6589

| <u>Lincoln</u> I | Parish Constable |
|------------------|------------------|
| of Ward or Distr | ict Four         |
| Dubach           | (City) Louisiana |

E

Financial Statements
As of and for the Year Ended 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)

Prentis L. Barmore, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of the court of Ward 4 Lincoln 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) Prentis L. Barmore, who duly sworn, deposes, and says                       |
|--|
| that the Constable of Ward or District Four and Lincoln 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.  |
| Signature of Constable Wife  |
| Sworn to and subscribed before me, thisday of, 2018.   |
| MOTARY PUBLIC SIGNATURE & SEAL   |

For Office Use Only: Please complete this Section Under Provisions of state law, this report will become a public Constable's Name Prentis L. Barmore 441 Hwy 545 Address document on the Monday following the reless date. A copy of the 71235 City, Zip Code Dubach report will be submitted to appropriate public officials and be available for public inspection at the Baton Rouge office of the legislative Auditor **Email Address** bcbarmore@yahoo.com 318-548-8314 Cell Phone and, where appropriate, at he office of the parish clerk of court. 318-777-8314 Land/Fax No. MAY 0 9 2018 Release Date

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

Prentis L. Barmore

Statement A Page 3

| Lincoln Parish Constable   |         |         |     |               |
|--|---------|---------|-----|---------------|
| of Ward/District Four  |         |         |     |               |
| Dubach (City) Louisiana  | -       |         |     |               |
|  |         |         |     |               |
| Statement of Cash Receipts and Disbursements   |         |         |     |               |
| For the 12 Months Ended December 31, 2017  | _       |         |     |               |
|  | -       |         |     | 2             |
|  |         | General |     | Garnishment   |
|  | -       | Fund    |     | Fund Activity |
| CASH RECEIPTS:   |         |         |     |               |
| 1. State & Parish salary (SeeConstable W-2 Form, Box 1)  | 1.      | 2100.00 |     |               |
| 2. Fees collected (if collected) (Include litter court fees)   | 2.      | 150.00  |     |               |
| Garnishments Collected (if applicable)   | _       |         | 3.  | 0.00          |
| 4 Other  | 4 _     |         |     |               |
| 5. Total cash receipts (add lines 1 through 4)   | 5       | 2250.00 |     |               |
|  |         |         |     |               |
| CASH SISPLIPS FMENTS.  |         |         |     |               |
| CASH DISBURSEMENTS:  6. Cost of equipment purchased (fax machine, etc)   | 6       | 0.00    |     |               |
| 7. Materials and supplies (stationery, postage, etc)   | 6.<br>7 | 0.00    |     |               |
| 8. Travel and other charges  | • •     | 0.00    |     |               |
| 8a. For yourself   | 8a.     | 270.30  |     |               |
| 8b. For employees (if applicable)  | 8b.     |         |     |               |
| Operating expenses (rent, utilites,phone/fax line, etc)  | 9       | 452.04  |     |               |
| 10. Garnishments paid to others [From total collections on Line 3]   |         |         | 10. | 0.00          |
| 11. Total disbursements (add lines 6-10)   | 11      | 722,34  |     |               |
| The state of the s |         | 722101  |     |               |
| 12 Balance Available (loss) for payment of salaries  | 12      | 1527.66 | 12  |               |
| (General Fund : Line 5 less Line 11: Garnish Fund  |         |         |     |               |
| Garnishment Fund Activity: Line 3 less Line 10)  |         |         |     |               |
| Colon, and colored honofite.   |         |         |     |               |
| Salary and related benefits:  13 Amount retained by yourself from line 12 (copy to line 1, Statement C)  | 13      | 1527.66 | 13  |               |
| 14 Amount paid to employees (if applicable)  | 14      | 0.00    | 14  |               |
|  | -       |         |     |               |
| 15 Total salaries paid (add lines 13 and 14)   | 15      | 1527.66 | 15  |               |
| FINIS DALANOS  |         |         |     |               |
| 16 Increase (decrease) in fund balance, may be \$0   |         |         |     |               |
| (line 12 less line 15)   | 16      | 0.00    | 16  |               |
| 17 Fund Balance at beginning of the year, may be \$0   |         | 5,55    |     |               |
| (Ending Fund balance from last year's report)  | 17      | 0.00    | 17  |               |
| 18 Fund Balance (deficit) at end of the year, may be \$0   |         |         |     |               |
| (Add lines 16 an 17)   | 18      | 0.00    | 18  |               |
|  |         |         |     |               |

(Constable Name)

<sup>\*\*</sup>Fund Balance = Amount Received minus Amount Spent. If Lines 16 - 18 are zero, go to statementC, page 5.

Statement C Page 5

| Prentis L. Barmore  | (Constable Name) |      |                  |
|---------------------|------------------|------|------------------|
| Lincoln             | Parish Constable |      |                  |
| of Ward or District |                  | Four |                  |
|                     | Dubach           |      | (City) Louisiana |

## Schedule of Compensation, Benefits and Other Payments to the Constable For the 12 months Ended December 31, 2017

| Purpose  |     | Amount  |
|--|-----|---------|
| Salary (Enter total of both column from line13, Statement A) | 1.  | 2100.00 |
| 2. Benefits-Inurance   | 2.  | 0.00    |
| 3. Benefits-Retirement                                       | 3.  | 0.00    |
| 4 Benefits-Other (describe)                                  | 4   | 0.00    |
| 5. Benefits-Other (describe)                                 | 5.  | 0.00    |
| 6. Benefits-Other (describe)                                 | 6.  | 0.00    |
| 7. Car allowance   | 7.  | 0.00    |
| 8. Vehicle provided by government (if reported on form W-2)  | 8.  | 0.00    |
| 9. Per diem  | 9.  | 0.00    |
| 10. Reimbursements   | 10. | 338.90  |
| 11. Travel   | 11. | 0.00    |
| 12. Registration fees  | 12. | 185.00  |
| 13. Conference travel  | 13. | 0.00    |
| 14. Housing  | 14, | 0.00    |
| 15. Unvouchered expenses                                     | 15. | 0.00    |
| 16. Special meals  | 16. | 0.00    |
| 17. Other  | 17. | 0.00    |
| 18. Total (enter total of lines 1-17                         | 18. | 2623.90 |

<sup>\*\*</sup> Line 10: If yiu attended JPC Training Conference during the year being reported, add total reimbursements paid by your parish for hotel, meals, mileage, ect.

Line 12: Registration fees for the conference paid by your parish.

Lines 10 and 12 will be zero if yoy did NOT attend the conference.

Please return the completed form by March 31 to Louisiana of Legislative Auditor - Loca overnment Services.

Post Office Box 94397, Baton Rouge, LA 70804-9397