

CONFIDENTIAL: (RS 47:2327) FORMS FILED BY A TAXPAYER SHALL BE USED BY THE ASSESSOR, THE GOVERNING AUTHORITY, AND THE LOUISIANA TAX COMMISSION SOLELY FOR THE PURPOSE OF ADMINISTERING THIS STATUTE.

LEGAL CITATION AND INSTRUCTIONS: THIS REPORT SHALL BE FILED WITH THE ASSESSOR OF THE PARISH INDICATED BY APRIL 1ST OR WITHIN 45 DAYS AFTER RECEIPT, WHICHEVER IS LATER, IN ACCORDANCE WITH RS 47:2324.

-USE ATTACHMENTS IF NECESSARY-

LAT 6 PERSONAL PROPERTY REPORT- LOAN AND FINANCE COMPANIES YEAR

RETURN TO: R. TODD DUGAS, CLA ST. MARTIN PARISH ASSESSOR 415 ST. MARTIN STREET ST. MARTINVILLE, LA 70582	WARD	ASSESSMENT NO.
	NAME/ADDRESS (Indicate any Changes)	
NAME OF BUSINESS		
TYPE OF BUSINESS		
LOCATION (if different from mailing address)		
OWNER/PERSON TO CONTACT		
PHONE		

ANALYSIS OF OUTSTANDING RECEIVABLES – LOANS MUST BE BROKEN DOWN BY CATEGORIES

PERIODS 20_____	LOANS SECURED BY RECORDED MORTGAGES ON REAL ESTATE IN LOUISIANA COLUMN 1	LOANS SECURED BY RECORDED CHattel MORTGAGES ON PROPERTY IN LOUISIANA COLUMN 2	LOANS SECURED BY MORTGAGES ON PROPERTY NOT LOCATED IN LOUISIANA COLUMN 3	LOANS SECURED BY ANY OTHER ENCUMBRANCE OR PERSONAL PROPERTY COLUMN 4	LOANS SECURED BY PERSONAL ENDORSEMENTS COLUMN 5	SIGNATURE LOANS COLUMN 6	TOTAL
JANUARY 1	\$	\$	\$	\$	\$	\$	\$
JANUARY 31							
FEBRUARY 28							
MARCH 31							
APRIL 30							
MAY 31							
JUNE 30							
JULY 31							
AUGUST 31							
SEPTEMBER 30							
OCTOBER 31							
NOVEMBER 30							
DECEMBER 31							
TOTALS	\$	\$	\$	\$	\$	\$	\$
AVERAGES	\$	\$	\$	\$	\$	\$	\$

(OVER)

ANALYSIS OF OUTSTANDING PAYABLES – NOTES AND BILLS MUST BE BROKEN DOWN BY CATEGORIES

PERIODS 20_____	NOTES PAYABLE TO OTHERS NOT SECURED BY CHATTEL MORTGAGE COLUMN 1	NOTES PAYABLE TO BANKS NOT SECURED BY CHATTEL MORTGAGE COLUMN 2	MORTGAGE INDEBTEDNESS TO BANKS AND OTHERS COLUMN 3	NOTES PAYABLE TO OTHER FINANCE COMPANIES WITH SAME OWNERSHIP COLUMN 4	NOTES PAYABLE TO ALLIED AND SUBSIDIARY COMPANIES COLUMN 5	TOTAL
JANUARY 1	\$	\$	\$	\$	\$	\$
JANUARY 31						
FEBRUARY 28						
MARCH 31						
APRIL 30						
MAY 31						
JUNE 30						
JULY 31						
AUGUST 31						
SEPTEMBER 30						
OCTOBER 30						
NOVEMBER 30						
DECEMBER 31						
TOTALS	\$	\$	\$	\$	\$	\$
AVERAGES	\$	\$	\$	\$	\$	\$

REPOSSESSED ARTICLES (Inventories)

DATE	DESCRIPTION	REPOSSESSED VALUE	ACTUAL VALUE
JANUARY 1		\$	\$
JULY 1		\$	\$
DECEMBER 31		\$	\$
TOTAL		\$	\$

SIGNATURE AND VERIFICATION

"I declare under the penalties for filing false reports (R.S. 14:125; up to 500.00 fine or imprisonment for one year or both, plus additional penalties defined in Act 2330B of the 1989 Regular Session) that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return." "This return must be signed by the taxpayer, authorized officer or partner and by the preparer before a Notary Public."

SIGNATURE OF TAXPAYER

Date

SIGNATURE OF PREPARER

DATE

Email Address

Sworn to and subscribed before me this

Phone#

_____ day of _____ 20____

Sworn to and subscribed before me this

_____ day of _____ 20____

NOTARY PUBLIC

NOTARY PUBLIC