

Executive/Central Committee Name: ST. BERNARD PARISH DEMOCRATIC COMMITTEE

City: VIOLET Parish: ST. BERNARD

**TRANSMITTAL LETTER**

**ANNUAL FINANCIAL STATEMENTS**

Date: 12/31/2022

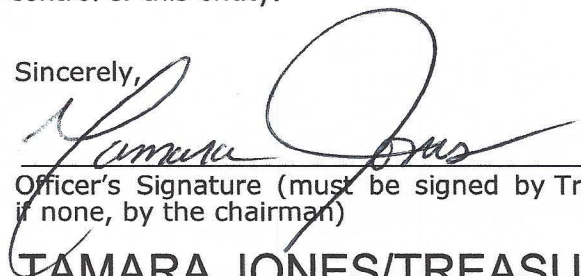
VIA Email: ereports@lla.la.gov

Ms. Gayle Fransen, CPA  
Local Government Reporting Manager  
Office of the Louisiana Legislative Auditor

Dear Ms. Fransen:

In accordance with Louisiana Revised Statute 18:447 and 464(F), enclosed are the certified annual financial statements for my office, as of and for the year ended 12/31/2022.  
The statements include all funds under the control of this entity.

Sincerely,



Officer's Signature (must be signed by Treasurer or, if none, by the chairman)

**TAMARA JONES/TREASURER**

Officer's Name/Title

Street/P.O. Box Address 2824 ACORN DRIVE

City/Zip Code VIOLET, LOUISIANA 70092

Telephone Number (504)382-3699

Email Address ttcommunications1@yahoo.com

Enclosures

**PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENT FOR YOUR RECORDS.**

Executive/Central Committee Name: ST. BERNARD PARISH EXECUTIVE COMMITTEE

**Statement of Financial Position at** 12/31/2022 (month, day and year of fiscal year end)

**ASSETS** (balances at year-end)

1	Cash and cash equivalents on hand _____	\$ 14,063.28
2	Investments (fair value) on hand _____	_____
3	Office furnishings (cost of desks, etc.) _____	_____
4	Equipment (cost of computers, etc.) _____	_____
5	Other (brief description) _____	_____
6	<b>Total Assets</b> (add lines 1-5)	<u>\$ 14,063.28</u>

**LIABILITIES AND NET ASSETS** (balances at year-end):

7	Liabilities (give brief description): _____	<u>\$ 0.00</u>
8	_____	_____
9	_____	_____
10	<b>Total Liabilities</b> (add lines 7-9)	<u>\$ 0.00</u>
11	<b>Total Net Assets</b> (line 6 minus line 10, which should be the same as amount from Form B, line 16)	<u>\$ 14,063.28</u>
12	<b>Total Liabilities and Net Assets</b> (add lines 10 and 11)	<u>\$ 14,063.28</u>

This amount should match Line 6 above.

Executive/Central Committee Name: ST. BERNARD PARISH DEMOCRATIC COMMITTEE

**Statement of Cash Receipts and Disbursements**

**As of and For the Year Ended** 12/31/2022 (month, day and year of fiscal year end)

**RECEIPTS:**

1	National/State Party Contributions _____	<u>\$ 0.00</u>
2	Donations _____	<u>\$ 0.00</u>
3	Other (brief description) _____	<u>\$ 0.00</u>
4	Other (brief description) _____	<u>\$ 0.00</u>
5	Other (brief description) _____	<u>\$ 0.00</u>
6	<b>Total Receipts</b> (add lines 1-5)	<u>\$ 0.00</u>

**DISBURSEMENTS (Provide Brief Description):**

7	Bank Charges _____	<u>\$ 0.00</u>
8	Meetings _____	<u>\$ 0.00</u>
9	Outreach (radio, newspaper, mailings) _____	<u>\$ 0.00</u>
10	Utilities _____	<u>\$ 0.00</u>
11	Other (brief description) <u>MEALS</u>	<u>\$ 25.37</u>
12	Other (brief description) _____	<u>\$ 0.00</u>
13	<b>Total Disbursements</b> (add lines 7-12)	<u>\$ 25.37</u>
14	<b>Change in Net Assets</b> (Line 6 minus line 13)	<u>-\$ 25.37</u>
15	Net Assets at Beginning of the Year (taken from previous year's report, Form A, line 11)	<u>\$ 14,088.65</u>
16	<b>Net Assets (deficit) at End of Year</b> (Add lines 14 and 15) - This line should match Form A, line 11.	<u>\$ 14,063.28</u>