

Executive/Central Committee Name: MADISON PARISH DEMOCRATIC PARTY EXECUTIVE COMMITTEE

City: TALLULAH Parish: MADISON

TRANSMITTAL LETTER

ANNUAL FINANCIAL STATEMENTS

Date: Sept. 27, 2024

VIA Email: ereports@lla.la.gov

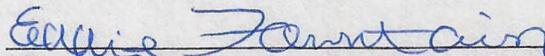
Ms. Gayle Fransen, CPA
Local Government Reporting Manager
Office of the Louisiana Legislative Auditor

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 JUNE 30, 2024.

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)

Eddie Ray Fountain, Secretary/Treasurer
Officer's Name/Title

Street/P.O. Box Address 520 Snyder Street

City/Zip Code Tallulah, LA 71282

Telephone Number 318-574-0620

Email Address N/A

Enclosures

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

Form updated May 2023

Executive/Central Committee Name: MADISON PARISH DEMOCRATIC EXECUTIVE COMMITTEEStatement of Financial Position at June 30, 2024 (month, day and year of fiscal year end)**ASSETS** (balances at year-end)

1	Cash and cash equivalents on hand <u>June 30, 2024</u>	\$1,462.50
2	Investments (fair value) on hand _____	00
3	Office furnishings (cost of desks, etc.) _____	00
4	Equipment (cost of computers, etc.) _____	00
5	Other (brief description) _____	00
6	Total Assets (add lines 1-5)	<u>\$1,462.50</u>

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

7	Liabilities (give brief description): <u>June 30, 2024</u>	00
8	_____	00
9	_____	00
10	Total Liabilities (add lines 7-9)	<u>00</u>
11	Total Net Assets (line 6 minus line 10, which should be the same as amount from Form B, line 16)	<u>\$ 1,462.50</u>
12	Total Liabilities and Net Assets (add lines 10 and 11)	<u>\$ 1,462.50</u>

This amount should match Line 6 above.

Executive/Central Committee Name: MADISON PARISH DEMOCRATIC EXECUTIVE COMMITTEE

Statement of Cash Receipts and Disbursements

As of and For the Year Ended JUNE 30, 2024 (month, day and year of fiscal year end)

RECEIPTS:

1	National/State Party Contributions _____	00
2	Donations _____	00
3	Other (brief description) <u>LOCAL QUALIFYING FEES</u> _____	982.50
4	Other (brief description) _____	00
5	Other (brief description) _____	00
6	Total Receipts (add lines 1-5)	<u>\$ 982.50</u>

DISBURSEMENTS (Provide Brief Description):

7	Bank Charges _____	00
8	Meetings _____	00
9	Outreach (radio, newspaper, mailings) _____	00
10	Utilities _____	00
11	Other (brief description) _____	00
12	Other (brief description) _____	00
13	Total Disbursements (add lines 7-12)	<u>\$ 0.00</u>
14	Change in Net Assets (Line 6 minus line 13)	<u>\$ 982.50</u>
15	Net Assets at Beginning of the Year (taken from previous year's report, Form A, line 11)	<u>480.00</u>
16	Net Assets (deficit) at End of Year (Add lines 14 and 15) - This line should match Form A, line 11.	<u>\$ 1,462.50</u>