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268 Eden Main Street Yazoo City, MS 39194



Telephone: 662-528-2257 E-mail.hoganlekisha@yahoo.com

Village of Eden

Lekisha Hogan Mayor of Eden

April 14,2018

Office of the State Auditor

P.O. Box 956

Jackson, MS 39205

Re: Village of Eden's annual applications for exemption from audit

Accompanying this letter is a copy of the annual applications for exemption from audit of the Village of Eden, Yazoo City, Mississippi, for the fiscal years ending September 2013, 14, 15, and 16. We could not complete fiscal year 2017 due to the retirement of our CPA, Artis Russel. The submission of said applications for audit exemption are in accordance with state directive issued in correspondence dated February 13, 2012 to Village of Eden's former City Clerk, Shirely Vickers, referencing Code Annotated Section 21-35-31.

We are submitting the applications for audit exemption to bring Village of Eden current. We are in the process of securing a new Certified Public Accounting Firm to complete the FY 17 application for audit exemption. The accounting firm of JD CPA, PLLC Firm#7508 have been selected. We will forward FY 17 application for exemption from audit as soon as it is completed.

We are submitting the applications for audit exemption because Eden generate less than \$100.000 in revenue and a single audit would cause the Village of Eden a tremendous hardship. If you should have questions or need additional clarification, please do not hesitate to contact our newly appointed municipal clerk, Walter Jones at 601-201-6843. Thank you for your time and attention to this correspondence and submission of applications for audit exemption.

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APPLICATION FOR EXEMPTION FROM AUDIT - FOR MUNICIPALITIES WITH REVENUES OR EXPENDITURES OF \$100,000 OR LESS

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	OVERNMENT:		RM	_	For the Fisca	
		To LEKESHA H	bGPN, MAYOR	En	ded Septembe	r 30, 201 6 5
ADDRESS:		465 EDEN MAI	N STREE1 39194			
CONTACT P		1920 CITY MY LEKESHA HOGAN				
TELEPHONE		662-746-7965	104012			
E-MAIL:		DBC 110 1100				
FAX:						
		1				
Return to:	State of Mississippi					
	Office of the State Au	ditor		E. C.T.		
	Technical Assistance	Division		A DE	UEIVE	
	P. O. Box 956		A.		0	
	Jackson, MS 39205			AD	R 2 0 2018	
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	Email: tech@osa.ms.	gov				
	Call (800) 321-1275 if	you need help completing	this form.			
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If no, this exemption will be rejected.

PART 2 - REVENUE(Receipts-Cash Basis)

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REVENUE: All revenues for all funds must be reflected in this section including proceeds from the sale of the government's land, building, and equipment and proceeds from debt or lease transactions.

	Description	(Omit cents)
2-1	Taxes:	\$
2-2	Property	\$ -
2-3	Sales	\$ 900 -
2-4	Franchise	\$ -
2-5	Licenses and permits	\$ /10-2 -
2-6	Intergovermental	\$ 1,180 -
2-7	Fines	\$ -
2-8	Investment earnings	\$ -
2-9	Payments in lieu of taxe	\$-
2-10	Drug forfeitures	\$-
2-11	Charges for utility services	\$ 32.742 -
2-12	Debt proceeds	\$ -
2-13	Lease proceeds	\$
2-14	Proceeds from sale of capital assets	\$ -
2-15	Other (specify): BOND REIMBUASE MENS	\$ 50 -
2-16		\$ -
2-17		\$ -
2-18		\$ -
2-19		\$ -
2-20		\$ -
2-21		5 36.422

	PART 3 - EXPENDITURES(Disbursements-Cash Basis)				
	EXPENDITURES: All expenditures for all funds must be reflected in this section including the purchase of fixed and movable as	sets and			
	principal and interest payments on long-term debt.				
	Description	(Omit cents)			
3-1	Administrative	\$ -			
3-2	Salaries	\$ -			
3-3	Payroll taxes	\$ -			
3-4	Contract services	\$ 8,90 -			
3-5	Employee benefits	\$ -			
3-6	Insurance	\$			
3-7	Accounting and legal fees	\$ 300 -			
3-8	Repair and maintenance	\$ 150 -			
3-9	Supplies	\$ 1,20, -			
3-10	Utilities and telephone	\$ 1,006 -			
3-11	Police	\$ -			
3-12	Fire	\$ -			
	Streets and highways	\$ -			
3-14	Public health	\$ -			
3-15	Culture and recreation	\$ -			
	Utility operations	\$ 5000 -			
3-17	Capital outlay	\$ -			
3-18	Debt service principal	\$ -			
3-19	Debt service interest	\$ -			
	Contribution to pension plan	\$ -			
3-21	Other (specify): 1RAVEL	\$ 2,029 -			
3-22		\$ -			
3-23		\$ -			
3-24		\$ -			
	TOTAL EXPENDITURES all categories	: 116			
3-25		24,562			
		/			

