

Constable
of Ward/District 2
Pioneer West Carroll (City, Parish) Louisiana

Financial Statements
As of and for the Year Ended December 31, 2008

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) Frankie Jones, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of the Court of West Carroll Parish, Louisiana, as of December 31, 2008, and the results of operations for the year then ended, on the cash basis of accounting.

In addition, (your name) Frankie Jones, who duly sworn, deposes, and says that the Constable of Ward/District 2 and West Carroll Parish received \$200,000 or less in revenues and other sources for the year ended December 31, 2008, and accordingly, is not required to provide for an audit, review/attestation, or compilation report for the previously mentioned fiscal year.

Frankie Jones
Signature of Constable

Sworn to and subscribed before me, this 30th day of March, 2009.

Patricia H. Capes #041017
NOTARY PUBLIC Signature

| | |
|--------------------|-------------------------------|
| | Please Complete this Section: |
| Constable's Name | <u>Frankie Jones</u> |
| Street or P.O. Box | <u>P.O. Box 176</u> |
| City | <u>Pioneer</u> |
| Zip Code | <u>71264</u> |
| Telephone Number | <u>318-282-9945</u> |
| Fax Number / Email | <u></u> |

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 4/8/09

Statement A

Franki Jones (Your Name)
 Constable
 of Ward/District 2
Parishes West Carroll (City, Parish) Louisiana

Balance Sheet, on December 31, 2008

| | General Fund | Garnishment Fund (if applicable) | Total |
|--|--------------|----------------------------------|-------|
| ASSETS: | | | |
| 1. Cash and cash equivalents on hand | 1. | | 1. 0 |
| 2. Investments (fair value) on hand | 2. | | 2. 0 |
| 3. Office furnishings (Cost of desks, etc) | 3. | | 3. 0 |
| 4. Equipment (Cost of fax machine, etc) | 4. | | 4. 0 |
| 5. Total Assets (add lines 1 - 4) | 5. | 5. | 5. 0 |
| LIABILITIES AND FUND BALANCE: | | | |
| Liabilities: | | | |
| 6. Cash overdraft | 6. | | 6. 0 |
| 7. Garnishments due to others | | 7. | 7. 0 |
| 8. Other liabilities | 8. | | 8. 0 |
| 9. Total Liabilities (add lines 6 - 8) | 9. | 9. | 9. 0 |
| Fund Balances: | | | |
| 10. Ending Fund balance (from line 18, Statement B) | 10. | | 10. 0 |
| 11. Other - | 11. | | 11. |
| 12. Total Liabilities and Fund Balance (add lines 9 - 11) | 12. | 12. | 12. 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)

Frankie Jones (Your Name)
 Constable
 of Ward / District 2
Pioneer West Carroll (City, Parish), Louisiana

Statement of Cash Receipts and Disbursements
 For the Year Ended December 31, 2008

| | General Fund | **Garnishment Fund (if applicable) |
|--|------------------------|------------------------------------|
| CASH RECEIPTS: | | |
| 1. State & Parish salary (<i>required, from W-2 Form</i>) | 1. 2700 ⁰⁰ | |
| 2. Fees collected (As constable, if any were collected) | 2. 0 | |
| 3. Garnishments collected (If applicable) | | 3. _____ |
| 4. Others (explain source of income) | 4. 0 | |
| 5. Total cash receipts (add lines 1 - 4) | 5. 2700 ⁰⁰ | 5. _____ |
| CASH DISBURSEMENTS: | | |
| 6. Operating expenses (cost of fax line, etc) | 6. 0 | |
| 7. Materials and supplies (stationery, postage, etc) | 7. 0 | |
| 8. Travel and other charges | 0 | |
| 8a. For yourself | 8a. 0 | |
| 8b. For employees (only if applicable) | 8b. 0 | |
| 9. Capital outlay (cost of purchases of equipment, etc) | 9. 0 | |
| 10. Garnishments paid to others [Out of total collected in # 4] | | 10. _____ |
| 11. Total disbursements (add lines 6 -10) | 11. 0 | 11. _____ |
| 12. Balance Available (loss) (line 5 less line 11) | 12. 2700 ⁰⁰ | 12. _____ |
| Salary and related benefits: | | |
| 13. Amount retained by yourself from line 12 as salary | 13. 2700 ⁰⁰ | 13. _____ |
| 14. Amount paid to employees (if applicable) | 14. _____ | 14. _____ |
| 15. Total salaries paid (add lines 13 and 14) | 15. 2700 ⁰⁰ | 15. _____ |
| FUND BALANCE | | |
| 16. Increase (decrease) in fund balance - may be \$0 (line 12 less line 15) | 16. 0 | 16. _____ |
| 17. Fund Balance at beginning of the year - may be \$0 (Ending Fund balance from last year's report) | 17. 0 | 17. _____ |
| 18. Fund balance (deficit) at end of the year - may be \$0 (Add lines 16 and 17) | 18. 0 | 18. _____ |

** GARNISHMENT FUND COLUMN IS ONLY FOR GARNINSHMENT ACTIVITY DURING THE YEAR