## **Affidavit and Revenue Certification**

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North Union Fire Protection District ENTITY NAME

<u>Union</u> Parish

<u>MARION, LA</u> (City), State

## ANNUAL SWODN 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, <u>James Wicker</u> (enter officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of <u>North Wylon face Prot. District</u> (enter entity name) as of <u>Dec. 31, 2019</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.
(Complete if applicable) In addition, Tames Wicker, (officer name), who, duly sworn, deposes and says that North Will Frot Dist (entity name) received \$75,000 or less in revenues and other sources for the year ended Dec 31,2019, and accordingly, is not required to have an audit for the previously mentioned year.  Officer's Signature
Sworn to and subscribed before me this 19 day of February, 2020
Patricia N. Bankton

NOTARY PUBLIC SIGNATURE & SEAL 06475

## 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 MAR 0 4 2020

Please Complete This Section
Officer's Name James Wicker
Officer's Title President
Address 1760 Hwu 549
City, Zip MARION 71260
Ph: Cell/Land 318-608-8015 ', 318-368-8619
E-mail WICKS 48 @ yahoo I com

## North Unian Fire Protection Dist. (Agency Name)

Statement of Cash Receipts and Disbursements
For the Year Ended <u>Dec. 31, 2019</u>
(Year-End)

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):  1. Local TAXES  2. 3.	\$ 31,332,83 \$		\$ 31, 332,83
4. 5. 6. <b>Total receipts</b> (add lines 1 - 5)	\$31,332.83		\$ 31,332,83
DISBURSEMENTS (Provide Brief Description): 7. Utilities 8. Ins. 9. Repairs / Purchases / Supplies / Upkeep   Die 10. Bldg. Addow (15t in Stallment) 11. Upkeep of Ground & (Mowing) 12. 13. Total Disbursements (add lines 7 - 12)	\$ 5,857.82 \$ 10,971.78 21,73.44 24,386.00 1,125.00		\$5,857.82 10,971.78 17,125,44 24,386.00 1,125.00 \$59,466.04
14. Change in fund balance (Lines 6 minus 13)     15. Fund Balance at beginning of year     16. Fund balance (deficit) at end of year (Add lines 14-15)    This amount also goes on line 12, Statement B	\$-18,133,21 \$ \$119,001,68 \$ \$ 90,868,47\$		\$ -28,133. 21 \$119,001.68 \$ 90,868,47

North Union Fire Protection Dist (Agency Name)

Balance Sheet, on Dec. 31,2019
(Year-End)

	General Fund	Other Fund	Total
ASSETS (balances at year-end) -Give brief description:			
Cash and cash equivalents on hand	\$ 90,868,47	\$	\$ 90,868,47
Investments (fair value) on hand			
Office furnishings (Cost of desks, etc)			
Equipment (Cost of fax machine, etc)			
5. Other (brief description)			
6. Total Assets (add lines 1 - 5)	\$ 90,868,47	\$	\$ 90,868,47
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (give brief description):			,
8.	\$	\$	\$
9.			
10.			
11. Total Liabilities (add lines 7 - 10)	0		0
12. Fund balance (amount from Line 16 on Statement A)	90,868,47		90,868,47
13. Other	7		
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$90,868,47	\$	\$ 90,868,47

North Union Fire Pro	6, Dist. (Agency Name)
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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 <u>Dec 31, 2019</u> (Year-End)

Agency Head Name and Title: James F. Wicker, President

Purpose	<b>Dollar Amount</b>	
1. Salary	1. 0,00	
2. Benefits-insurance	2.	
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. 0,00	

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.)