

## **Constable - Sworn Financial Statement**

Name: Shanna Bernard				
Ward/District: 11 Parish: St. Landry				
Physical Address: 172 Douglas Washington La. 70589				
Telephone: 337-945-2137 Email: bernardwsh@ail.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 <a href="mailto:ereports@lla.la.gov">ereports@lla.la.gov</a> , by fax to 225-339-3986 or by 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, Constable (your name) Shanna Bernard, who, duly sworn, deposes and				
says that the financial statement herewith given presents fairly the financial				
position of the Court of St. Landry Parish, Louisiana, as of				
December 31, $33$ , and the results of operations for the year then ended, on				
the cash basis of accounting.				
In addition, (your name) Shanna Bernard , who, duly sworn,				
deposes and says that the Constable of Ward/District1 Parish of				
St. Landry received \$200,000 or less in revenues and other				
sources for the year ended December 31, 23, 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.				
CONSTABLE SIGNATURE				
Sworn to and subscribed before me, this 21 day of March, 2014.				
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: 03/2023



## Constable - Sworn Financial Statement/Compensation Schedule

Year: 2023	Name: Shanna Bernard Ward/District: 1	1 Parish: St. Landry	
		Amount <u>General</u>	Amount Garnishments
Receipts/Supplemental Report  Enter the amount of your State/Parish Salary from Constable  W-2 Form, Box 1 (do NOT send your W-2 form to the Legislative Auditor)		\$ 4,800.00	
If you collected a	ny garnishments, enter the amount	<b>#</b> 400.00	
If you collected any other fees as constable, enter the amount		\$ 100.00	
If your JP collected any fees for you and paid them to you, enter the amount			
If the parish paid conference fees directly to the Attorney General for you, enter the amount the parish paid			
	rence fees to the Attorney General and you were reimbursed or reimbursed for conference-related travel expenses) nt reimbursed	-	
	nny other receipts as constable, (e.g., benefits, housing, spenses, per diem) describe them and enter the amount		
Type of re	ceipt		
Type of re	ceipt		
Expenses If you collected a you paid to other	ny garnishments, enter the amount of garnishments		
If you have empl	oyees, enter the amount you paid them in salary/benefits		
If you had any tr enter the amou	avel expenses as constable (including travel that was reimbursed), nt paid		
If you had any of the amount paid	ffice expenses such as rent, utilities, supplies, etc., enter d		
If you had any ot	ther expenses as constable, describe them and enter the amount		
Type of ex	pense		
Type of ex	rpense		
remaining cash is	inds te any cash left over after paying the expenses above, the s normally kept by the constable as his/her salary. If you have at you do NOT consider to be your salary, please describe below.		
Constables normassociated with t	Receivables, Debt or Other Disclosures ally do not have fixed assets, receivables, debt, or other disclosure heir Constable office. If you do have fixed assets, receivables, deb res required by state or federal regulations, please describe below.		

Revised 03/2023