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Constable______ of Ward/District ______ Alewell +0.1_____ (City, Parish) Louisiana

Financial Statements As of and for the Year Ended December 31, 2006

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) $\underline{John} \underline{M^c Tear}$, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of the Court of \underline{Tenses} Parish, Louisiana, as of December 31, 2006, and the results of operations for the year then ended, on the cash basis of accounting.

In addition, (your name) <u>John M^cTear</u>, who duly sworn, deposes, and says that the Constable of Ward/District <u>and Ten SQS</u> Parish received \$200,000 or less in revenues and other sources for the year ended December 31, 2006, and accordingly, is not required to have an audit or a review/attestation for the previously mentioned fiscal year.

Signature

Sworn to and subscribed before me, this 30 ch day of March , 2007

Mary Beth Share NOTARY PUBLIC 30650

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 Street or P.O. Box City Zip Code Telephone Number Fax Number / Email

Please Complete this Section: Me Tear 7695

Release Date 5-2-07

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19.

John M	C Tear (Your Name)
Constable of Ward / District	
Newellton	(City, Parish), Louisiana

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Statement of Cash Receipts and Disbursements For the Year Ended December 31, 2006

	General Fund	Garnishment Fund (if applicable)
 CASH RECEIPTS: State salary supplement (required if received) Parish salary received (required) Garnishments collected (only if applicable) Fees collected (only if collected) Other (explain) Total cash receipts (add lines 1 - 5) 	1. 2. <u>3300.00</u> 4. <u>800.00</u> 5. 6. <u>4100.00</u>	<u>3.</u> <u>6.</u>
 CASH DISBURSEMENTS: 7. Operating expenses (cost of fax line, etc) 8. Materials and supplies (stationery, postage, etc) 9. Travel and other charges 9a. For yourself 9b. For employees (only if applicable) 10. Capital outlay (cost of purchases of equipment, etc) 11. Garnishments paid to others [Out of total collected in # 3]] 12. Total office disbursements (add lines 7 -11) 	7. 8. 371.83 9a. 613.00 9b. 10. 12. 984.83	<u>11.</u> <u>12.</u>
13. Available Balance (loss) (line 6 less line 12)	13.3 (15.17	13.
Salary and related benefits: 14. Amount retained by yourself from line 13 as salary 15. Amount paid to employees (if applicable) 16. Total salaries paid (add lines 14 and 15)	14. 3115. 17 15. 16. 3115. 17	16.
 17. Increase (decrease) in fund balance – may be \$0 (line 13 less line 16) 18. Fund Balance at beginning of the year – may be \$0 (Ending Fund balance from last year's report) 19. Fund balance (deficit) at end of the year – may be \$0 	<u>17. 0</u> 18. 0	<u>17.</u> _18.

19. Fund balance (deficit) at end of the year - may be \$0 (Add lines 17 and 18)