

Executive/Central Committee Name: Republican Parish Executive Committee  
City: Oak Grove, La. Parish: West Carroll

**TRANSMITTAL LETTER**

**ANNUAL FINANCIAL STATEMENTS**

Date: 2-4-2025

VIA Email: ereports@la.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 December 31, 2024.  
The statements include all funds under the control of this entity.

Sincerely,

Lisa Cox Reardon

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

Lisa Cox Reardon, Executive Director  
Officer's Name/Title

Street/P.O. Box Address 1627 Skinner Lane

City/Zip Code Oak Grove, La. 71263

Telephone Number 318-376-5509

Email Address CNHCOX@Yahoo.com

Enclosures

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

Form updated May 2023

Executive/Central Committee Name: W.C. Republican Proist Executive CommitteeStatement of Financial Position at 12-31-24 (month, day and year of fiscal year end)**ASSETS** (balances at year-end)

1	Cash and cash equivalents on hand	_____
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>\$ 0.00</u>

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

7	Liabilities (give brief description):	_____
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>\$ 0.00</u>
12	<b>Total Liabilities and Net Assets</b> (add lines 10 and 11)	<u>\$ 0.00</u>

This amount should match Line 6 above.



West Carroll

Executive/Central Committee Name: Republican Executive Committee

### Statement of Cash Receipts and Disbursements

As of and For the Year Ended 12-31-24 (month, day and year of fiscal year end)

#### RECEIPTS:

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

#### DISBURSEMENTS (Provide Brief Description):

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