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 Paden	For the Fiscal Year
	P.O. Box 208	Ended September 30, 2022
ADDRESS:	Tishomingo MS 38873	
CONTACT PERSON:	Joni Harper	
TELEPHONE:	662-438-6628	
E-MAIL:	padenclerk@frontier.com	
FAX:	662-438-6628	

Return to: State of Mississippi

Office of the State Auditor

Quality Assurance - Municipal Audits

P. O. Box 956 Jackson, MS 39205

Email: municipal.reports@osa.ms.gov

Call (800) 321-1275 or (601) 576-2657 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.
- 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 <u>must</u> 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 - CERTIFICAT	ION OF PREPARER		
1-1	Name: Joni Harper	Title: Clerk		
1-2	Firm name (if applicable):			
	Address: P.O. Box 208 Tishomingo MS 38873			
1-4	Date prepared: 11/14/2023	Telephone number: 662-660	-9073	
1-5	Signature Corn Hanpy		8	
	The person that completes this form must be skilled in governmental		Ch	eck One
	possessing suffient knowledge of governmental accounting to o	complete the exemption form.)	Yes	No
1-6	Are you a person skilled in governmental accounting?		х	
	If no, this exemption will be rejected.			

	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	
00	equipment and proceeds from debt or lease transactions.		
	Description	(Omit cents)	
2-1	Taxes:	\$	-
2-2	Property	\$ 4,630.00	-
2-3	Sales	\$ 710.00	-
2-4	Franchise	\$	-
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 Garbage bills	\$ 4,945.00	
2-12	Debt proceeds	\$	_
2-13	Lease proceeds Factory rent	\$ 4,500.00	-
2-14	Proceeds from sale of capital assets	\$	-
2-15	Other (specify):	\$	-
2-16	Municipal aid ARPA	\$ 11,445.00	
2-17	Modernization	\$ 26,468.00	-
2-18	TCEPA Quarterly	\$ 1,757.00	-
2-19	Bond refund	\$ 500.00	-
2-20	Fire code	\$ 1,313.00	_
2-21	TOTAL REVENUE all sources	\$ 56,268	_

	r					sbursements-			
		EXPENDITURES: All expenditures for all funds must be reflected in this section including the purchase of fixed and movable						sets and	
	principal and interest payments on long-term debt.								
		Description					(Omit cents)		
3-1	Administrative							\$	-
3-2	Salaries	Salaries					\$ 8,172.00	-	
3-3	Payroll taxes						\$ 664.00	-	
3-4	Contract services							\$	-
3-5	Employee benefits							\$	-
3-6	Insurance MML ar	nd state au	to building	ins				\$ 2,477.00	-
3-7	Accounting and legal							\$ 405.00	_
3-8	Repair and maintena	nce	**************************************					\$ 2,606.00	_
3-9	Supplies							\$ 2,834.00	-
3-10	Utilities and telephone					\$ 6,917.00	-		
3-11					\$	-			
3-12	Fire	Fire				\$ 2,014.00	-		
3-13	Streets and highways	S ₂						\$ 1,557.00	-
3-14	Public health							\$	
3-15	Culture and recreation	on						\$	-
3-16	Utility operations							\$	-
3-17	Capital outlay							\$	-
3-18	Debt service principa	ıl						\$	-
3-19	Debt service interest			F				\$	
3-20	Contribution to pens	ion plan				2		\$	-
3-21	Other (specify):	IRS and	MDES					\$ 1.699.00	_
3-22								\$	-
3-23			2 0					\$	-
3-24								\$	-
3-25				TOT	AL EXP	ENDITURES	all categories	\$ 27,646.00	-

	Please answer the following ques	tions by marking t	he appropriate box		Yes	No
4-1	Do you have outstanding debt?					х
If yes:	Is the debt repayment schedule attached?					
	Please complete the following debt schedule, if applicable:	Outstanding at star of fiscal year			d during fiscal (less)	Outstanding at fisca year end
	General obligation bonds	\$ -	\$	- \$	-	\$ -
	Revenue bonds	\$ -	\$	- \$	-	\$ -
	Notes/loans	\$ -	\$	- \$	-	\$ -
	Leases	\$ -	\$	- \$	-	\$ -
	Other (specify):	\$ -	\$	- \$	=	\$ -
	Please answer the following que				Yes	No
4-2	Does the municipality have any aut				Yes	No X
	Does the municipality have any aut If yes, how much?	horized, but unissue \$			Yes	
	Does the municipality have any aut If yes, how much? If yes, what is the authorization date	horized, but unissue \$ e?	d debt?	17.	Yes	
4-2 f yes: 4-3	Does the municipality have any aut If yes, how much?	horized, but unissue \$ e?	d debt?		Yes	

	and investment balances.	Checking Accounts	Savings Accounts	Certificates of Deposit	Total
5-1	Cash deposits General	\$ 48,491,64-	\$ -	\$ -	\$ 88.143.07
5-2	Investments: Fire	5 034 81			
5-3	maint,	34,616.62			\$ -
5-4					\$ -
5-5		A. D.			\$ -
5-6					\$ -
5-7	Total Investments				\$ -
5-8	Total Cash and Investments				\$ 1 -
	Please answer the following question	by marking in the approp	riate box	Yes	 No
5-9	Are your deposits in an eligible public de				
5-10	If no, please explain:				

		· · · · · · · · · · · · · · · · · · ·			_	1 		7	<u> </u>
	Please answer the following questions by marking in the appropriate boxes						/es		No
6-1 D	6-1 Do you have land, buildings, and/or equipment?								
6-2 H	-2 Have you prepared an inventory of your land, buildings, and/or equipment					X			
If yes: If	f no, please explain:								
С	Complete the following table:		Balance - Beginning of the					Balance - End of the	
1		340	Year		Additions		etions	Year	
Li	and	\$	-	\$	-	\$	-	\$	-
В	Buildings	\$	-	\$	-	\$	-	\$	-
M	Machinery and equipment	\$	-	\$	-	\$		\$	-
F	Furniture and fixtures	\$	-	\$	-	\$	-	\$	-
	Other (explain):	\$		\$	-	\$	-	\$	

	Please answer the following question	Yes	No	
7-1	Did the municipality approve a budget for	X		
7-2	If no, please explain:			
If yes:	Please indicate the amount approp	riated for each of your funds for the next fiscal year end?		
	Fund Name	Budgeted fiscal year end Expenditures	escription of the	
		-		end of the second
		\$ -		
		\$ -		
		PART 8 - GENERAL INFORMATION		
	Please answer the following question	by marking in the appropriate boxes	Yes	No
	Has the Municipal Compiance Question	naire been completed, adopted by your board and now		·
	part of your minutes? If no please expl	ain:		
8-1			\	
	I			

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

		-	ority of those listed.
	Name (please print or type all current members of the governing body)	Date Term Expires	Λ Signature
9-1	Pamela Oswalt	2024	Tamela Oswalt
9-2	James Murphy	2024	LELM
9-3	Kristy Deaton	2024	Kurad Dura
9-4	Tony Faulkner	2024	la falu
9-5	Carl Whitehead	2024	out of Town
9-6	Jean Luttrell	2024	Jean Luttrell
9-7			8
9-8		5	