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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 THAXTON	For the Fiscal Year
ADDRESS:	P O BOX 56	Ended September 30, 2020
	THAXTON, MS 38871	
CONTACT PERSON:	SAMMIE JAGGERS	
TELEPHONE:	(662) 489-4888	
E-MAIL:	OKEEMCDONALD@YAHOO.COM	
FAX:	(662) 489-0098	

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	ON OF PREPARER		
1-1	Name: OKEE MCDONALD	Fitle: ACCOUNTANT		
1-2	Firm name (if applicable): M M WINKLER & ASSOCIATES			
1-3	Address: P O BOX 562, PONTOTOC, MS 38863-0562			
1-4		Telephone number: (662) 489-0097		
1-5	Signature: Oke & Donals The person that completes this form must be skilled in governmental a			
	possessing sufficient knowledge of governmental accounting to co	accounting. (Skilled means	Ch	ieck One
		omplete the exemption form,	Yes	No
1-6	Are you a person skilled in governmental accounting?		Х	
	If no, this exemption will be rejected.			

	Description	(Omit cents)					
2-1	Taxes:	\$					
2-2	Property	\$					
2-3	Sales	\$					
2-4	Franchise	\$	11,337				
2-5	Licenses and permits	\$	205				
2-6	Intergovermental	\$	52,715				
2-7	Fines	\$					
2-8	Investment earnings	\$	20				
	Payments in lieu of taxe	\$					
	Drug forfeitures	\$					
	Charges for utility services	\$					
-12	Debt proceeds	\$					
-13	Lease proceeds	\$					
	Proceeds from sale of capital assets	\$					
-15	Other (specify):	\$					
2-16	FACILITIES USE	\$	3,703				
-17	DONATIONS AND FUNDRAISERS	\$	2,000				
-18		\$	2,004				
~19		\$					
2-20		\$					

TOTAL REVENUE all sources \$

69,980

	PART 3 - EXPENDITURES (Disbursements-Cash Basis EXPENDITURES: All expanditures for all funds must be reflected in this section including the purchase of fixed and movable as		- www.	-
	principal and interest payments on long-term debt.	asets stift		
	V			
	Description	(0	mit cents)	_
3-1	Administrative	\$		-
3-2	Salaries	\$	11,100	-
3-3	Payroll taxes	\$	2,077	-
3-4	Contract services	\$		-
3-5	Employee benefits	\$		-
3-6	Insurance	\$	5,314	
3-7	Accounting and legal fees	\$	750	-
3-8	Repair and maintenance	\$	730	
	Supplies	\$	3,104	
-10	Utilities and telephone	\$	2,291	_
3-11	Police	\$	2,753	
	Fire	\$	2,128	
-13	Streets and highways	\$	7,368	-
-14	Public health	\$		-
-15	Culture and recreation	\$	24,268	Te.
-16	Utility operations	\$		-
-17	Capital outlay	\$	2,100	-
-18	Debt service principal	\$	7,756	
-19	Debt service interest	\$	622	
-20	Contribution to pension plan	\$	V And fan	-
	Other (specify):	\$		-
-22		\$		i k
-23		\$		12
-24		\$		v
				-
-25	TOTAL EXPENDITURES all categories	\$	71,631	44

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		
ir yes:	Is the debt repayment schedule attached?									X
	Please complete the following debt schedule, if applicable:		ling at start cal year		sued during f year (add)	fiscal		ired during fiscal rear (less)	1	anding at fiscal
	General obligation bonds	\$		\$			S	10000111111111111111111111111111111111	\$	-
	Revenue bonds	\$	•	\$		-	\$		Š	
	Notes/loans	\$ 20	,226 -	\$	-0-	P.	\$	7,756 -	S	12,470
	Leases	\$	-	\$		-	Ŝ		Ś	,,,,,
	Other (specify):	\$	15	\$		(6)	\$		Ś	
		REPORT OF		CO BLO	2 7 S TO 100	1000	- A			William Charles
	Please answer the following ques	tions by	marking the	appropr	iate box			Yes		No
	Does the municipality have any aut									X
yes:	If yes, how much?		\$	- 2			1777		P T TY	5 W
yes.	If yes, what is the authorization date	?				L1000	Sales States			
			1		Annual Control of the		A CONTRACTOR OF THE PARTY OF TH			

4-3 Does the municipality intend to issue debt within the next fiscal year?

\$

If yes: If yes, how much?

	Please provide the entity's cash deposit and investment balances.	Checking Accounts	Savings Accounts	Certificates of Deposit		Total
5-1	Cash deposits	\$ 12,211	\$ 3,638 -	\$ -	\$	15,849
5-2	Investments:				Section 1	
5-3					Ś	
5-4					5	
5-5					4	
5-6					14	
5-7	Total Investments				15	
5-8	Total Cash and Investments				15	15,849
					<u> </u>	
	Please answer the following question by marking in the appropriate box Yes					
5-9	Are your deposits in an eligible public depository (Sec 27-105-5 & 27-105-353)					No

	Please answer the following questions by mar		Yes	T	No	
i-1	Do you have land, buildings, and/or equipment?	X	1	130		
-2	Have you prepared an inventory of your land, buil		X			
/es:	If no, please explain:					
		Balance -				
	Complete the following table:	Beginning of the			Bala	nce - End of th
			Additions	Deletions	Bala	nce - End of th Year
	Land	Beginning of the	Additions	Deletions	Bala	
		Beginning of the Year	Additions \$ -	100		Year
	Land	Beginning of the Year \$ 7,500 -	Additions \$ - \$ - \$ 2,100 -	\$ -		Year 7,500 -
	Land Buildings	Beginning of the Year \$ 7,500 - \$ 70,433 -	\$ -	\$ -		Year 7,500 - 70,433

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

		I fiscal year end Expenditures	Fund Name
		82,529 -	GENERAL FUND
		- 1	
		RAL INFORMATION	
No	Yes	ropriate boxes	Please answer the following question
	X	dopted by your board and now	Has the Municipal Complance Question
	^		part of your minutes? If no please expl
	1	N.	

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.

Mote: Please list all current members of the governing body. In addition, original signatures <u>must</u> 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	Johnny Coleman, Mayor	06/30/2021	Johnny Colenan .
9-2	Bryson Dillard, Alderman	06/30/2021	Brown Relland
9-3	James N Ford, Alderman	06/30/2021	hand 12t
9-4	Grant Gooch, Alderman	06/30/2021	Grant Grooch
9-5	Kim Gilliam, Alderman	06/30/2021	Kin Allian
9-6	Steve Moss, Alderman	06/30/2021	Steve Mass
9-7	Sammie Jaggers, Clerk	0.0	Sammie Jaggers
9-8		×	