

**Constable Annual Financial Report**

\_\_\_ Original Report

\_\_\_ County, Mississippi

\_\_\_ Revised Report

**Has County Elected to Pay Employer Portion of Retirement YES \_\_\_ NO \_\_\_**

Constable Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_

Employment Status: \_\_\_\_\_

Retired:

Retirement Date: \_\_\_\_\_

Calendar Year **2015**

SSN: \_\_\_\_\_

Statement of gross receipts from all sources accruing as compensation to the office and disbursements occurring as necessary expenses involved solely in complying with laws governing the office. **Please use Ink.**

**Part I – Receipts – Office of Constable**

Payments for direct services for county (County pays employer portion of P.E.R.S.)		
1. Allowance from the board of supervisors (§25-7-27(1)(f))		1
2. Bailiff Fees (§25-7-27(1)(e)) and (§19-19-8)		2
3. Total received for direct services for county (line 1 plus line 2)		3
Fees earned by Constable (Report Gross Fees which include amount held for P.E.R.S. by county)		
4. Fees for criminal and civil cases including garnishments (§25-7-27(1)(a)(b)(d) and §25-7-27(3))		4
5. Mileage Allowance (§25-7-27(1)(c))		5
6. Total received for fees earned by Constable (line 4 plus line 5)		6
<b>7. Gross Income for Constable (line 3 plus line 6)</b>		<b>7</b>

**Part II – Disbursements – Office of Constable**

8. Bank Service Charges	8		16. Supplies	16
9. Car and Truck Expense	9		17. Travel	17
9a. Standard Mileage # of Miles _____ x .575	9a		18. Meals/Entertainment	18
9b. Actual Expenses	9b		19. Uniforms	19
9c. Depreciation	9c		20. Phone	20
10. Depreciation (Other)	10		21. Other (List)	21
11. Dues and publications	11		22.	22
12. Insurance/Auto	12		23.	23
13. Insurance/Health(Employees Only)	13			
14. Professional Fees	14			
15. Office Expenses	15			
<b>24. Total Disbursements for Constable (add lines 8 through 23)</b>				<b>24</b>
<b>25. Net Income for Office of Constable (line 7 minus line 24)</b>				<b>25</b>

**Part III - Calculation of Net Fee Income for P.E.R.S.**

26. Total received for fees earned by Constable (Amount on line 6)	26
27. Total disbursements for Constable (Amount on line 24)	27
<b>28. Net Fee Income for P.E.R.S. (line 26 minus line 27)</b>	<b>28</b>

**Part IV- Retirement Contributions Calculation**

29. Employer Contributions (15.75%) Due from County on Allowance from BOS (Line 3)	29
30. Employer Contributions (15.75%) Due from Constable if County <b>DID NOT ELECT</b> to pay Retirement (Line 28)	30
31. Employer Contributions (15.75%) Due from County if County <b>HAS ELECTED</b> to pay Retirement (Line 28)	31
32. Employee Contributions (9%) Due from Constable (Line 25)	32

**Part V- County Retirement Contributions Due/Credit Calculation**

33. Employer Contributions County (line 29)	33
34. If County Has Elected to pay Employer Portion of Retirement (Line 31) if N/A leave blank	34
35. Less Contributions paid by County per County Payroll Records (include copy of payroll record)	35
36. Amount Due/Credit from/to County (add lines 33 and 34 then subtract line 35)	36

**Part VI- Constable Retirement Contributions Due/Credit Calculation**

37. Employee Contributions (line 32)	37
38. If County Did Not Elected to pay Employer Portion of Retirement (Line 30) if N/A leave blank	38
39. Less Contributions paid by Constable per County Payroll Records (include copy of payroll record)	39
40. Amount Due/Credit from/to Constable (add lines 37 and 38 then subtract line 39)	40

I swear that the above statement is true and accurate.

\_\_\_\_\_  
(Signature)

Constable

\_\_\_\_\_  
Social Security Number Required

Please print or type name as signature above \_\_\_\_\_

Sworn to and subscribed before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Signature)

Notary Public

**EACH COPY OF THIS FORM MUST BE NOTARIZED BY A NOTARY PUBLIC OTHER THAN THE PERSON FILING THE REPORT**

Include in **Part II - Disbursements** only necessary expenses directly related to the operations of the office. Do not include you: personal deferred compensation payments, your personal individual retirement account payments, your personal social security or payments, your personal expenses reimbursed by the county, your personal charitable contributions or gifts, your personal campaign expenses and your life insurance. Items not deductible as a business expense for income tax purposes shall not be included.