

Updated 08/07/2023

Sworn Financial Statements and Certification of Revenues \$75,000 or Less

Entity Name: Mound Fire District #1 Address: 138 Watts Drive Tallulah, LA 71282				
the end of the entity's fiscal year by ser	t is required to be filed with the Legislative Auditor within 90 days of inding a pdf copy by email to <u>ereports@lla.la.gov</u> , faxing to 225-339-ative Auditor – Local Government Services, P.O. Box 94397, Baton			
	AFFIDAVIT			
Personally came and appeared before t	the undersigned authority, Carter Moberley (officer's			
•	says that the financial statements herewith given present fairly, in all on of Mound Fire District #1 (entity's name) as			
	ear-end) and the results of operations for the year then ended, in			
accordance with the basis of accounti	ng described within the accompanying financial statements; that the			
entity has maintained a system of inte	rnal 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,	Carter Moberley (officer's name), who duly sworn,			
deposes, and says that Mound Fire				
in revenues and other sources for the ye	ear ended December 31, 2024(entity's year-end), and accordingly,			
is not required to have an audit for the				
/10				
OFFICER'S SIGNATURE	OFFICER'S TITLE			
Sworn to and subscribed before me, the	ais 200 day of Nowe . 20 ZS			
1)h ((d.a.				
NOTARY PUBLIC SIGNATORE	OFFICIAL SEAL OENEEN LOVE NOTARY ID # 54576 STATE OF LOUISIANA PARISH OF RICHLAND My Commission is for Life			

Sworn Financial Statement

Statement of Receipts and Disbursements		Statement A	
	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1. Madison Parish Police Jury	\$29,335.49		\$29,335.49
2.			\$ 0.00
3.			\$ 0.00
4.			\$ 0.00
5.			\$ 0.00
6. Total receipts (add lines 1 - 5)	\$29,335.49	\$ 0.00	\$29,335.49
DISBURSEMENTS (Provide Brief Description): 7. Insurance	\$5,993.79		\$5993.79
8. Utilities	\$2284.51		\$2284.51
9 Supplies (fuel, office, etc.)	\$ 480.69		\$ 480.69
10. Maintenance, Repairs, Etc.	\$10,389.08		\$10,389.08
11.			\$ 0.00
12.			\$ 0.00
13. Total Disbursements (add lines 7 - 12)	\$19,148.07	\$ 0.00	\$19,148.07
14. Change in fund balance (Lines 6 minus 13)	\$10,187.42	\$ 0.00	\$10,187.42
15. Fund Balance at beginning of year	\$100,543.44		\$100,543.44
16. Fund balance (deficit) at end of year (Add lines 14-15)This amount also goes on line 12, Statement B	\$110,730.86	\$ 0.00	\$110,730.86

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.

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

Balance Sheet

Statement B

	General Fund	Other Fund	Total
ASSETS (balances at year-end)			
Cash and cash equivalents			\$ 0.00
2. Investments (fair value)			Ψ 0.00
0.05			\$ 0.00
Office furnishings (Cost of desks, etc)			\$ 0.00
4. Equipment (Cost of fax machine, etc)			Ψ 0.00
			\$ 0.00
Other (brief description)			\$0.00
6. Total Assets (add lines 1 - 5)	\$110,730.86	\$ 0.00	\$110, 730.86
7. Liabilities (brief description): 8.			\$ 0.00
			\$ 0.00
9.			¢ 0 00
10.			\$ 0.00
			\$ 0.00
11. Total Liabilities (add lines 7 - 10)		A 0 00	
12. Fund balance (amount from Line 16 on Statement A)	\$ 0.00	\$ 0.00	\$ 0.00
12. I dire balaries (amount non take 10 on Statement A)	\$110,730.86	\$ 0.00	\$110,730.86
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	<u>\$110,730,86</u>	\$ 0.00	\$ 0.00 \$110,730.86
	- ATTA*\20.00	Ψ 0.00	4110,730.00

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name, Title: Todd Black. Board President

Purpose	Dollar Amount
1. Salary	\$0
2. Benefits-insurance	\$0
3. Benefits-retirement	
4. Benefits-other (describe)	\$0 \$0
5. Benefits-other (describe)	\$0
Benefits-other (describe)	\$0
7. Car allowance	\$0
8. Vehicle provided by government (if reported on your W-2)	\$0
9. Per diem	\$0
10. Reimbursements	\$0
11. Travel	\$0
12. Registration fees	\$0
13. Conference travel	
14. Housing	\$0 \$0
15. Unvouchered expenses (example: travel advances, etc.)	\$0
16. Special meals	\$0
17. Other	\$0
18. TOTAL (enter total of line 1-17)	\$ 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.)