CRAIGHEAD COUNTY

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Fire FILED

Annual Taxpayer Transparency Improvement & Protection District Report*

MAR 20 2023

Nai	me of recorded district Egypt Fine Queartment COUNTY& PROBATE COURT CLERK
	Formation Statute
2.	Purpose of the district
	Contracts (identity of parties to contracts and district's obligations)
	a
	b
	c
	d
4.	Current Indebtedness or Bond Indebtedness (with reason for indebtedness and payout or maturity date)
	a. Man
	b
	c
	d
5.	Total existing delinquent assessments
	Responsible Delinquent Collector
6.	District's commissioners or directors(name, phone number, address, email)
-	a. Juny Crose 870-604-8568
	c. Jouril Lase 870 - 219-3573
	d
	e
	f
	g

/.	Current Year Meeting
	3-10-23 5:00 f.M. Phone
	Date Time Location
8.	District Assessor (name, phone number, address, email)
	Louise Lose 870-219-3573 LovisE. ROSE 98@ yahro. Com
	Jahov. Com.
٩	Payee for distribution from County Treasurer (name, phone number, email)
	Leuis Lose 870-219-3573 LoviSE. LOSE 98@ yahoo.
10.	
	25 D.)
11.	Method used to calculate assessments (flat fee; per acre; per structure; etc.)
	I lat Fee
12.	Statement itemizing the income and expenditures of the district for the most recent fiscal year (Attachment: balance
	sheet/bank statement)
_	MIWChio
	· · · · · · · · · · · · · · · · · · ·
Cor	mpleted By:
Pri	10015E KOSE 870-219-3573 Phone Number
	Source Rose 3-20-23
Sig	nature Date

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MAR 20 2023

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0114371 01 AB 0.504 001 EGYPT FIRE DEPARTMENT SUBORDINATE DIC PO BOX 26 EGYPT AR 72427-0026

COUNTY & PROBATE COURT CLERK

ACCOUNT#

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Cycle Enclosures

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RELATIONSHIPLUS BASIC CHECKING

February 1, 2023 through February 28, 2023

	su	MMARY	
Beginning Balance Deposits & Credits Withdrawals Fees Automatic Transfers Checks Ending Balance	\$17,466.44 \$26.95 + \$77.33 - \$0.00 - \$0.00 + \$677.17 - \$16,738.89	Minimum Daily Balance Average Monthly Statement Balance	\$16,738 \$17,285

•		WITH	DRAWALS		
02/15 02/17	Combined Ins Ins Proceedings Ins Ins Ins Ins Ins Ins Ins Ins Ins In			62.16 15.17	
			Te	Total Withdrawals	
A Prophysical Street		ci	IECKS	gradin di manifest (j. <mark>1847. di</mark>	
Date	Check No.	Amount	Date	Check No.	Amount
02/08 02/23	2615 2616	37.63 9.54	02/23	2617	630.00
* Break	k in Check Number Seque	nce.		Total Checks	\$677.17
			NCE SUMMARY		
Date	Balanc		Balance	Date	Balance
02/06 02/08	17.493.3 17,455.7		17.393.60 17,378.43	02/23	16,738.89

For all your banking needs, please call 1-800-REGIONS (734-4667) or visit us on the Internet at www.regions.com. (TTY/TDD 1-800-374-5791)

