

Constable 2
of Ward/District
ST JOSEPH, TENSAS (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) ERNEST L. HESTLE who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of the Court of TENSAS 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) _____, who duly sworn, deposes, and says that the Constable of Ward/District 2 and TENSAS 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.

Ernest L. Hestle
Signature

Sworn to and subscribed before me, this 8th day of March, 2007.

Christy C. Lee
Notary Public ID# 51094
Parish of Tensas - State of Louisiana
~~Commission Expires at Death~~

Christy C. Lee
NOTARY PUBLIC

Please Complete this Section:

Constable's Name ERNEST L. HESTLE
Street or P.O. Box PO Box 191
City ST JOSEPH, LA
Zip Code 71366
Telephone Number (318) 282-10769
Fax Number / Email (318) 766-4291

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.

Release Date 3-28-07

Statement A

ERNEST L. HESTLE (Your Name)
 Constable
 of Ward/District 2
ST JOSEPH, TENNESSEE (City, Parish) Louisiana

Balance Sheet, on December 31, 2006

| | General Fund | Garnishment Fund (if applicable) | Total |
|--|--------------|----------------------------------|-------|
| ASSETS: | | | |
| 1. Cash and cash equivalents on hand | 0 | 0 | 0 |
| 2. Investments (fair value) on hand | 0 | 0 | 0 |
| 3. Office furnishings (Cost of desks, etc) | 0 | 0 | 0 |
| 4. Equipment (Cost of fax machine, etc) | 0 | 0 | 0 |
| 5. Total Assets (add lines 1 - 4) | 0 | 0 | 0 |
| LIABILITIES AND FUND BALANCE: | | | |
| Liabilities: | | | |
| 6. Cash overdraft | 0 | 0 | 0 |
| 7. Garnishments due to others | 0 | 0 | 0 |
| 8. Other liabilities | 0 | 0 | 0 |
| 9. Total Liabilities (add lines 6 - 8) | 0 | 0 | 0 |
| Fund Balances: | | | |
| 10. Ending Fund balance (from line 20, Statement B) | 0 | 0 | 0 |
| 11. Other - | 0 | 0 | 0 |
| 12. Total Liabilities and Fund Balance (add lines 9 - 11) | 0 | 0 | 0 |

Note: Total Assets should equal Total Liabilities and Fund Balance.

PREPARE STATEMENT A ONLY IF YOU HAVE ACCOUNTS PAYABLE OR ACCOUNTS RECEIVABLE BALANCES BEING CARRIED OVER TO THE NEXT YEAR.

Statement B
(Required)

ERNEST L. HESTLE (Your Name)
Constable
of Ward / District 2
ST JOSEPH, TENN (City, Parish), Louisiana

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

| | General Fund | Garnishment Fund (if applicable) |
|---|-----------------|-------------------------------------|
| CASH RECEIPTS: | | |
| 1. State salary supplement <i>(required if received)</i> | 1. <u>900</u> | |
| 2. Parish salary received <i>(required)</i> | 2. <u>2400</u> | |
| 3. Garnishments collected (only if applicable) | | 3. <u>0</u> |
| 4. Fees collected (only if collected) | 4. <u>0</u> | |
| 5. Other (explain) | 5. <u>0</u> | |
| 6. Total cash receipts (add lines 1 - 5) | 6. <u>3300</u> | 6. <u>0</u> |
| CASH DISBURSEMENTS: | | |
| 7. Operating expenses (cost of fax line, etc) | 7. <u>50</u> | |
| 8. Materials and supplies (stationery, postage, etc) | 8. <u>50</u> | |
| 9. Travel and other charges | | |
| 9a. For yourself | 9a. <u>0</u> | |
| 9b. For employees (only if applicable) | 9b. <u>0</u> | |
| 10. Capital outlay (cost of purchases of equipment, etc) | 10. <u>0</u> | |
| 11. Garnishments paid to others [Out of total collected in # 3]] | 11. <u>0</u> | 11. <u>0</u> |
| 12. Total office disbursements (add lines 7 -11) | 12. <u>50</u> | 12. <u>0</u> |
| 13. Available Balance (loss) (line 6 less line 12) | 13. <u>3250</u> | 13. _____ |
| Salary and related benefits: | | |
| 14. Amount retained by yourself from line 13 as salary | 14. <u>3250</u> | 14. <u>0</u> |
| 15. Amount paid to employees (if applicable) | 15. <u>0</u> | 15. <u>0</u> |
| 16. Total salaries paid (add lines 14 and 15) | 16. <u>3250</u> | 16. <u>0</u> |
| 17. Increase (decrease) in fund balance - may be \$0 (line 13 less line 16) | 17. <u>0</u> | 17. <u>0</u> |
| 18. Fund Balance at beginning of the year - may be \$0 (Ending Fund balance from last year's report) | 18. <u>0</u> | 18. <u>0</u> |
| 19. Fund balance (deficit) at end of the year - may be \$0 (Add lines 17 and 18) | 19. <u>0</u> | 19. <u>0</u> |