

## **Constable - Sworn Financial Statement**

Name: Kim Miller
Ward/District: 1/5 Parish: WEBSTER
Physical Address: 476 ART CAMP RD. HEFLIN, LA 71039
Telephone: 3185408790 Email: kmiller71039@gmail.com
This annual sworn financial statement is required to be filed by March 31 with the Legislative Auditor sending a pdf copy by email to <u>ereports@lla.la.gov</u> , by fax to 225-339-3986 or by mailing Louisiana Legislative Auditor – Local Government Services, P.O. Box 94397, Baton Rouge, LA 7080 9397.
AFFIDAVIT
Personally came and appeared before the undersigned authority, Constably (your name) $\frac{\text{Kim Miller}}{\text{Miller}}$ , who, duly sworn, deposes an says that the financial statement herewith given presents fairly the financial position of the Court of $\frac{\text{WEBSTER}}{\text{December 31, }}$ Parish, Louisiana, as December 31, $\frac{2024}{\text{Nem Normal Parish}}$ , and the results of operations for the year then ended, of the cash basis of accounting.
In addition, (your name) Kim Miller, who, duly swor
deposes and says that the Constable of Ward/District1/5 Parish WEBSTER received \$200,000 or less in revenues and other
sources for the year ended December 31, $2024$ , and accordingly, is required :
provide a sworn financial statement and affidavit and is not required to provide
for a compilation report for the previously mentioned fiscal year.
Kin Miller
CONSTABLE SIGNATURE
Sworn to and subscribed before me, this 315 day of 7-lung 2025.
Math Day
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.ta.gov.

Revised: 03/2023



## Constable - Sworn Financial Statement/Compensation Schedule

Year: 2024	Name: KIM MILLER	Ward/District:	1/5 Parish: WE	BSTER
			Amount General	Amount <u>Garnishments</u>
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)			\$ 2,6 <del>4</del> 0.00	_
If you collected any garnishments, enter the amount			0	0
If you collected any other fees as constable, enter the amount			0	
If your JP collected any fees for you and paid them to you, enter the amount			0	
If the parish paid conference fees directly to the Attorney General for you, enter the amount the parish paid			0	
	rence fees to the Attorney General or reimbursed for conference-relate nt reimbursed		0	
If you collected as unvouchered ex	ny other receipts as constable, (e.g penses, per diem) describe them a	)., benefits, housing, nd enter the amount		
Type of rec	teipt 0		0	
Type of rec	ceipt 0		<u>o</u>	
you paid to othe  If you have emplo  If you had any tra  enter the amoun	oyees, enter the amount you paid to avel expenses as constable (including the paid fice expenses such as rent, utilities	them in salary/benefits  ng travel that was reimbursed	), <u>0</u> 0 \$ 155.00	0
If you had any oth	ner expenses as constable, describ	e them and enter the amount		
Type of exp	<sub>bense</sub> <u>badge, gun, constab</u>	le shirts, mileage	\$ 1,272.00	
Type of expense School cost, tablet			\$ 505.00	
remaining cash is	nds any cash left over after paying the normally kept by the constable as t you do NOT consider to be your s	e expenses above, the his/her salary. If you have	frank frankriger frankriger	
	NA	dary, plante describe belan.		
Constables norma associated with th	Receivables, Debt or Other I lly do not have fixed assets, receiv eir Constable office. If you do haves es required by state or federal regu	ables, debt, or other disclosur e fixed assets, receivables, de	bt,	
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		Revised 03/2023		