OFFICE OF THE STATE AUDITOR REPORT NOTE:

Section 7-7-211, Mississippi Code Annotated (1972) gives the Office of the State Auditor the authority to audit, with the exception of municipalities, any governmental entity in the state. In the case of municipalities, Section 21-35-31, Mississippi Code Annotated (1972) requires municipalities to obtain an annual audit performed by a private CPA firm and submit that audit report to the Office of the State Auditor. The Office of the State Auditor files these audit reports for review in case questions arise related to the municipality.

As a result, the following document was not prepared by the Office of the State Auditor. Instead, it was prepared by a private CPA firm and submitted to the Office of the State Auditor. The document was placed on this web page as it was submitted and no review of the report was performed by the Office of the State Auditor prior to finalization of the report. The Office of the State Auditor assumes no responsibility for its content or for any errors located in the document. Any questions of accuracy or authenticity concerning this document should be submitted to the CPA firm that prepared the document. The name and address of the CPA firm appears in the document.

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

NAME OF GOVERNMENT:	Town of BioCreek	For the Fiscal Year
	P.O.BOX 2098	Ended September 30, <u>2007</u>
ADDRESS:	Big Creek, MS 38914	
CONTACT PERSON:	Emily Eubanks Town Clerk	
TELEPHONE:	W62-414-9390	
E-MAIL:	cityclerkbc@amail.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:

- 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.
- 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.
- 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.
- The <u>preparer must sign</u> 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 O	F PREPARER			
1-1	Name: Emily Eubanks Title:	Town Clerk			
	Firm name (if applicable):				
1-3	Address: D.O.Box 2098 Bia Creek, MS 38914				
1-4	Date prepared: Telepho	one number: 1002-414-	9390		
1-5	Signature: Phi O Eu QQ				
	The person that completes this form must be skilled in governmental accounting. (Skilled means Check One				
	possessing suffient knowledge of governmental accounting to complet	te the exemption form.)	Yes	No	
1-6	Are you a person skilled in governmental accounting?		V		
	If no, this exemption will be rejected.		MADER		

10	Do you have outstanding debt?									
If yes:	Is the debt repayment schedule attached?									
	Please complete the following debt Outstand		ding at start	Total issued d	uring fiscal	Total retire	ed during fiscal	Outstand	ing at fiscal	
	schedule, if applicable:	of fi	scal year	year (add)		yea	ar (less)	year end		
	General obligation bonds	\$		\$:=:	\$:#:	\$	7,6	
	Revenue bonds	\$		\$		\$	392	\$	19	
	Notes/loans	\$		\$: : ::::::::::::::::::::::::::::::::::	\$	171	\$	(E	
		1 4		\$		\$:=1	S	144	
	Leases	\$		y.	570	1 7				
	Other (specify):	\$.5. .5/	\$		\$		\$	The state of the s	
				-		\$		\$		
		\$		\$		\$		\$	No	
4-2	Other (specify):	\$ juestions by	marking the	\$ appropriate bo		\$		\$	No.	
	Other (specify): Please answer the following of	\$ juestions by	marking the	\$ appropriate bo		\$		\$	No C	
	Other (specify): Please answer the following of Does the municipality have any	uestions by	marking the	\$ appropriate bo		\$		\$	No c	
If yes:	Other (specify): Please answer the following of Does the municipality have any If yes, how much?	suestions by authorized, I	marking the	appropriate bo		\$		\$	No C	

	Please provide the entity's cash deposit and investment balances.	Checking Accounts	Savings Accounts	Certificates of Deposit		Total
5-1	Cash deposits	\$ 32824 -	\$ -	\$ -	\$	32824 -
5-2	Investments:		·		100	20100
5-3					\$	-
5-4					\$	
5-5					\$	
5-6					Ś	:-
5-7	Total investments				15	
5-8	Total Cash and Investments				\$	
	Please answer the following question by n	narking in the approp	riate box	Yes	Т	No
5-9						

