(City) Louisiana
Financial Statements As of and for the Year December 31,
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)  Narrhy Succasia School, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of the Court of Paguem' nes Parish, Louisiana, as of December 31 July, and the results of operations for the year then ended, on
the cash basis of accounting.
In addition, (your name) Manage Calabs Cook, who duly sworn, deposes, and says that the Constable of Ward or District and Magnemines Parish received \$200,000 or less in revenues and other sources for the year ended December 31 Apple, 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.  Matthe Laulaus Corke Signature of Constable  Sworn to and subscribed before me, this Aday of Match, 20 Match.
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 Legislative Auditor and, where appropriate, at the office of the parish clerk of court.  Release Date  Please Complete this Section:  Constable's Name Marthague Capial Scarle  Address  City, Zip Code Ph: Cell / Land Fax Number  Fax Number  Email Address  Constable's Name Marthague Capial Scarle  Address  City, Zip Code Ph: Cell / Land Fax Number  Fax Number  Email Address

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

Revised: 1/11/2017

Statement of Cash Receipts and Disbursements		
For the Year Ended December 31, All		
CASH RECEIPTS:  1. State & Parish salary (required, from W-2 Form)  2. Fees collected (if collected) (include litter court fees)  3. Garnishments collected (lf applicable)  4. Other  5. Total cash receipts. Add lines 1 through 4	General Fund  1. 6 44,02 2. 360.00 4. 5. 64,00	Garnishment Fund Activity  3.
CASH DISBURSEMENTS:  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 (If applicable)  9. Other operating expenses (rent, utilities, phone/fax line, etc.)  10. Garnishments paid to others [From total collections on Line 3]	6. 7. 8a 60, 00 8b	10.
11. Total disbursements (add lines 6-10)	11.50,00	
12. Balance Available (loss) for payment of salaries (General Fund: Line 5 less Line 11; Garnishment Fund Activity: Line 3 less Line 10)	12.650420	12.
Salary and related benefits:  13. Amount retained by yourself from line 12 as salary  14. Amount paid to employees (if applicable)  15. Total calculate paid (add lines 13 and 14)	13.6504.00 14.	13. 14.
15. Total salaries paid (add lines 13 and 14)	15. 6004	15.
FUND BALANCE  16. Increase (decrease) in fund balance, may be \$0 (line 12 less line 15)  17. Fund Balance at beginning of the year, may be \$0 (Ending Fund balance from last year's report)  18. Fund balance (deficit) at end of the year, may be \$0 (Add lines 16 and 17)	16. Q 17. Q 18. Q	16. 17. 18.

OF Ward or District (City) Louisiana

Revised: 1/11/2017

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Martha Sue Callais Cook (Constable Name)	
Man wemines Parish Constable	
of Ward or District 10	
(City) Louisiana	

## Schedule of Compensation, Benefits and Other Payments to the Constable

Purpose	Dollar Amount
Salary – Amount from line 1 of statement A	1.6144-00
2. Benefits-insurance	2.
3. Benefits-retirement	3.
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.
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 lines 1-17)	18/0/44,00