PART 4 - DEBT OUTSTANDING, ISSUED AND RETIRED
Please answer the following questions by marking the appropriate box Yes No

4-1	Do you have outstanding debt?						X		
If yes:	s: Is the debt repayment schedule attached?								
ł	Please complete the following debt	Outstandi	ing at start	Total issued during fiscal		Total retired during fiscal		Outstanding at fisca	
· ·	schedule, if applicable:	of fiscal year		year (add)		year (less)		year end	
	General obligation bonds	\$	-	\$	-	\$	-	\$	-
	Revenue bonds	\$	-	\$	-	\$	-	\$	-
	Notes/loans	\$	-	\$	-	\$	-	\$	-
	Leases	\$	-	\$	-	\$	-	\$	-
	Other (specify):	\$	•	\$		\$		\$	-
				1. j. e. e		States States	ne di andre de la		1.1.2 12
	Please answer the following ques	stions by n	narking the	approp	oriate box		Yes	No	
4-2	Does the municipality have any aut	horized, bu	ut unissued	debt?				×	
16.000	If yes, how much? \$			-		· 注意 · 注			
If yes:	If yes, what is the authorization date?						1.4. 15 2.	R SARA	2.001
4-3	1-3 Does the municipality intend to issue debt within the next fiscal year (2017)?								
If yes:	/es: If yes, how much? \$ -						公司 建全国		

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, and	PART 5 - CASH AND INVESTMENTS HELD AT END OF FISCAL YEAR							
	Please provide the entity's cash deposit and investment balances.	Checking Accounts	Savings Accounts	Certificates	of Deposit		Total	
5-1	Cash deposits	\$ 2587 -	\$ -	\$	-	\$	2587	-
5-2	Investments:						$\sim \gamma < f^{-1}$	23 St 21
5-3				¥-		\$		-
5-4		IN STATE				\$		-
5-5			-IVED	C S C		\$		-
5-6						\$		-
5-7	Total Investments		0 0 0019			\$		-
5-8	Total Cash and Investments	APR	2 0 2018			\$	2587	-
		<u>.</u>					/	
	Please answer the following question by m	arking in the approp	iate box		Yes		No	
5-9	Are your deposits in an eligible public depositor (Sec 27-105-5 & 27-105-353)							
	If no please explain:							

7

	PART 6 - CAPITAL ASSETS					
	Please answer the following questions by marking in the approp	Yes	No			
6-1	Do you have land, buildings, and/or equipment?			×		
6-2	Have you prepared an inventory of your land, buildings, and/or equip	oment				
If yes:	lf no, please explain:					
	s	Balance -		1		
	Complete the following table:	Beginning of the			Balance - End of the	
		Year	Additions	Deletions	Year	
	Land	\$ 15000 -	\$-	\$ -	\$ 15000 -	
	Buildings	\$ 110,000 -	\$-	\$ -	\$ 110,000 -	
	Machinery and equipment	\$ 234 000 -	\$-	\$-	\$ 7.3400 -	
	Furniture and fixtures	\$ \$ 100-	\$ -	\$ -	\$ 5000 -	
	Other (explain):	\$ -	\$-	\$-	\$ -	
	PART 7 - BUDGET	INFORMATIO	DN .			
<u></u>	Please answer the following question by marking in the appropr		Yes	No		
7-1						
7-2	If no, please explain: 6					

16	Diagon indicate the amount ann	6 ropriated for each of your funds for fiscal year end 2014.		
If yes:	Fund Name			
	GENERAL-	\$ 34,120.00 5 -		Carlos Contra
	······································	\$	n an	
		PART 8 - GENERAL INFORMATION		
	Please answer the following question	on by marking in the appropriate boxes	Yes	No
	Has the Municipal Compiance Questio part of your minutes? If no please exp	nnaire been completed, adopted by your board and now plain:	×	
8-1				

i .	PART 9 - GOVERNING BODY APPROVAL					
	We, the undersigned, certify that this Application	tion for Exemption fro	m Audit has been:			
	Prepared consistent with regulati	ons by OSA, which sta	tes that an Application with revenues or			
	expenditures of \$100,000 or less	must be prepared by a	a person skilled in governmental accounting;			
	Completed to the best of our kno	-				
	Reviewed and approved by a maj					
			rning body. In addition, original signatures must be			
	F	provided for a maj	ority of those listed.			
	Name (please print or type all current					
	members of the governing body)	Date Term Expires	Signature			
9-1	LAKERAA HOGAN	9/30/17	mallish hoge			
9-2	DoyLE BERRY	9/30/17	Payle Bury			
9-3	JOHNNY STAPLES	913-117				
9-4	DAVID BANK	9/30/17	DAVIDBANKS			
9-5	ERNEITENE BLYL	9/30/17				
9-6	CHRISTENA EASTER LIN	9130117	alla			
9-7						
9-8		· · ·				

