

Executive/Central Committee Name: Claiborne Parish Republican Party Exec. Committee

City: Homer Parish: Claiborne

TRANSMITTAL LETTER

ANNUAL FINANCIAL STATEMENTS

Date: 4/6/2026

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 Dec. 31, 2025.

The statements include all funds under the control of this entity.

Sincerely,

Kenneth White

Digitally signed by Kenneth White
Date: 2026.04.06 15:00:04 -05'00'

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

Kenneth White Chairman

Officer's Name/Title

Street/P.O. Box Address 125 Beavers Creek RD

City/Zip Code Haynesville, LA 71038-7134

Telephone Number 318-548-8051

Email Address lakenwhite@aol.com

Enclosures

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

Executive/Central Committee Name: Claiborne Parish Rep Party Exec Com

Statement of Financial Position at Dec 31, 2025 (month, day and year of fiscal year end)

ASSETS (balances at year-end)

1	Cash and cash equivalents on hand _____	\$ 489.80
2	Investments (fair value) on hand _____	<u>\$ 0.00</u>
3	Office furnishings (cost of desks, etc.) _____	<u>\$ 0.00</u>
4	Equipment (cost of computers, etc.) _____	<u>\$ 0.00</u>
5	Other (brief description) _____	<u>\$ 0.00</u>
6	Total Assets (add lines 1-5)	<u>\$ 489.80</u>

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

7	Liabilities (give brief description): _____	<u>\$ 0.00</u>
8	_____	_____
9	_____	_____
10	Total Liabilities (add lines 7-9)	<u>\$ 0.00</u>
11	Total Net Assets (line 6 minus line 10, which should be the same as amount from Form B, line 16)	<u>\$ 489.80</u>
12	Total Liabilities and Net Assets (add lines 10 and 11)	<u>\$ 489.80</u>

This amount should match Line 6 above.

Executive/Central Committee Name: Claiborne Parish Party Exec Com**Statement of Cash Receipts and Disbursements****As of and For the Year Ended** 12/31/2025 (month, day and year of fiscal year end)**RECEIPTS:**

1	National/State Party Contributions _____	\$ 0.00
2	Donations _____	\$ 0.00
3	Other (brief description) <u>Qualifying Fees</u> _____	\$ 80.00
4	Other (brief description) _____	\$ 0.00
5	Other (brief description) _____	_____
6	Total Receipts (add lines 1-5)	<u>\$ 80.00</u>

DISBURSEMENTS (Provide Brief Description):

7	Bank Charges _____	\$ 180.00
8	Meetings _____	\$ 0.00
9	Outreach (radio, newspaper, mailings) _____	\$ 0.00
10	Utilities _____	\$ 0.00
11	Other (brief description) _____	\$ 0.00
12	Other (brief description) _____	\$ 0.00
13	Total Disbursements (add lines 7-12)	<u>\$ 180.00</u>
14	Change in Net Assets (Line 6 minus line 13)	<u>-\$ 100.00</u>
15	Net Assets at Beginning of the Year (taken from previous year's report, Form A, line 11)	<u>\$ 589.80</u>
16	Net Assets (deficit) at End of Year (Add lines 14 and 15) - This line should match Form A, line 11.	<u>\$ 489.80</u>