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

NAME OF GOVERNMENT:	Town of Paden	For the Fiscal Year Ended September 30, 2020
ADDRESS:	P.O. Box 208	
	Tishomingo MS 38873	
CONTACT PERSON:	Joni Harper	
TELEPHONE:	662-438-6628	
E-MAIL:	padenclerk@frontier.com	
FAX:		

Return to: State of Mississippi
Office of the State Auditor
Technical Assistance Division
P. O. Box 956
Jackson, MS 39205
FAX: (601) 576-2750
Email: tech@osa.ms.gov
Call (800) 321-1275 if you need help completing this form.

Regulations issued by the Office of the State Auditor explain the requirement to apply for an exemption from audit.

If total revenues or expenditures are \$100,000 or less you may use this form.

Instructions:

In order to ensure that your government's application will be accepted by the Office of the State Auditor, you must do the following:

1. Prepare this form completely and accurately. Please note that there are seven parts to this form and all questions must be answered for the application to be considered complete.
2. File this form with the Office of the State Auditor within 3 months after the end of the fiscal year. For years ended September 30, the form must be in the Office of the State Auditor by December 31.
3. The form must be completed by a person skilled in governmental accounting.
4. The application may be mailed, faxed, or emailed as indicated above. If faxed or emailed, a resolution of the governing board must accompany the application from exemption from audit in a format that includes the signatures of a majority of the governing body (see sample resolution). If mailed, an original plus one copy should be sent.
5. The preparer must sign the application that is submitted in order for it to be accepted.
6. Additional information may be attached to the exemption at the preparer's discretion.

PART 1 - CERTIFICATION OF PREPARER

1-1	Name: Joni Harper	Title: Clerk
1-2	Firm name (if applicable):	
1-3	Address: P.O. Box 208 Tishomingo MS 38873	
1-4	Date prepared: 11/14/2020	Telephone number: 662-438-6628
1-5	Signature: <i>Joni Harper</i>	
	The person that completes this form must be skilled in governmental accounting. (Skilled means possessing sufficient knowledge of governmental accounting to complete the exemption form.)	Check One Yes No
1-6	Are you a person skilled in governmental accounting?	yes
	If no, this exemption will be rejected.	

PART 2 - REVENUE (Receipts-Cash Basis)

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	\$ 2,082.00
2-3	Sales	\$ 3,715.00
2-4	Franchise	\$ -
2-5	Licenses and permits	\$ -
2-6	Intergovernmental (municipal aid)	\$ 21,475.00
2-7	Fines	\$ -
2-8	Investment earnings	\$ -
2-9	Payments in lieu of tax	\$ 647.00
2-10	Drug forfeitures	\$ -
2-11	Charges for utility services	\$ 4,378.00
2-12	Debt proceeds	\$ -
2-13	Lease proceeds	\$ -
2-14	Proceeds from sale of capital assets	\$ -
2-15	Other (specify):	\$ -
2-16		\$ -
2-17		\$ -
2-18		\$ -
2-19		\$ -
2-20		\$ -
2-21	TOTAL REVENUE all sources	\$ 32,297.00

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 assets and principal and interest payments on long-term debt.	
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Description		(Omit cents)
3-1	Administrative	\$ -
3-2	Salaries	\$ 8,034.00
3-3	Payroll taxes	\$ 1,398.00
3-4	Contract services	\$ -
3-5	Employee benefits	\$ -
3-6	Insurance	\$ 1,670.00
3-7	Accounting and legal fees	\$ -
3-8	Repair and maintenance	\$ 1,300.00
3-9	Supplies	\$ 14,160.00
3-10	Utilities and telephone	\$ 5,714.00
3-11	Police	\$ -
3-12	Fire	\$ 699.00
3-13	Streets and highways	\$ 1,300.00
3-14	Public health	\$ -
3-15	Culture and recreation	\$ -
3-16	Utility operations	\$ 982.00
3-17	Capital outlay	\$ -
3-18	Debt service principal	\$ -
3-19	Debt service interest	\$ -
3-20	Contribution to pension plan	\$ -
3-21	Other (specify):	\$ -
3-22		\$ -
3-23		\$ -
3-24		\$ -
3-25	TOTAL EXPENDITURES all categories	\$ 35,257.00

