Entity Name: City Marshall of Bastrop

Address: 202 East Jefferson Ave Room 144, Bastrop LA 71220

Telephone: 318-283-3310

Email: lisa.chafford@yahoo.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 <u>ereports@lla.la.gov</u>, 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, <u>LisA Chafford</u> (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 <u>Lity Marshall of Bastrop</u> (entity's name) as of <u>December 31, 2017</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; 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:

<u>Complete if Applicable</u>: In addition, <u>Lisa Chafforel</u> (officer's name), who duly sworn, deposes, and says that <u>City Marshall of Bastrop</u> (entity's name) received \$75,000 or less in revenues and other sources for the year ended <u>December 31, 2017</u> (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

FICER'S SIGNATURE

OTARY PUBLIC

Sworn to and subscribed before me, this <u>Li</u> day of <u>Jebruary</u>, 20<u>23</u>

SIGNATURE & SEAL

Please submit a pdf copy of the completed form to: ereports@lla.la.gov - Updated 01/22

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Entity Name: <u>City Marshall of Bastrop</u>		_ Fiscal Year End: <u>2017</u>	
Statement of Receipts and Disbursements		Statement A	
	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1. Civil Fees	\$38,925.50	\$	\$38,925.50
2. Asset Forfeiture/Sale	\$	\$ 14,745.38	\$14,745.38
3. Other Revenue	\$ 1.74	\$	\$ 1.74
4. Interest	\$	\$.20	\$.20
5.			
6. Total receipts (add lines 1 - 5)	\$38,927.24	\$ 14,745.58	\$53,672.82
DISBURSEMENTS (Provide Brief Description): 7. Personal Services	\$ 88.92	\$	\$ 88.92
8. Operating Services	\$ 30,515.84	\$ 14,751.29	
9. Materials & Supplies	\$ 4,429.71	\$	\$ 4,429.71
10. Travel & other expenses	\$ 4,173.38	\$	\$ 4,173.38
11.			
12.	·		
13. Total Disbursements (add lines 7 - 12)	\$39,207.83	\$14,751.29	\$53,959.14
14. Change in fund balance (Lines 6 minus 13)	\$(280.61)	\$(5.71)	\$(286.32)
15. Fund Balance at beginning of year	\$ 36,185.85	<u>\$157.95</u>	\$4,397.03
16. Fund balance (deficit) at end of year (Add lines 14-15) This amount also goes on line 12, Statement B	\$35,905.24	\$152.24	\$36,057.48

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

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.*

Entity Name: <u>City Marshall of Bastrop</u> Fiscal Year End: 2017____

Balance Sheet

Statement B

	General Fund	Other Fund	Total
ASSETS (balances at year-end)			
1. Cash and cash equivalents	\$ 1,905.15	\$152.24	\$ 2,057.39
2. Investments (fair value)	\$	\$	\$
3. Office furnishings (Cost of desks, etc)	\$ 34,831.00	\$	\$34,831.00
4. Equipment (Cost of fax machine, etc)	\$	\$	\$
5. Other (brief description)	_		
6. Total Assets (add lines 1 - 5)	\$ 36,736.15	\$152.24	\$36,888.39
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description):	\$	\$	\$
8. Payroll Liabilities	\$ 830.91	\$	\$ 830.91
9.			
10.			
11. Total Liabilities (add lines 7 - 10)	830.91	_	830.91
12. Fund balance (amount from Line 16 on Statement A)	\$ 35,905.24	\$ 152.24	\$36,057.48
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 36,736.15	\$ 152.24	\$36,888.39

Entity Name: <u>City Marshall of Bastrop</u> Fiscal Year End: <u>2017</u> 1.74

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Lisa Chafford, Marshall

Purpose	Dollar Amount
1. Salary	1. 14,803.77
2. Benefits-insurance	2.
3. Benefits-retirement	3.
4. Benefits-other (describe) Social Security & Medicare	4. 778.07
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. 15,581.84

_____ 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.)