

St. Tammany Parish Constable
of Ward or District 10 B1
Abita Springs (City) Louisiana

Financial Statements
As of and for the Year December 31, 2017

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, Constable (your name) Julie Lien, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of the Court of St. Tammany Parish, Louisiana, as of December 31, 2017, and the results of operations for the year then ended, on the cash basis of accounting.

In addition, (your name) Julie Lien, who duly sworn, deposes, and says that the Constable of Ward or District 10 B1 and St. Tammany Parish received \$200,000 or less in revenues and other sources for the year ended December 31, 2017, 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.

Julie A. Lien
Signature of Constable

Sworn to and subscribed before me, this ___ day of _____, 20__

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.	Constable's Name _____
	Address _____
	City, Zip Code _____
	Ph: Cell / Land _____
	Fax Number _____
	Email Address _____
Release Date <u>6/30/21</u>	

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

Julie Lien (Constable Name)
St. Tammany Parish Constable
 of Ward or District 10 B 1
Abita Springs (City) Louisiana

Statement of Cash Receipts and Disbursements
 For the Year Ended December 31, 2017

	General Fund	Garnishment Fund Activity
CASH RECEIPTS:		
1. State & Parish salary <i>(required, from W-2 Form)</i>	1. <u>4350.33</u>	
2. Fees collected (if collected) (include litter court fees)	2. <u>0</u>	
3. Garnishments collected (If applicable)		3. <u>0</u>
4. Other _____	4. <u>0</u>	
5. Total cash receipts. Add lines 1 through 4	5. <u>0</u>	
CASH DISBURSEMENTS:		
6. Cost of equipment purchased (fax machine, etc.)	6. <u>0</u>	
7. Materials and supplies (stationery, postage, etc.)	7. <u>0</u>	
8. Travel and other charges	<u>0</u>	
8a. For yourself	8a. <u>0</u>	
8b. For employees (If applicable)	8b. <u>0</u>	
9. Other operating expenses (rent, utilities, phone/fax line, etc.)	9. <u>0</u>	
10. Garnishments paid to others [From total collections on Line 3]		10. <u>0</u>
11. Total disbursements (add lines 6-10)	11. <u>0</u>	
12. Balance Available (loss) for payment of salaries (General Fund: Line 5 less Line 11; Garnishment Fund Activity: Line 3 less Line 10)	12. <u>0</u>	12. <u>0</u>
Salary and related benefits:		
13. Amount retained by yourself from line 12 as salary	13. <u>0</u>	13. <u>0</u>
14. Amount paid to employees (if applicable)	14. <u>0</u>	14. <u>0</u>
15. Total salaries paid (add lines 13 and 14)	15. <u>0</u>	15. <u>0</u>
FUND BALANCE		
16. Increase (decrease) in fund balance, may be \$0 (line 12 less line 15)	16. <u>0</u>	16. <u>0</u>
17. Fund Balance at beginning of the year, may be \$0 (Ending Fund balance from last year's report)	17. <u>0</u>	17. <u>0</u>
18. Fund balance (deficit) at end of the year, may be \$0 (Add lines 16 and 17)	18. <u>0</u>	18. <u>0</u>

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Balance Sheet, on December 31, 2017

	General Fund	Garnishment Fund (if applicable)	Total
ASSETS:			
1. Cash	0		0
2. Investments	0		0
3. Office furnishings (Cost of desks, etc.)	0		0
4. Equipment (Cost of fax machine, etc.)	0		0
5. Total Assets (add lines 1 - 4)	0	0	0
LIABILITIES AND FUND BALANCE:			
Liabilities:			
6. Cash overdraft	0		0
7. Garnishments due to others		0	0
8. Other liabilities	0		0
9. Total Liabilities (add lines 6 - 8)	0	0	0
Fund Balances:			
10. Ending Fund balance (from line 18, Statement A)	0	0	0
11. Other -	0		0
12. Total Liabilities and Fund Balance (add lines 9 - 11)	0	0	0

Note: Line 5 (Total Assets) should equal Line 12 (Total Liabilities and Fund Balance)

Julie Lien (Constable Name)
St. Tammany Parish Constable
 of Ward or District 10 B 1
Anta Springs (City) Louisiana

Schedule of Compensation, Benefits and Other Payments to the Constable

Purpose	Dollar Amount
1. Salary – Amount from line 1 of statement A	1. <u>4650.33</u>
2. Benefits-insurance	2. <u>0</u>
3. Benefits-retirement	3. <u>0</u>
4. Benefits-other (describe)	4. <u>0</u>
5. Benefits-other (describe)	5. <u>0</u>
6. Benefits-other (describe)	6. <u>0</u>
7. Car allowance	7. <u>0</u>
8. Vehicle provided by government (if reported on form W-2)	8. <u>0</u>
9. Per diem	9. <u>0</u>
10. Reimbursements	10. <u>0</u>
11. Travel	11. <u>0</u>
12. Registration fees	12. <u>0</u>
13. Conference travel	13. <u>0</u>
14. Housing	14. <u>0</u>
15. Unvouchered expenses (example: travel advances, etc.)	15. <u>0</u>
16. Special meals	16. <u>0</u>
17. Other	17. <u>0</u>
18. TOTAL (enter total of lines 1-17)	18. <u>4650.33</u>

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