JACKS» of Ward or District _____A (City) Louisiana

Financial Statements As of and for the Year Ended December 31, 201

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) $\underline{\neg k \circ M \land \Box \land F_{\alpha} \land e \land}$, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of the Court of $\underline{\neg a \circ K } \circ A$ Parish, Louisiana, as of December 31, $\underline{\neg a \circ } \bullet$, and the results of operations for the year then ended, on the cash basis of accounting.

In addition, (your name) <u>ThomAS</u> <u>L.</u> Faber, who duly sworn, deposes, and says that the Justice of the Peace of Ward or District <u>A</u> and <u>TackSod</u> Parish received \$200,000 or less in revenues and other sources for the year ended December 31, <u>2016</u>, 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.

Signature of JP

Sworn to and subscribed before me, this lot day of August, 2011 JUDGE DAVID D. WOMACK JUSTICE OF THE PEACE JACKSON PARISH DISTRICT 'D' DATE: \$ -10-17

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. AUG 1 6 2017 Release Date	JP's Name Address City, Zip Code Ph: Cell / Land Fax Number Email Address		
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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

	General Fund
CASH RECEIPTS:	* *
1. State & Parish salary (required information, on W-2 Form)	1. 1200.00
2. Total Fees collected (if collected) (include litter court fees)	2. Ø 3. Ø
3. Other	
4. Total cash receipts (add lines 1-3)	4. 1200.09
CASH DISBURSEMENTS:	4
5. Fees paid to constable (Out of Total Fees collected from line 2)	5. 0
6. Cost of equipment purchased (fax machine, etc.)	6. 300.00
Materials and supplies (stationery, postage, etc.)	7. 100,00
8. Travel and other charges	88. 100.00
8a. For yourself	
8b. For employees (not for Constable)	8b. Q 9. 500.00
9. Other operating expenses (rent, utilities, phone/fax line, etc.)	a a fan fan skriet fan s
10. Total disbursements (add lines 5-9)	10. 1,000,00
11. Balance Available (loss) for payment of salaries [line 4 less Line 10]	11. 200.00
Salary and related benefits:	
12. Amount retained by yourself from line 11 as salary	12. 200.00
13. Amount paid to employees (not to your Constable)	13.
14. Total salaries paid (add Lines 12 and 13)	14. 200.00
FUND BALANCE	
15. Increase (or decrease) in fund balance - may be \$0	(Th
(line 11 less line 14)	<u>15.</u>
16. Fund Balance at beginning of the year – may be \$0	10 00
(Ending Fund balance from last year's report) 17. Fund Balance (or deficit) at end of the year – may be \$0	<u>16.</u>
(add lines 15 and 16)	17.
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13.

Statement C Page 5

Thomas	L.	Faber	(JP Name)
Jackson	Parish	Justice of the	
of Ward or D	istrict_	A	
QuitMAN)	(City) Louisiana

Schedule of Compensation, Benefits and Other Payments to the Justice of the Peace

Purpose	Dollar Amount	
1. Salary - Amount from line 1 of statement A	1. 1200,00	
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 form W-2)	8.	
9. Per diem	9.	
10. Reimbursements	10.	
11. Travel	11.	
12. Registration fees	12. 185.00	
13. Conference travel	13. 220.42	
14. Housing	14. 415.80	
15. Unvouchered expenses (example: travel advances, etc.)	15.	
16. Special meals	16. 96,00	
17. Other	17.	
18. TOTAL (enter total of lines 1-17)	18 2117.22	