

Constable - Sworn Financial Statement

Name: Andrew Sercovich
Ward/District: F Parish: St Bernard
Physical Address: 416 Riess Place Chalmette, LA 70043
Telephone: 504-756-9158 Email: ajsercovich@yahoo.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) Andrew Sercovich, who, duly sworn, deposes and says that the financial statement herewith given presents fairly the financial position of the Court of St Bernard Parish, Louisiana, as of December 31,, and the results of operations for the year then ended, on the cash basis of accounting.
In addition, (your name) Andrew Sercovich , who, duly sworn,
deposes and says that the Constable of Ward/District F Parish of St Bernard 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 24th day of March, 2025. NOTARY PUBLIC SIGNATURE the Peace, Ward C St. Bernard Parish Under provisions of striked, this report is a public doctate. Copy of this report will be submitted to the Governor, to the Attorney-General, and to other public officials as required by shown Berore West Parish Dayavailable for public inspection at the Bason Rouge office of the Louisiana Legislative Auditor and online at www.lla.la.goldge Beau Bowman 19 Queens Court, Chalmette, La. 70043



Constable - Sworn Financial Statement/Compensation Schedule

Year: 24	Name: _	Indrew Sercovich	Ward/District:	Г	Paris	h: St Be	emaru
					nount neral	AN	—Amount Garnishment
	unt of your Sta	eport te/Parish Salary from Con send your W-2 form to the		102112-0	658	41 4	92
If you collected	d any garnishm	ents, enter the amount					\$ 0.00
If you collected	d any other fee	s as constable, enter the a	amount	***************************************		V	
If your JP colle	ected any fees f	or you and paid them to y	ou, enter the amount	\$	1,935.0)(
	aid conference ount the parish	fees directly to the Attorno paid	ey General for you,			_	
for them, (ar		the Attorney General and d for conference-related t d		phonon, self-or	-	_	
		eipts as constable, (e.g., l diem) describe them and					
Type of	receipt					_	
Type of	receipt			Shared School	-		
Expenses If you collected you paid to o		ents, enter the amount of	garnishments				
If you have en	nployees, enter	the amount you paid ther	m in salary/benefits				
If you had any enter the am		s as constable (including	travel that was reimbursed	d),			
If you had any the amount p		s such as rent, utilities, su	ipplies, etc., enter				
If you had any	other expense	s as constable, describe th	nem and enter the amount	:			
Type of expense Uniforms Badge Supplies					\$ 334.9	95	
Type of	expense					te alore	
remaining cast	ave any cash le n is normally ke	eft over after paying the e pt by the constable as his I consider to be your sala					
Constables not associated with	rmally do not he h their Constab	e office. If you do have f	closures les, debt, or other disclosu ixed assets, receivables, d ions, please describe belo	ebt,			