

TRANSMITTAL LETTER

ANNUAL FINANCIAL STATEMENTS

(Date) September 14, 2020

Ms. Gayle Fransen Engagement Manager Louisiana Legislative Auditor 1600 North Third Street Baton Rouge, LA 70802

Dear Ms. Fransen:

In accordance with Louisiana Revised Statute 24:513, enclosed are the Affidavit and Revenue Certification Form and the annual financial statements for my entity, as of and for the year ended December 3) 20/8 (entity's year-end). The statements include all funds under the control of this entity. The accompanying financial statements have been prepared on the cash basis of accounting.

Sincerely,

Officer's Signature

Officer's Name

Enclosures

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENT FOR YOUR RECORDS

_____ ENTITY NAME

Affidavit and Revenue Certification

<u></u>	CATAhouhi	AParish
	<u>LA</u>	(City), State
ANNUAL SWORN FINANCIAL STAT CERTIFICATION OF REVENUES \$7		f applicable)
	er the close of the	Louisiana Revised Statute 24:514 to be filed with the fiscal year. The certification of revenues of \$75,000 or tute 24:513(J)(1)(c)(i)(aa).
(enter officer name), who, duly sworn fairly the financial position of Cata December 3 2018 (e	n deposes and sa houla Fire Prentity's year-end),	d authority. Curtis D. Roark ys that the financial statements herewith given present of. District #1 (enter entity name) as of and the results of operations for the year then ended, in the accompanying financial statements.
(Complete if applicable) In addition, Curtis D. Roark Cuta houla FireProt Dist a sources for the year ended Decement the previously mentioned year.	⊭ <u>/</u> (entity nam	efficer name), who, duly sworn, deposes and says that ne) received \$75,000 or less in revenues and other and accordingly, is not required to have an audit for
-	(mit Di	Officer's Signature
Sworn to and subscribed before me th	nis <u>/4</u> day of <u>S</u>	reptember, 2020
NOT	Rubt J. C.L.	Robert T. Alexander, Notary Public Notary ID # 30596 Catahoula Parish, Louisiana My Commission Expires at Death
For Office Use Only		Please Complete This Section
Under provisions of state law, this report will become a publi Monday following the release date. A copy of the report will appropriate public officials and be available for public inspe- Rouge office of the Louisiana Legislative Auditor and, when office of the parish clerk of court.	be submitted to ection at the Baton	Officer's Name Curtis D. Roark Officer's Title Address City, Zip Phr Cell/Land

Release Date 10/7/2020

(Agency Name)	
,	
Statement of Cash Recei	pts and Disbursements
For the Year Ended	
(Year-End)	

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1	\$	<u> </u>	\$
2.			
3.			
4.			
5.			
6. Total receipts (add lines 1 - 5)	\$	\$	_ \$
DISBURSEMENTS (Provide Brief Description):			
7.	\$	_ \$	_ \$
8.		- ·	
9			
10.			
11.			
12.			
13. Total Disbursements (add lines 7 - 12)	\$	<u> </u>	_ \$
14. Change in fund balance (Lines 6 minus 13)	\$	\$	\$
15. Fund Balance at beginning of year	\$	\$	\$
16. Fund balance (deficit) at end of year (Add lines 14-15)This amount also goes on line 12, Statement B	\$	\$	\$

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(Agency Name)	
Balance Sheet, on _ (Year-End)	

	General Fund	Other Fund	Total
ASSETS (balances at year-end) -Give brief description:			
Cash and cash equivalents on hand	\$	\$	\$
2. Investments (fair value) on hand			
3. Office furnishings (Cost of desks, etc)			
4. Equipment (Cost of fax machine, etc)			
5. Other (brief description)			
6. Total Assets (add lines 1 - 5)	\$	\$	\$
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (give brief description):			
8.	\$	_ <u>\$</u>	
9.			
10.			
11. Total Liabilities (add lines 7 - 10)			
12. Fund balance (amount from Line 16 on Statement A)			
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$	\$	\$

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Catahoula Fire Protection District # (Agency Name)

Schedule of Compensation, Benefits and Other Payments to Agency Head or Chief Executive Officer (Required Form - Please Submit Completed Form Per Attached Instructions)

For the Year Ended 2018 (Year-End) acting president

Agency Head Name and Title: Curtis Roark vice president

Purpose	Dollar Amount	
1. Salary	1.	
2. Benefits-insurance	2.	
3. Benefits-retirement	3.	
4. Benefits-other (describe)	4. O	
5. Benefits-other (describe)	5.	
6. Benefits-other (describe)	6.	
7. Car allowance	7.	
8. Vehicle provided by government (if reported on your W-2)	8.	
9. Per diem	9. ()	
10. Reimbursements	10.	
11. Travel	11.	
12. Registration fees	12.	
13. Conference travel	13.	
14. Housing	14.	
15. Unvouchered expenses (example: travel advances, etc.)	15. ()	
16. Special meals	16.	
17. Other	17.	
18. TOTAL (enter total of line 1-17)	18.	

Please check here if the Agency Head does not receive any compensation, benefits, and other payments. (Act 462 of the 2015 Legislative Session allows nongovernmental entities or not-for-profit (quasi-public) entities to report on the Act 706 schedule **only** those payments to the agency head that are derived from the public funds.)

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Catalycula Fire Arotection

District # 1

Current Beard intembers: 04/02/2018

Bo Agness President

Deb Ainsworth

Alen McCarinach

Curbs Roanh

Streve Socialing Willer

Milse Vinson

Fire Chuf: Reggie Roanh

Frevetay: Horry Cassels.

INCOME

Property tax 13,500,00

Fire Insurance rebate 3,000.00

8ank Interest 300.00

TOTAL 15,800.00

EXPENSES

Unilities 2,600.00

Capital outlay 12,500.00

Safety Deposit Box 20.00

Fire truck fuel 500.00

Postage & Box rent 100.00

insurance 2,000.00

Equipment repair 5,000.00

Miscellaneous 5,000.00

TOTAL 27,720.00

Net Income -10,920.00