Executive/Central Committee Name:	JEST FELIOIANA PARISH REPUBLIONN				
City:	JEST FELIOIANA PARISH REPUBLIONN EXECUTIVE COMMITTE Parish:				
TRANSMITTAL LETTER					
ANNUAL FINANCIAL STATEMENTS					
Date:					
VIA Email: ereports@lla.la.gov					
Ms. Gayle Fransen, CPA					
Local Government Reporting Manager					
Office of the Louisiana Legislative Auditor					
Dear Ms. Fransen:					
	tute 18:447 and 464(F), enclosed are the certified annual				
The statements include all funds under the	and for the year ended <u>DECEMBER 31 ス0ス3</u> .e control of this entity.				
	Officer's Signature (must be signed by Treasurer or, if none, by the chairman)				
	Officer's Name/Title				
	Street/P.O. Box Address CHARLES F GRIFFIN, II P.O. BOX 1817 City/Zip Code ST. FRANCISVILLE, LA 70775				
	Telephone Number (225) 635-689) Email Address CGRIFFIN LAW FIRM @ ATT. NET				

Enclosures

Executive/Central Committee Name: _	WESTFELI	CIANA PARISH REPOBLICAN E	XEWTIVE
	1,		OMMITTEE
Statement of Financial Position at	12 31 23	(month, day and year of fiscal year end)	

ASS	SETS (balances at year-end)	
1	Cash and cash equivalents on hand	
2	Investments (fair value) on hand	0-20
3	Office furnishings (cost of desks, etc.)	0 - 00
4	Equipment (cost of computers, etc.)	<u>000-6</u>
5	Other (brief description)	
6	Total Assets (add lines 1-5)	\$ 0.00
	BILITIES AND NET ASSETS (balances at year-end):	0-00
7 8	Liabilities (give brief description):	
9		
10	Total Liabilities (add lines 7-9)	\$ 0.00
11	Total Net Assets (line 6 minus line 10, which should be the same as amount from Form B, line 16)	\$ 0.00
12	Total Liabilities and Net Assets (add lines 10 and 11)	\$ 0.00
	This amount should match Line 6 above.	

Exe	cutive/Central Committee Name: WESTFELICIANA PARISH REPVE	BLICAN
		COMMITT
	tement of Cash Receipts and Disbursements	
As (of and For the Year Ended $12/31/23$ (month, day and year of fisca	l year end)
REC	EIPTS:	
1	National/State Party Contributions	0-00
2	Donations	0 - 00
3	Other (brief description)	
4	Other (brief description)	
5	Other (brief description)	
6	Total Receipts (add lines 1-5)	\$ 0.00
DIS	BURSEMENTS (Provide Brief Description):	
7	Bank Charges	0.00
8	Meetings	0-60
9	Outreach (radio, newspaper, mailings)	<u> </u>
10	Utilities	0-00
11	Other (brief description)	
12	Other (brief description)	
13	Total Disbursements (add lines 7-12)	\$ 0.00
14	Change in Net Assets (Line 6 minus line 13)	\$ 0.00
15	Net Assets at Beginning of the Year (taken from previous year's report, Form A, line 11)	_ O _ W
16	Net Assets (deficit) at End of Year (Add lines 14 and 15) - This line should match Form A, line 11.	\$ 0.00