	Please answer the following questions by marking in the appropriate boxes							No	No
6-1							Yes		
6-2	Have you prepared an inventory of your land, buil	dings, and/or equipment						-	
If yes: If no, please explain:									
	Complete the following table:	Beginni	nce - ng of the	Add	itions	Del	etions	1	- End of the
	Land	\$	-	\$	7	\$:. :	\$	-
	Buildings	\$	-	\$	1=1	\$		\$	_
	Machinery and equipment	\$		\$	72	\$		\$	-
	Furniture and fixtures	Ś		\$	D.e.:	\$	12	\$	
	Other (explain):	\$	-	\$		\$	3=	\$	
	PAR	T 7 - BUDGET INFO	RMATIC	N					
	Please answer the following question by marking in the appropriate boxes					1	/es		No
7-1	Did the municipality approve a budget for the next						V		

	REVENUE: All revenues for all funds must be reflected in this section including proceeds from the sale of the government's land	d, building, and	
	equipment and proceeds from debt or lease transactions.		
	Description	(Omit ce	nts)
2-1	Taxes: MV 4921.66 M. Homes 34.12	\$ 4955	-
2-2	Property 7851,94	\$ 7851	-
2-3	Sales	\$	7
2-4	Franchise 2575.96	\$ 2575.	7:
2-5	Licenses and permits	\$	#.
2-6	Intergovermental	\$	₩.
2-7	Fines	\$	-
2-8	Investment earnings	\$	*
2-9	Payments in lieu of taxe	\$	
2-10	Drug forfeitures	\$	#:
2-11	Charges for utility services	\$	-
2-12	Debt proceeds	\$	<u>u</u>
	Lease proceeds	\$	Th.
2-14	Proceeds from sale of capital assets	\$	<u> </u>
2-15	Other (specify): Building Rental 1375	\$ 1375	2:
2-16	State of MS 6257	\$ 6257	141
2-17		\$	-
2-18		\$	
2-19		\$	
2-20		\$. .
2-21	TOTAL REVENUE all sources	\$ 23,013	*

	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	\$	H
3-2	Salaries Police Officer 4322 Clerk 2493	\$ 6815	-
3-3	Payroll taxes	\$ 1129	4
3-4	Contract services	\$	E E
3-5	Employee benefits Bonds, memberships, Surety + tax services	\$ 1895	ů.
3-6	Insurance	\$	ě
3-7	Accounting and legal fees Bank Charges	\$ 626	3
3-8	Repair and maintenance	\$ 3889	9
	Supplies	\$	Ē
3-10	Utilities and telephone	\$ 9678	
3-11	Police	\$ 855	5
3-12	Fire	\$. =
3-13	Streets and highways	\$	-
3-14	Public health	\$	
3-15	Culture and recreation	\$	
3-16	Utility operations	\$	*
3-17	Capital outlay	\$	-
3-18	Debt service principal	\$	-
3-19	Debt service interest	\$	-
3-20	Contribution to pension plan	\$	
3-21	Other (specify):	\$	2
3-22		\$	Ě
3-23		\$	2
3-24		\$	Ħ
3-25	TOTAL EXPENDITURES all categories	\$ 24,887	¥

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

f yes: P	lease indicate the amount appro	priated for each of your funds for the next fis	scal year end?		
	Fund Name	Budgeted fiscal year end Expe	enditures	H	
		\$	4	Annie A e	
		\$	-		\$ 160 L
		\$		LIGHT STATE	Jack on the
		PART 8 - GENERAL INFORMAT	ION		
Ple	ase answer the following question	n by marking in the appropriate boxes		Yes	No
Has	the Municipal Compiance Question	nnaire been completed, adopted by your board	and now		
	of your minutes? If no please exp				
8-1				l.	

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 <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	Divight Devall (Mayor)	2025	Out Voll
9-2	Manda Harrison (Alderman)	2025	Wands Namon
9-3	Larry Balar Jr. (Aiderman)	2025	Sur Balter A.
9-4	Herman KCkinton (Alderman)	2025	Herman & Clauten
9-5	TJ (lanton (Alderman)	2025	Tron Good (Alet)
9-6	Donna Wall (Alderman)	2025	Donna Wall
9-7			M.
9-8			