

Constable - Sworn Financial Statement

Name: Don Breaux
Ward/District: 7/8/9 Parish: Assumption
Physical Address: 106 St. Peter Pierre Part, La. 70339
Telephone: 985-209-6302 Email: dbchief@hotmail.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 ereports@lla.la.gov , 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) Don Breaux , who, duly sworn, deposes and
says that the financial statement herewith given presents fairly the financial position of the Court of Assumption 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), Don Breaux who duly sworn, deposes, and says that the Constable of Ward/District 7/8/9 Parish of
Assumption 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. CONSTABLE SIGNATURE
Sworn to and subscribed before me, this Aday of Fibruary, 2023 BRIDGET MARIE LANDRY Notary Public State of Louisiana Assumption Parish Assumption Parish Assumption Parish Assumption Parish Assumption is for Life My Commission is for Life My Commission is for Life 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.



Constable - Sworn Financial Statement/Compensation Schedule

Name:	Don Breaux	Ward/District: 7/8/9	Parish: Assumption	
			Amount General	Amount Garnishment
Enter the	Supplemental Report amount of your State/Parish Salarm, Box 1 (do NOT send your W-2		\$ 9,040.00	
If you col	lected any garnishments, enter the	e amount	0.070.00	\$ 0.00
If you col	lected any other fees as constable	, enter the amount	\$ 650.00	
If your JP collected any fees for you and paid them to you, enter the amount			\$ 0.00	
If the parish paid conference fees directly to the Attorney General for you, enter the amount the parish paid			\$ 0.00	
for them	d conference fees to the Attorney a (and/or reimbursed for conference e amount reimbursed	General and you were reimbursed ce-related travel expenses,	\$ 317.45	
	lected any other receipts as consta ered expenses, per diem), describ			
Tv	pe of receipt		\$ 0.00	
	pe of receipt		\$ 0.00	
you paid If you have enter the life you have the amount of the life you have the amount of the life you have the life yo	e amount paid d any office expenses such as rent ount paid	ou paid them in salary/benefits e (including travel that was reimbursed), t, utilities, supplies, etc., enter , describe them and enter the amount	\$ 0.00 \$ 0.00 \$ 0.00 \$ 317.45	
If constat		paying the expenses above, the stable as his/her salary. If you have be your salary, please describe below.		
Constable associated	d with their Constable office. If yo	Other Disclosures ts, receivables, debt, or other disclosures to do have fixed assets, receivables, debt, deral regulations, please describe below.		