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?			no												
If yes:	Is the debt repayment schedule attached?															
	Please complete the following debt schedule, if applicable:	Outstanding at start of fiscal year	Total issued during fiscal year (add)	Total retired during fiscal year (less)												
	General obligation bonds	\$ -	\$ -	\$ -												
	Revenue bonds	\$ -	\$ -	\$ -												
	Notes/loans	\$ -	\$ -	\$ -												
	Leases	\$ -	\$ -	\$ -												
	Other (specify):	\$ -	\$ -	\$ -												
<table border="1"> <thead> <tr> <th colspan="2">Please answer the following questions by marking the appropriate box</th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>4-2</td> <td>Does the municipality have any authorized, but unissued debt?</td> <td></td> <td>no</td> </tr> <tr> <td>If yes:</td> <td>If yes, how much?</td> <td>\$ -</td> <td></td> </tr> </tbody> </table>					Please answer the following questions by marking the appropriate box		Yes	No	4-2	Does the municipality have any authorized, but unissued debt?		no	If yes:	If yes, how much?	\$ -	
Please answer the following questions by marking the appropriate box		Yes	No													
4-2	Does the municipality have any authorized, but unissued debt?		no													
If yes:	If yes, how much?	\$ -														

	If yes, what is the authorization date?		
4-3	Does the municipality intend to issue debt within the next fiscal year (2018)?		
If yes:	If yes, how much?	\$	-

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	\$ 36,433.00	\$ 0 -	\$ 0 -	\$ 36,433.00
5-2	Investments:				0
5-3					\$ -
5-4					\$ -
5-5					\$ -
5-6					\$ -
5-7	Total Investments				\$ -
5-8	Total Cash and Investments				\$ 36,433.00

	Please answer the following question by marking in the appropriate box	Yes	No
5-9	Are your deposits in an eligible public depository (Sec 27-105-5 & 27-105-353)	yes	
5-10	If no, please explain:		

PART 6 - CAPITAL ASSETS

	Please answer the following questions by marking in the appropriate boxes		Yes	No	
6-1	Do you have land, buildings, and/or equipment?		yes		
6-2	Have you prepared an inventory of your land, buildings, and/or equipment		yes		
If yes:	If no, please explain:				
	Complete the following table:	Balance - Beginning of the Year	Additions	Deletions	Balance - End of the Year
	Land	\$ -	\$ -	\$ -	\$ -
	Buildings	\$ -	\$ -	\$ -	\$ -
	Machinery and equipment	\$ -	\$ -	\$ -	\$ -
	Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
	Other (explain):	\$ -	\$ -	\$ -	\$ -

PART 7 - BUDGET INFORMATION

	Please answer the following question by marking in the appropriate boxes	Yes	No
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7-1	Did the municipality approve a budget for fiscal year end 2020?	yes	
7-2	If no, please explain:		

If yes:	Please indicate the amount appropriated for each of your funds for fiscal year end 2018		
	Fund Name	Budgeted fiscal year end 2018 Expenditures	
		\$	-
		\$	-

PART 8 - GENERAL INFORMATION

Please answer the following question by marking in the appropriate boxes		Yes	No
8-1	Has the Municipal Compliance Questionnaire been completed, adopted by your board and now part of your minutes? If no please explain:		

PART 9 - GOVERNING BODY APPROVAL

We, the undersigned, certify that this Application for Exemption from Audit has been:

Prepared consistent with regulations by OSA, which states that an Application with revenues or expenditures of \$100,000 or less must be prepared by a person skilled in governmental accounting;
Completed to the best of our knowledge and is accurate and true; Reviewed and approved by a majority of the governing body.

Note: Please list all current members of the governing body. In addition, original signatures must be provided for a majority of those listed.

	Name (please print or type all current members of the governing body)	Date Term Expires	Signature
9-1	Carl Whitehead	2021	<i>Carl Whitehead</i>
9-2	Tony Falkner	2021	<i>Tony Falkner</i>
9-3	JAMES E. MURPHY	2021	<i>James E. Murphy</i>
9-4	Kristy D. Denton	2021	<i>Kristy D. Denton</i>
9-5	Jean Luttrell	2021	<i>Jean Luttrell</i>
9-6	Pam Oswalt	2021	<i>Pam Oswalt</i>
9-7			
9-8			