Constable _				
of Ward/District _	3			
Lincola	·	Louisiana		

Financial Statements As of and for the Year Ended December 31, 2005

Required by Louisiana Revised Statutes 24:513 and 24:514 to

		Legislative Auditor e close of the fiscal year.
	AFFI	DAVIT
A ' A		undersigned authority, Constable (your name) deposes and says that the financial statements
		tion of the Court of <u>Lucol</u> Parish,
Louisiana, as of Dece	mber 31, 2005, and the r	esults of operations for the year then ended, on
the cash basis of acco	ounting.	
received \$200,000	or less in revenues	and Lincole Parish and other sources for the year ended uired to have an audit or a review/attestation for
the previously mention	ned fiscal year.	Signature
Swom to and subscrib	ned before me, this 16th	day of MARCH, 2006. Murphy PUBLIC
Annette Murphy, Notary Public Lincoln Parish, Leuisiana My Commission is for life Notary No. 041654 Under provisions of state law, this report is document. Acopy of the report has been sub-	Constable's Name Street or P.O. Box City Zip Code Telephone Number FAX Number a public mitted to	Please Complete this Section: Columbus C. Ficualt POSOX 145 SIMSTON LA TIDTS 318-247-3602

documen 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.

Columbus C. Picuell sz	(Your Name)
Constable of Ward/District	<u> </u>
Lincoln, Louisiana	

Statement of Cash Receipts and Disbursements For the Year Ended December 31, 2005

		General Fund	Gamishment Fund (if applicable)
CASH RECEIPTS:	_		
State salary supplement received (required if received)		900.00	
2. Parish salary received (required)		9000	
Garnishments collected (if applicable)	_		
4. Fees collected (if collected)	_	100.	
Total cash receipts	A _	1900-	
OFFICE DISBURSEMENTS:			
5. Other operating services (cost of fax line, etc)	_		
6. Materials and supplies (stationery, postage, etc)	_		
7. Travel and other charges	-		
For yourself			
For employees (if applicable)	_		
8. Capital outlay (cost of purchases of equipment, etc) 9. Garnishments paid to others (if total included in No. 3)	_		
9. Garnishments paid to others (ii total included in No. 3)		<u></u>	
Total office disbursements	В _		
	_	-0-	
Available for salaries (<i>A less B</i>) 10. Salary and related benefits:			
Amount retained by yourself, as salary Amount paid to employees (if applicable)	<u></u>	1900 -	
Total salaries paid	c _		
Increase or (decrease) in fund balance (A less B less C) Fund Balance at the beginning of the year	D _	-0-	
Fund balance (deficit) at end of the year (D plus E)	F		

E This is the amount of the fund balance at the end of the prior year (see your copy of last years report)