

## **Justice of the Peace - Sworn Financial Statement**

Name: Catherine Gates Michiels
Ward/District: One Parish: Calcasieu
Physical Address: 1207 Cheyenne Drive, Lake Charles, LA 70611
Telephone: 337-855-6169 Email: WardOne.JP@Gmail.com
This annual sworn financial statement is required to be filed by March 31 with the Legislative Auditor by sending a pdf copy by email to <u>ereports@lla.la.gov</u> , by fax to (225) 339-3986 or mailing to Louisiana Legislative Auditor – Local Government Services, P.O. Box 94397, Baton Rouge, LA 70804-9397.
AFFIDAVIT
Personally came and appeared before the undersigned authority, Justice of the Peace (your name) Catherine Gates Michiels , who, duly sworn,
deposes and says that the financial statement herewith given presents fairly the financial position of the Court of Calcasieu Parish, Louisiana, as of
December 31, $2022$ , and the results of operations for the year then ended, on
the cash basis of accounting.
In addition, (your name), Catherine Gates Michiels who duly sworn,
deposes, and says that the Constable of Ward/District One Parish of Calcasieu received \$200,000 or less in revenues and other
sources for the year ended December 31,, and accordingly, is required to
provide a sworn financial statement and affidavit and is not required to provide
for a compilation report for the previously mentioned fiscal year.
Callein Boss Mittel  JUSTICE OF THE PEACE SIGNATURE
Sworn to and subscribed before me, this 14 day of March, 2013.  NOTARY PUBLIC SIGNATURE

Under provisions of state law, this report is a public document. A copy of this report will be submitted to the Governor, to the Attorney General, and to other public officials as required by state law. A copy of this report will be available for public inspection at the Baton Rouge office of the Louisiana Legislative Auditor and online at www.lla.la.gov.

Revised: 01/2023



## Justice of the Peace - Sworn Financial Statement/Compensation Schedule

Name:	Catherine Gates Michiels Wa	ard/District: One	_ Parish: C	alcasieu
				Amount
Receipts/Supplemental Report  Enter the amount of your State/Parish Salary from JP W-2 Form, Box 1  (do NOT send your W-2 form to the Legislative Auditor)				\$ 4,920.00
If you co	\$ 7,130.00			
	rish paid conference fees directly to the Attorney the parish paid	General for you, enter the		
	id conference fees to the Attorney General and your reimbursed for conference-related travel expense			
	llected any other receipts as JP (e.g., benefits, ho hered expenses, per diem), describe them and en			
Ту	pe of receipt			
Ту	pe of receipt			
<b>Expens</b> If you pa	es id any fees you collected to your constable, enter	the amount paid		\$ 2,770.00
If you ha	ve employees (not your constable), enter the am	ount you paid them in salary	//benefits	
	d any travel expenses as JP (including travel that ne amount paid	was reimbursed),		
If you ha	d any office expenses such as rent, utilities, supp	lies, etc., enter the amount	paid	
If you ha	d any other expenses as JP, describe them and e	nter the amount		
Ту	pe of expense			
Ту	pe of expense	- · · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
If JPs have kept by t	<b>hing Funds</b> we any cash left over after paying the expenses at the JP as his/her salary. If you have cash left ove ry, please describe below.	pove, the remaining cash is r that you do NOT consider	normally to be	
		·		
JPs norm JP office.	assets, Receivables, Debt or Other Discletion ally do not have fixed assets, receivables, debt, of If you do have fixed assets, receivables, debt, of egulations, please describe below.	r other disclosures associate	ed with their by state or	
federal re	egulations, please describe below.			