HILEN ____ Parish Constable

Ward/District ______ Alled PARish _____ (City, Parish) Louisiana

TRANSMITTAL LETTER

ANNUAL FINANCIAL STATEMENTS

(Date) 9-22-2021

Ms. Suzanne Elliott Engagement Manager Office of Legislative Auditor 1600 North Third Street (70802) P.O. Box 94397 Baton Rouge, LA 70804-9397

Dear Ms. Elliott:

In accordance with Louisiana Revised Statute 24:513, enclosed are my notarized affidavit, and financial statements as of and for the year ended December 31, ///2, or for the partial year beginning on $DEC_3/2017$ and ending on $DEC_3/2018$. The financial statements include all funds under the control and oversight of the court and have been prepared on the cash basis of accounting.

Sincerely,

in Shuff

Enclosures

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

<u>Please return the completed form by March 31 to Office of Legislative Auditor – Local</u> <u>Government Services, Post Office Box 94397, Baton Rouge, LA 70804-9397</u>

Parish Constable (City) Louisiana

Financial Statements As of and for the Year December 31, <u>/7</u>

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) $\underline{DonnieShuFF}$, who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of the Court of \underline{HIEn} Parish, Louisiana, as of December 31, $\underline{2018}$, and the results of operations for the year then ended, on the cash basis of accounting.

In addition, (your name) $\underline{Donnie ShuFF}$, who duly sworn, deposes, and says that the Constable of Ward/District 2 and $\underline{A//En}$ Parish received \$200,000 or less in revenues and other sources for the year ended December 31, $\underline{Za/B}$, and accordingly, *is required to provide a sworn financial statement and affidavit* and is not required to provide for an audit, review/attestation, or compilation report for the previously mentioned fiscal year.

Signature of Constable

Sworn to and subscribed before me, this 23 day of <u>September</u>, 2

Signature

Constable's Name Street/P.O.Box Address City/Zip Code Telephone Number Fax Number Email Address

Please Complete this Section ONNIE ShuFI

My Commission Expire

NOTARY

MARCI

DONNIERShuFF@gmAil.Com

<u>Please return the completed form by March 31 to Office of Legislative Auditor – Local</u> Government Services, Post Office Box 94397, Baton Rouge, LA 70804-9397

Statement A Page 3

.

DONNIE ShuFF	_(Constable Name)
<u></u> Parish Constable	
of Ward / District2	
<u>Allen</u> (City) Louisiana

Statement of Cash Receipts and Disbursements

For the Year Ended December 31, 2018

CASH RECEIPTS:	General Fund	Garnishment Fund Activity
 State & Parish salary (required, from W-2 Form) Fees collected (As constable, if any were collected) Garnishments collected (If applicable) Other	1. 3900.00 2.2660.00 4. 0 56560.00	<u>3. O</u>
 CASH DISBURSEMENTS: 6. Cost of equipment purchased (fax machine, etc.) 7. Materials and supplies (stationery, postage, etc.) 8. Travel and other charges 8a. For yourself 8b. For employees (If applicable) 9. Other operating expenses (rent, utilities, phone/fax line, etc.) 10. Garnishments paid to others [From total collections on Line 3] 11. Total disbursements (add lines 6-10) 	6. 725.00 7./300.00 300.00 8a 200.00 8b 0 9 100.00	<u>10. O</u>
12. Balance Available (loss) for payment of salaries (General Fund: Line 5 less Line 11; Garnishment Fund Activity: Line 3 less Line 10)	12.3945,00	<u>12. C</u>
Salary and related benefits: 13. Amount retained by yourself from line 12 as salary 14. Amount paid to employees (if applicable) 15. Total salaries paid (add lines 13 and 14)	13. 3945,00 14. 0 15. 3945,00	13. 0 14. 0 15. 0
 FUND BALANCE 16. Increase (decrease) in fund balance, may be \$0 (line 12 less line 15) 17. Fund Balance at beginning of the year, may be \$0 (Ending Fund balance from last year's report) 18. Fund balance (deficit) at end of the year, may be \$0 (Add lines 16 and 17) 	16. 0 17. 0 18. 0	<u>16.</u> <u>17.</u> <u>18.</u>

<u>Please return the completed form by March 31 to Office of Legislative Auditor – Local</u> <u>Government Services, Post Office Box 94397, Baton Rouge, LA 70804-9397</u>

DONN'E ShuFF	(Constable Name)
AllEN Parish Constable	
of Ward or District 2 AllEN PAPES 6	
AllEN PARish	(City) Louisiana

Schedule of Compensation, Benefits and Other Payments to the Constable

Purpose	Dollar Amount
1. Salary – Amount from line 1 of statement A	1. 3900.00
2. Benefits-insurance	2. N/A
3. Benefits-retirement	3. N/A
4. Benefits-other (describe)	4. N/A
5. Benefits-other (describe)	5. DIA
6. Benefits-other (describe)	6. N/A
7. Car allowance	7. N/A
8. Vehicle provided by government (if reported on form W-2)	8. N/A
9. Per diem	9. N/A
10. Reimbursements	10. 0/A.
11. Travel	11. N/A
12. Registration fees	12.7 185,00
13. Conference travel	13. 180 milES
14. Housing	14.5246.00
15. Unvouchered expenses (example: travel advances, etc.)	15. N/A
16. Special meals	16. N/A
17. Other	17. N/A
18. TOTAL (enter total of lines 1-17)	18.