

Executive/Central Committee Name: Claiborne Parish Republican Party Executive Committee  
City: Homer Parish: Claiborne

**TRANSMITTAL LETTER**

**ANNUAL FINANCIAL STATEMENTS**

Date: 3/1/2025

VIA Email: [ereports@lla.la.gov](mailto: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 December 31, 2024.  
The statements include all funds under the control of this entity.

Sincerely,

**Kenneth White**

 Digitally signed by Kenneth White  
Date: 2025.03.01 12:37:06 -06'00'

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 Creed Rd

City/Zip Code Haynesville, LA 71037

Telephone Number 318-548-8051

Email Address lakenwhite@ao.com

Enclosures

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

Form updated May 2023

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

**Statement 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	<u>\$ 589.80</u>
2	Investments (fair value) on hand	<u>                    </u>
3	Office furnishings (cost of desks, etc.)	<u>                    </u>
4	Equipment (cost of computers, etc.)	<u>                    </u>
5	Other (brief description)	<u>                    </u>
6	<b>Total Assets</b> (add lines 1-5)	<u>\$ 589.80</u>

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

7	Liabilities (give brief description):	<u>                    </u>
8		<u>                    </u>
9		<u>                    </u>
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>\$ 589.80</u>
12	<b>Total Liabilities and Net Assets</b> (add lines 10 and 11)	<u>\$ 589.80</u>

This amount should match Line 6 above.

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### 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) <u>Qualifying Fee</u>	<u>\$ 20.00</u>
4	Other (brief description)	
5	Other (brief description)	
6	<b>Total Receipts</b> (add lines 1-5)	<u>\$ 20.00</u>

#### DISBURSEMENTS (Provide Brief Description):

7	Bank Charges	<u>\$ 180.00</u>
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>\$ 180.00</u>
14	<b>Change in Net Assets</b> (Line 6 minus line 13)	<u>-\$ 160.00</u>
15	Net Assets at Beginning of the Year (taken from previous year's report, Form A, line 11)	<u>\$ 749.80</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>\$ 589.80</u>