9489

Affidavit and Revenue Certification

Grant Parish Fire Dist #7 ENTITY NAME

Grant Parish

Atlanta La (City), State

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ANNUAL SWORN 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).

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Personally came and appeared before the undersigned authority, Lisa Hickman (enter officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of Grant Parish Fire Dist #7 (enter entity name) as of 2016 (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, Lisa Hickman, (officer name), who, duly sworn, deposes and says that Grant Parish Fire Dist #7 (entity name) received $75,000 or less in revenues and other sources for the year ended 2016, and accordingly, is not required to have an audit for the previously mentioned year.

Lisa B Hickman
Officer's Signature

Sworn to and subscribed before me this 3 day of April, 2017.

J. Ellroy Lamoure
NOTARY PUBLIC SIGNATURE & SEAL

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 APR 12 2017

Please Complete This Section	
Officer's Name	Lisa Hickman
Officer's Title	Pres|Treasurer
Address	292 Dub Bryant Rd
City, Zip	Atlanta La 71404
Ph: Cell/Land	318-709-4611 |3186463656
E-mail	Medxemtp324@aol.com

Please return the completed form within 90 days of your entity's year-end to Louisiana Legislative Auditor – Local Government Services; Post Office Box 94397, Baton Rouge, LA 70804-9397 - Updated 8/3/16

Grant Parish Fire Dist #7
(Agency Name)

Statement of Cash Receipts and Disbursements
For the Year Ended 2016
(Year-End)

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1. Tax Millage, Rev. Share, Insurance Rebate	$ 45005.71	$	$ 45005.71
2. Tax Int.			
3.			
4.			
5.			
6. **Total receipts** (add lines 1 - 5)	$ 45005.71	$	$ 45005.71
DISBURSEMENTS (Provide Brief Description):			
7. Utilities - Water, Gas, Phone, Elect	$ 1958.11	$	$ 1958.11
8. Fuel + Maint Batteries	657.64		657.64
9. Insurance - Vehicle + Property	7184.85		7184.85
10. Mis = Dues, Mowing etc.	983.40		983.40
* 11. Reimburse Tax error to EPSD	18816.22		18816.22
12.			
13. **Total Disbursements** (add lines 7 - 12)	$ 29600.22	$	$ 29600.22
14. Change in fund balance (Lines 6 minus 13)	$ 15405.49	$	$ 15405.49
15. Fund Balance at beginning of year	$ 49810.36	$	$ 49810.36
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	$ 65215.52	$	$ 65215.52

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENTS FOR YOUR RECORDS

Grant Parish Fire Dist #7 (Agency Name)

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 2016 (Year-End)

Agency Head Name and Title: _____

Purpose	Dollar Amount
1. Salary	1.
2. Benefits-insurance	2.
3. 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.)

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENTS FOR YOUR RECORDS