

6994

Washington Parish Constable
of Ward/District 3, 59
FRANKLINTON, WASHINGTON (City) Louisiana

3

Financial Statements
As of and for the Year December 31, 2017

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) Robert K. McDaniel who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of the Court of Washington Parish, Louisiana, as of December 31, 2017, and the results of operations for the year then ended, on the cash basis of accounting.

In addition, (your name) Robert K. McDaniel who duly sworn, deposes, and says that the Constable of Ward/District 3/59 and Washington Parish received \$200,000 or less in revenues and other sources for the year ended December 31, 2017, 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.

[Signature]
Signature of Constable

Sworn to and subscribed before me, this 7th day of February, 2018.

[Signature] 59-3
NOTARY PUBLIC Signature

Under provisions of state law, this report is a public document. A copy of the report has been submitted to the entity and other appropriate public officials. The report is available for public inspection at the Baton Rouge office of the Legislative Auditor and, where appropriate, at the office of the parish clerk of court.

Constable's Name
Street/P.O. Box Address
City/Zip Code
Telephone Number
Fax Number
Email Address

Please Complete this Section:
Robert K. McDaniel
1508 12th Avenue
FRANKLINTON, LA. 70438
985-839-3094
N/A
N/A

Release Date MAR 21 2018

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

Robert K. McDaniel (Constable Name)
Washington Parish Constable
 of Ward / District 3/59
Franklinton (City) Louisiana

Statement of Cash Receipts and Disbursements
 For the Year Ended December 31, 2019

	General Fund	Garnishment Fund Activity
CASH RECEIPTS:		
1. State & Parish salary (required, from W-2 Form)	1. <u>\$6,000.00</u>	
2. Fees collected (if collected) (include litter court fees)	2. <u>\$3,060.00</u>	
3. Garnishments collected (If applicable)		3. _____
4. Other _____	4. _____	
5. Total cash receipts. Add lines 1 through 4	5. <u>\$9,060.00</u>	
CASH DISBURSEMENTS:		
6. Cost of equipment purchased (fax machine, etc.)	6. _____	
7. Materials and supplies (stationery, postage, etc.)	7. _____	
8. Travel and other charges	_____	
8a. For yourself	8a _____	
8b. For employees (If applicable)	8b _____	
9. Other operating expenses (rent, utilities, phone/fax line, etc.)	9 _____	
10. Garnishments paid to others [From total collections Line 3]		10. _____
11. Total disbursements (add lines 6-10)	11. _____	
12. Balance Available (loss) for payment of salaries (General Fund: Line 5 less Line 11; Garnishment Fund Activity: Line 3 less Line 10)	12. _____	12. _____
Salary and related benefits:		
13. Amount retained by yourself from line 12 as salary	13. _____	13. _____
14. Amount paid to employees (if applicable)	14. _____	14. _____
15. Total salaries paid (add lines 13 and 14)	15. _____	15. _____
FUND BALANCE		
16. Increase (decrease) in fund balance, may be \$0 (line 12 less line 15)	16. _____	16. _____
17. Fund Balance at beginning of the year, may be \$0 (Ending Fund balance from last year's report)	17. _____	17. _____
18. Fund balance (deficit) at end of the year, may be \$0 (Add lines 16 and 17)	18. _____	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

Robert K. McDaniel (Constable Name)
Washington Parish Constable
 of Ward/District 3/59
FRANKLINTON (City) Louisiana

**Schedule of Compensation, Benefits and Other Payments to the Constable
 (REQUIRED - PLEASE SUBMIT COMPLETED FORM PER ATTACHED INSTRUCTIONS)**

Purpose	Amount
Salary	\$6,000.00
Benefits-insurance	
Benefits-retirement	
Benefits-other (describe)	
Benefits-other (describe)	
Benefits-other (describe)	
Car allowance	
Vehicle provided by government (enter amount reported on W-2)	
Per diem	
Reimbursements	
Travel	
Registration fees	
Conference travel	
Housing	
Unvouchered expenses (example: travel advances, etc.)	
Special meals	
Other	