

St Bernard Parish Justice of the Peace
 of Ward or District H/34
Chalmette (City) Louisiana

Financial Statements
 As of and for the Year Ended December 31, 2018

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, Justice of the Peace (your name) Charles J. Licciardi, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of the Court of St. Bernard Parish, Louisiana, as of December 31, 2018, and the results of operations for the year then ended, on the cash basis of accounting.

In addition, (your name) Charles J. Licciardi, who duly sworn, deposes, and says that the Justice of the Peace of Ward or District H/34 and St. Bernard Parish received \$200,000 or less in revenues and other sources for the year ended December 31, 2018, 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.

Charles J. Licciardi
 Signature of JP

Sworn to and subscribed before me, this 1st day of February, 2019

DIANA F. LICCIARDI
 LA NOTARY PUBLIC #64566, 77384
 LIFETIME COMMISSION

NOTARY PUBLIC SIGNATURE & SEAL

For Office Use Only	Please Complete this Section:
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 Legislative Auditor and, where appropriate, at the office of the parish clerk of court.	JP's Name <u>Charles J. Licciardi</u>
	Address <u>1929 Licciardi Dr.</u>
	City, Zip Code <u>Chalmette, LA 70043</u>
	Email Address <u>judgelicciardi@yahoo.com</u>
	Cell Phone <u>504-251-1903</u>
	Land/Fax No. <u>979-859-1999</u>
Release Date FEB 13 2019	

Please return the completed form by March 31 to Louisiana Legislative Auditor – Local
 Government Services, Post Office Box 94397, Baton Rouge, LA 70804-9397

Charles J. Licciardi (JP Name)
St. Bernard Parish Justice of the Peace
of Ward or District H/34
Chalmette (City) Louisiana

Statement of Cash Receipts and Disbursements
For the Year Ended December 31, 2018

CASH RECEIPTS:

1. State & Parish salary (See JP W-2 Form, Box 1)
2. Total Fees collected (if applicable) - include litter court fees
3. Other _____
4. **Total cash receipts** (add lines 1-3)

	General Fund
1.	8400
2.	2100
3.	—
4.	10,500

CASH DISBURSEMENTS:

5. Fees paid to constable (Out of Total Fees collected from line 2)
 6. Cost of equipment purchased (fax machine, etc.)
 7. Materials and supplies (stationery, postage, etc.)
 8. Travel and other charges
 - 8a. For yourself
 - 8b. For employees (not for Constable)
 9. Other operating expenses (rent, utilities, phone/fax line, etc.)
 10. **Total disbursements** (add lines 5-9)
 11. Balance Available (loss) for payment of salaries [line 4 less Line 10]
- Salary and related benefits:
12. Amount retained by yourself from line 11 (Also copy to line 1, Statement C)
 13. Amount paid to employees (not to your Constable)
 14. **Total salaries paid** (add Lines 12 and 13)

5.	1050
6.	—
7.	1450
8a.	—
8b.	—
9.	1200
10.	3700
11.	8250
12.	8250
13.	—
14.	8250

FUND BALANCE **

15. Increase (or decrease) in fund balance - may be \$0 (line 11 less line 14)
16. Fund Balance at beginning of the year - may be \$0 (Ending Fund balance from last year's report)
17. Fund Balance (or deficit) at end of the year - may be \$0 (add lines 15 and 16)

15.	—
16.	—
17.	—

**Fund Balance = Amount Received minus Amount Spent. If lines 15 - 17 are zero, go to statement C, page 5.

Charles J. Licciardi (JP Name)
St Bernard Parish Justice of the Peace
of Ward or District H / 34
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Schedule of Compensation, Benefits and Other Payments to the Justice of the Peace
For the 12 Months Ended December 31, _____

Purpose	Dollar Amount
1. Salary (Enter amount from line 12 of statement A)	1. 8250
2. Benefits-insurance	2. 5518
3. Benefits-retirement	3. 1152
4. Benefits-other (describe)	4. 0
5. Benefits-other (describe)	5. 0
6. Benefits-other (describe)	6. 0
7. Car allowance	7. 0
8. Vehicle provided by government (if reported on form W-2)	8. 0
9. Per diem	9. 0
10. Reimbursements**	10. 697
11. Travel	11. 0
12. Registration fees**	12. 185
13. Conference travel	13. 0
14. Housing	14. 0
15. Unvouchered expenses (example: travel advances, etc.)	15. 0
16. Special meals	16. 0
17. Other	17. 0
18. TOTAL (enter total of lines 1-17)	18. 15802

**Line 10: If you attended JPC Training Conference during the year being reported, add total reimbursements paid by your parish for hotel, meals, mileage, etc.

Line 12: Registration fees for the conference paid by your parish.

Lines 10 and 12 will be zero if you did NOT attend the conference.