

# Constable – Sworn Financial Statement

Name: STEPHEN BLACK  
Ward/District: S Parish: ST. CHARLES  
Physical Address: 162 OAK MANOR LN. SAINT ROSE, LA 70087  
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*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 [ereports@lla.la.gov](mailto:ereports@lla.la.gov) 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, Constable (your name) STEPHEN BLACK, who, duly sworn, deposes and says that the financial statement herewith given presents fairly the financial position of the Court of ST. CHARLES Parish, Louisiana, as of December 31, 2021, and the results of operations for the year then ended, on the cash basis of accounting.

In addition, (your name) STEPHEN BLACK, who duly sworn, deposes, and says that the Constable of ~~Ward~~ District S and ST. CHARLES Parish received \$200,000 or less in revenues and other sources for the year ended December 31, 2021, 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 17<sup>th</sup> day of MARCH, 2022



NOTARY PUBLIC SIGNATURE & SEAL  
EDWARD C. VOCKE, N  
NOTARY PUBLIC  
LA BAR #22882  
PARISH OF JEFFERSON  
STATE OF LOUISIANA  
COMMISSIONED FOR LIFE

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](http://www.lla.la.gov).

# Constable - Sworn Financial Statement/Compensation Schedule

Year: 2021 ; Constable Name/ Parish: STEPHEN BLAKE SAINT CHARLES

Amount  
General

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).

10,384.50

If you collected any garnishments, enter the amount.

N/A

If you collected any other fees as constable, enter the amount.

825.00

If your JP collected any fees for you and paid them to you, enter the amount.

1340.00

If the parish paid conference fees directly to the Attorney General for you, enter the amount the parish paid.

If you paid conference fees to the Attorney General and you were reimbursed for them (and/or reimbursed for conference-related travel expenses), enter the amount reimbursed.

If you collected any other receipts as constable (e.g., benefits, housing, unvouchered expenses, per diem), describe them and enter the amount:

Type of receipt \_\_\_\_\_

Type of receipt \_\_\_\_\_

## Expenses

If you collected any garnishments, enter the amount of garnishments you paid to others.

N/A

If you have employees, enter the amount you paid them in salary/benefits.

If you had any travel expenses as constable (including travel that was reimbursed), enter the amount paid.

If you had any office expenses such as rent, utilities, supplies, etc., enter the amount paid.

If you had any other expenses as constable, describe them and enter the amount:

Type of expense CONTINUING EDUCATION COURSES (MANDATORY)

75.00

Type of expense STATE ASSOCIATION DUES

30.00

## Remaining Funds

If constables have any cash left over after paying the expenses above, the remaining cash is normally kept by the constable as his/her salary. If you have cash left over that you do NOT consider to be your salary, please describe below.

\_\_\_\_\_

\_\_\_\_\_

## Fixed Assets, Receivables, Debt, or Other 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.

\_\_\_\_\_

\_\_\_\_\_