

Constable – Sworn Financial Statement

Name: HILR	Y THO	DMAS			
Ward/District: 9/7 P		Parish:	Plaquemines		
Physical Add	ress:	153 udstad L	n Port Si	ulphur La 70083	
Telephone:	504-3	329-4519	Ema	il: global1vision@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 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) HILRY THOMAS , who, duly sworn, deposes and								
says that the financial statement herewith given presents fairly the financial								
position of the Court of Plaquemines Parish, Louisiana, as of								
December 31, 20 32 , and the results of operations for the year then ended, on								
the cash basis of accounting.								
In addition, (your name), HILRY THOMAS who duly sworn,								
deposes, and says that the Constable of Ward/District 9/7 Parish of								
Plaquemines received \$200,000 or less in revenues and other								
sources for the year ended December 31, 2022 , 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 <u>17</u> day of <u>APRIL</u> 2022 28.00 NOTARY UBLIC 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



Constable - Sworn Financial Statement/Compensation Schedule

Name:	HILRY THOMAS	Ward/District:	Parish: Plaquemines	
			Amount <u>General</u>	Amount <u>Garnishment</u>
Enter the	/Supplemental Report a amount of your State/Parish Salary f prm, Box 1 (do NOT send your W-2 for	\$ 6,244.00		
If you col	llected any garnishments, enter the ar	¢ 000 00		
If you co	llected any other fees as constable, er	\$ 200.00		
If your JF	collected any fees for you and paid t	hem to you, enter the amount		
	rish paid conference fees directly to th ne amount the parish paid	e Attorney General for you,		
for then	id conference fees to the Attorney Gen n (and/or reimbursed for conference-r ne amount reimbursed			
	llected any other receipts as constable hered expenses, per diem), describe t			
Ту	pe of receipt			
Ту	pe of receipt			
	es llected any garnishments, enter the ar d to others	nount of garnishments		
If you ha	ve employees, enter the amount you	paid them in salary/benefits		
	d any travel expenses as constable (ir ne amount paid			
If you ha the amo	d any office expenses such as rent, ut ount paid	ilities, supplies, etc., enter		
If you ha	d any other expenses as constable, de	escribe them and enter the amount		
Ту	pe of expense			
Ту	pe of expense			
If constal remaining	ting Funds bles have any cash left over after payi g cash is normally kept by the constat over that you do NOT consider to be y	ble as his/her salary. If you have		
Fixed A	ssets, Receivables, Debt or Ot	her Disclosures		

Constables normally do not have fixed assets, receivables, debt, or other disclosures associated with their Constable office. If you do have fixed assets, receivables, debt, or other disclosures required by state or federal regulations, please describe below.