

Executive/Central Committee Name: Caldwell Parish Executive Committee

City: Columbia Parish: Caldwell

**TRANSMITTAL LETTER**

**ANNUAL FINANCIAL STATEMENTS**

Date: January 29, 2024

VIA Email: ereports@lla.la.gov

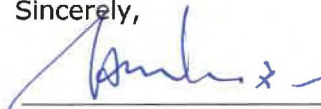
Ms. Gayle Fransen, CPA  
Local Government Reporting Manager  
Office of the Louisiana Legislative Auditor

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 2023.

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)

James E. Mixon, Chairman

Officer's Name/Title

Street/P.O. Box Address P.O. Drawer 1619

City/Zip Code Columbia 71418

Telephone Number 318-649-9284

Email Address jmixon@mixoncarroll.com

Enclosures

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

Form updated May 2023

Executive/Central Committee Name: Caldwell Parish Executive Committee

Statement of Financial Position at 12/31/2023 (month, day and year of fiscal year end)

**ASSETS** (balances at year-end)

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

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**Statement of Cash Receipts and Disbursements**

**As of and For the Year Ended** 2023 (month, day and year of fiscal year end)

**RECEIPTS:**

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

**DISBURSEMENTS (Provide Brief Description):**

7	Bank Charges _____	<u>\$ 0.00</u>
8	Meetings _____	<u>\$ 0.00</u>
9	Outreach (radio, newspaper, mailings) _____	<u>\$ 0.00</u>
10	Utilities _____	<u>\$ 0.00</u>
11	Other (brief description) _____	<u>\$ 0.00</u>
12	Other (brief description) _____	<u>\$ 0.00</u>
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)	<u>\$ 0.00</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>\$ 0.00</u>