$ 0.00
4. Equipment (Cost of lax machine, etc)			\$ 0.00
5. Other (brief description)	\$ 38,395.00		\$ 38,395.00
6. Total Assets (add lines 1 - 5)	\$ 40,779.57	\$ 0.00	\$ 40,779.57
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description):	f 700 co		Ф 7 00 со
Payroll taxes payable 8.	\$ 700.60		\$ 700.60
Lease liability	\$ 19,980.07		\$ 19,980.07
9.			\$ 0.00
10.			<u> </u>
			\$ 0.00
11. Total Liabilities (add lines 7 - 10)			
	\$ 20,680.67	\$ 0.00	\$ 20,680.67
12. Fund balance (amount from Line 16 on Statement A)	\$ 20,098.90	\$ 0.00	\$ 20,098.90
13. Other			
			\$ 0.00
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 40,779.57	\$ 0.00	\$ 40,779.57

Updated: 08/07/2023

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name, T	Stephen Gremillion		
		A	

Purpose	Dollar Amount
1. Salary	
2. Benefits-insurance	
3. Benefits-retirement	
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	\$ 45.00
11. Travel	
12. Registration fees	
13. Conference travel	
14. Housing	
15. Unvouchered expenses (example: travel advances, etc.)	
16. Special meals	
17. Other	
18. TOTAL (enter total of line 1-17)	\$ 45.00

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.)