Entity Name: Matchitoches farish Fire District #8
Address: P.D. Box 306 Ashland, LA. 71002
Telephone: 318-332-5602 Email: Ashland tire station@yahoo. Cm
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, Donne Horn (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 Matchitches farish Five District
(entity's name) as of December 31,2031 (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, Down Horn (officer's name), who duly
sworn, deposes, and says that Achiteches Fire Dist #8 (entity's name) received \$75,000
or less in revenues and other sources for the year ended ocember 31,3621 (entity's year-end), and
accordingly, is not required to have an audit for the previously mentioned fiscal year.
OFFICER'S SIGNATURE Secretary OFFICER'S TIPLE
Sworn to and subscribed before me, this
SANDRA T. SANFORD NOTARY PUBLIC SIGNATURE & SEAL NOTARY PUBLIC SIGNATURE & SEAL SANDRA T. SANFORD NOTARY PUBLIC #053942 STATE OF LOUISIANA PARISH OF BIENVILLE

Statement of Receipts and Disbursements

Statement A

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1. Ad bolem Tax	\$ 24,832.34	\$	\$ 24,832.34
2. Bank Interest	95.75		95.95
3. Fire Tax	3,397.21		3,397,21
4. CDo Dius interest	24,320.51		24,320.51
5.			
6. Total receipts (add lines 1 - 5)	\$	\$	\$52,645,87
DISBURSEMENTS (Provide Brief Description): 7. Utilities 8. Clerk Salary 9. Insurance 10. Truck Supplies 11. Misc 12. Fire fighter equipment 13. Total Disbursements (add lines 7 - 12)	\$ 4,246.39 3,300.00 9,229.34 4,175.33 1,764.00 655.00 \$ 22,370.06	\$	\$ 4,246.39 3,300.00 8,229.34 4,175.33 1,764.00 (055.00 \$ 22,370.06
14. Change in fund balance (Lines 6 minus 13)	\$	\$	\$ 30, 275.81
15. Fund Balance at beginning of year	\$	\$	\$82,670.01
16. Fund balance (deficit) at end of year (Add lines 14-15)This amount also goes on line 12, Statement B	\$	\$	\$ 112,945.82

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identili	y life Dasis	of Accounting	, ii not using	Casii-Dasis.	

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.

Balance Sheet			2	Statement B
	General Fund		Other Fund	Total
ASSETS (balances at year-end)				
Cash and cash equivalents	\$ 112,945,8	82\$		\$ 112,945.82
2. Investments (fair value)				
3. Office furnishings (Cost of desks, etc)				
Equipment (Cost of fax machine, etc)				
5. Other (brief description)				
6. Total Assets (add lines 1 - 5)	\$	_ \$_		\$ 112,945.82
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description): 8.	\$ D	_ \$		\$
9.				
10.				
11. Total Liabilities (add lines 7 - 10)				8
12. Fund balance (amount from Line 16 on Statement A)				112,945.83
13. Other				M
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$	\$		\$ 112,945.82

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Richard L. Horn, Fire Chief

Purpose	Dollar Amount		
1. Salary	1. 2		
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.		

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.)