

**Affidavit and Revenue Certification**

30th Judicial District FINS  
Vernon Parish  
Leesville, LA

**ANNUAL SWORN FINANCIAL STATEMENTS AND CERTIFICATION OF REVENUES \$75,000 OR LESS** (if applicable)

The annual sworn financial statements are *required* by Louisiana Revised Statute 24:514 to be filed with the Legislative Auditor within 90 days after the close of the fiscal year. The certification of revenues of \$75,000 or less, if applicable, is required by Louisiana Revised Statute 24:513(J)(1)(c)(i)(aa).

Personally came and appeared before the undersigned authority, Betty Stokes (enter officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of 30th Judicial District FINS(as of June 30, 2018 (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.

**(Complete if applicable)**

In addition, Betty Stokes, who, duly sworn, deposes and says that 30th Judicial District FINS received \$75,000 or less in revenues and other sources for the year ended June 30, 2018, and accordingly, is not required to have an audit for the previously mentioned year.

*Betty Stokes*  
\_\_\_\_\_  
Officer's Signature

Sworn to and subscribed before me this 10<sup>th</sup> day of October, 2018.

*Nicole Shelton Ybarra*  
\_\_\_\_\_  
NOTARY PUBLIC SIGNATURE & SEAL



NICOLE SHELTON YBARRA  
NOTARY PUBLIC NO. 065902  
STATE OF LOUISIANA  
PARISH OF VERNON  
My Commission is for Life

For Office Use Only
Under provisions of state law, this report will become a public document on the Monday following the release date. A copy of the report will be submitted to appropriate public officials and be available for public inspection at the Baton Rouge office of the Louisiana Legislative Auditor and, where appropriate, at the office of the parish clerk of court.
Release Date _____

Please Complete This Section
Officer's Name _____
Officer's Title _____
Address _____
City, Zip _____
Ph: Cell/Land _____
E-mail _____

**30th Judicial District FINS****Statement of Cash Receipts and Disbursements  
For the Year Ended June 30, 2018**

	<b>General Fund</b>	<b>Other Fund</b>	<b>Total</b>
<b>RECEIPTS (Provide Brief Description):</b>			
1.State FINS Grant Fund	\$ 28510	\$	\$ 28510
2.			
3.			
4.			
5.			
6. <b>Total receipts</b> (add lines 1 - 5)	<b>\$ 28510</b>	<b>\$</b>	<b>\$ 28510</b>
<b>DISBURSEMENTS (Provide Brief Description):</b>			
7.Contract Salary	\$ 23400	\$	\$ 23400
8.Telephone	1650		1650
9.Accounting	600		600
10.Travel	347		347
11.Dues	200		200
12.Printing/Copying	1042		1042
13.Supplies	200		200
14. <b>Total Disbursements</b> (add lines 7 - 13)	<b>\$ 27439</b>	<b>\$</b>	<b>\$ 27439</b>
15. Change in fund balance ( Lines 6 minus 14)	\$ 1071	\$	\$ 1071
16. Fund Balance at beginning of year	\$ 5063	\$	\$ 5063
16. Fund balance (deficit) at end of year (Add lines 15-16) --This amount also goes on line 12, Statement B	\$ 6134	\$	\$ 6134

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

## 30th Judicial District FINS

Balance Sheet, on 6/30/18

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
<b>ASSETS</b> (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$ 6134	\$	\$ 6134
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)	<u>\$ 6134</u>	<u>\$</u>	<u>\$ 6134</u>
<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)	6134		6134
13. Other			
14. <b>Total Liabilities and Fund Balance</b> (add lines 11 - 13)	<u>\$ 6134</u>	<u>\$</u>	<u>\$ 6134</u>

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30th Judicial District FINS

**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 6/30/18

**Agency Head Name and Title:** Betty Stokes

<b>Purpose</b>	<b>Dollar Amount</b>
1. Salary	1. 18000.00
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. 18000.00

\_\_\_\_\_ 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.)

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