

Washington Parish Constable
of Ward/District 8/59
Franklinton (City) Louisiana

Financial Statements
As of and for the Year December 31, 2016

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) Ronnie Nielsen, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of the Court of Washington Parish, Louisiana, as of December 31, 2016, and the results of operations for the year then ended, on the cash basis of accounting.

In addition, (your name) Ronnie Nielsen, who duly sworn, deposes, and says that the Constable of Ward/District 8/59 and Washington Parish received \$200,000 or less in revenues and other sources for the year ended December 31, _____, 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.

Ronnie Nielsen
Signature of Constable

Sworn to and subscribed before me, this 30 day of March, 2017.

Jack Whaley J.P. 59-8.
NOTARY PUBLIC Signature

Please Complete this Section:

Under provisions of state law, this report is a public document. A copy of the report has been submitted to the entity and other appropriate public officials. The report is 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 Ronnie Nielsen
Street/P. O. Box Address 30237 Hwy 430
City/Zip Code Franklinton, La. 70438
Telephone Number cell 985-335-6617
Fax Number _____
Email Address joan.nielsen.66@gmail.com

Release Date APR 19 2017

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

Ronnie Nielsen (Constable Name)
Washington Parish Constable
 of Ward / District 8/59
Franklinton (City) Louisiana

Statement of Cash Receipts and Disbursements
 For the Year Ended December 31, 2016

	General Fund	Garnishment Fund Activity
CASH RECEIPTS:		
1. State & Parish salary (<i>required, from W-2 Form</i>)	1. <u>6,000.00</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>6,000.00</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		
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 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>6,000.00</u>	12. <u>0</u>
Salary and related benefits:		
13. Amount retained by yourself from line 12 as salary	13. <u>6,000.00</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>6,000.00</u>	15. _____
FUND BALANCE		
16. Increase (decrease) in fund balance, may be \$0 (line 12 less line 15)	16. <u>0</u>	16. _____
17. Fund Balance at beginning of the year, may be \$0 (Ending Fund balance from last year's report)	17. <u>0</u>	17. _____
18. Fund balance (deficit) at end of the year, may be \$0 (Add lines 16 and 17)	18. <u>0</u>	18. _____

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Roanie Nielsen (Constable Name)
Washington Parish Constable
 of Ward/District 8/59
 _____ (City) Louisiana

**Schedule of Compensation, Benefits and Other Payments to the Constable
 (REQUIRED - PLEASE SUBMIT COMPLETED FORM PER ATTACHED INSTRUCTIONS)**

Purpose	Amount
Salary	6,000.00
Benefits-insurance	0
Benefits-retirement	0
Benefits-other (describe)	0
Benefits-other (describe)	0
Benefits-other (describe)	0
Car allowance	0
Vehicle provided by government (enter amount reported on W-2)	0
Per diem	
Reimbursements	
Travel	732.00
Registration fees	
Conference travel	
Housing	
Unvouchered expenses (example: travel advances, etc.)	0
Special meals	
Other	