

Constable - Sworn Financial Statement

Name: Lony Guerra						
Ward/District: K Parish: Saint Bernard						
Physical Address: 1828 Russell Pl. Saint Bernard, La. 70085						
Telephone: 504-583-1555 Email: tnygrr@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.qov , by fax to 225-339-3986 or by mailing to Louislana 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) Tony Guerra, who, duly sworn, deposes and						
says that the financial statement herewith given presents fairly the financial						
position of the Court of Saint Bernard Parlsh, Louisiana, as of						
December 31,2024, and the results of operations for the year then ended, on						
the cash basis of accounting.						
In addition, (your name) Tony Guerra, who, duly sworn,						
deposes and says that the Constable of Ward/District K Parish of						
Saint Bernard received \$200,000 or less in revenues and other						
sources for the year ended December 31, 2024, 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.						
Long Guerra						
CONSTABLE SIGNATURE						
Sworn to and subscribed before me, this 05 day of m^2 , 000 , 000 .						
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: _20	24 Name:	Tony Guerra	Ward/District:	K Parish: Sai	nt Bernard
				Amount <u>General</u>	Amount <u>Garnishments</u>
Enter the a		il Report State/Parish Salary fron OT send your W-2 form	3 7,200.00		
If you colle If your JP of If the parisenter the If you paid for them, enter the If you colle unyouche	cited any other of the conference of the conference feed and other reimbutted any other red expenses,	nce fees directly to the A rish paid es to the Attorney Gener ursed for conference-rel ursed receipts as constable, (per diem) describe then	r the amount m to you, enter the amount Attorney General for you, ral and you were reimbursed ated travel expenses) e.g., benefits, housing,	\$ 0.00 \$ 680.00 \$ 0.00	\$ 0.00
Туре	of receipt				
Expenses If you colle you paid	ted any garnis	shments, enter the amo	unt of garnishments		\$ 0.00
If you have employees, enter the amount you paid them in salary/benefits				\$ 0.00	
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					
				\$ 900.00	
If you had	any other expe	enses as constable, desc	ribe them and enter the amou	ınt	
Туре	of expense				·
Тур	of expense				
remaining	s have any ca: ash is normall	ly kept by the constable	the expenses above, the as his/her salary. If you have ir salary, please describe below		
				_	
Constables associated	normally do no with their Cons	stable office. If you do I	er Disclosures Leivables, debt, or other disclo have fixed assets, recelvables egulations, please describe be	, debt,	
	·		Revised 03/2023	- -	