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.

DEC O 4 2023

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

NAME OF GOVERNMENT:	Town of Big Credk	For the Fiscal Year
ADDRESS:	P.O. Box 2098 Big Creek, MS 38914	Ended September 30, <u>2023</u>
CONTACT PERSON:	Emily Fubanks Townclerk	
TELEPHONE:	(062-414-939D	
E-MAIL:	cituclerk bc@amail.com	
FAX:	ongree Post of the State of the	

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:

- 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.
- 5. The preparer must sign the application that is submitted in order for it to be accepted.
- Additional information may be attached to the exemption at the preparer's discretion.

	PART 1 - CERTIFICATIO	N OF PREPARER		
1-1	Name: Emulu Eubanks Tit	e: TownClerk		
1-2	Firm name (if applicable):	100011010110		
1-3	Address: P.O.Box 2098 Big Creek MS 38914			
1-4	Date prepared: Te	ephone number: 442-414	1-9390	
1-5	Signature: Smile & O.O.			
	The person that completes this form must be skilled in governmental accounting to compossessing sufficient knowledge of governmental accounting to compossessing sufficient knowledge of governmental accounting to compositions.	ounting. (Skilled means	C	heck One
1		piece tile exemption form.)	Yes	No
	Are you a person skilled in governmental accounting?		✓	
	If no, this exemption will be rejected.		//	ME SY 6 W. L 34-

	PAR	T4-DEBT OUT	STANDING, I	SSUED A	ND RETIRE	D		
	Please answer the following ques	stions by marking th	e appropriate bo	K		Yes		No
4-1	Do you have outstanding debt?							
If yes:	Is the debt repayment schedule att	ached?						
	Please complete the following debt schedule, if applicable:	Outstanding at start of fiscal year	Total issued du year (a		Total retired year	-		ing at fiscal r end
	General obligation bonds	\$	\$	16	\$		\$	*
	Revenue bonds	\$ -	\$	- YE	\$		\$	(2)
	Notes/loans	\$ -	\$		\$	9	\$	-
	Leases	\$ -	\$	r#	\$	2	\$	
	Other Januaris A							
	Other (specify):	\$	\$	041	\$	2	\$	
	Other (spectry):	\$	\$		\$	RESERVE	\$ NG GAIE	
		stions by marking th		n <u>=</u> : 1	\$		Medials.	
4-2	Please answer the following ques		e appropriate box		\$	Yes	Medials.	No
	Please answer the following ques		e appropriate box		\$		Medials.	
If ves:	Please answer the following ques	horized, but unissued \$	e appropriate box		\$		Medials.	
If yes:	Please answer the following questo Does the municipality have any autous lf yes, how much?	horized, but unissued \$:?	e appropriate box debt?				Medials.	

and investment balances.	Checking A	Accounts	Savings Accounts	Certificates	of Deposit	Total	
Cash deposits	\$		\$ -	\$	E:	\$ 56128	- 5
Investments:						U 54 28 128	
						\$	
						\$	7.
						\$	7,0
						Ś	-
Total Investments						\$	-
Total Cash and Investments						\$	13
Please answer the following question by marking in the appropriate box Yes						No	
Are your deposits in an eligible public depository (Sec 27-105-5 & 27-105-353)							
T	otal Investments otal Cash and Investments	otal Investments Total Cash and Investments Telease answer the following question by marking in the	otal Investments Total Cash and Investments Telease answer the following question by marking in the appropri	Total Investments Total Cash and Investments Telease answer the following question by marking in the appropriate box	Total Investments Total Cash and Investments Total Cash and Investments Telease answer the following question by marking in the appropriate box	Total Investments Total Cash and Investments Total Cash and Investments Telease answer the following question by marking in the appropriate box Yes	investments: \$ \$ \$ \$ \$ fotal Investments Total Cash and Investments \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

	Please answer the following questions by marking in the appropriate boxes								No
6-1									
6-2									
If yes:	If no, please explain:								
	Complete the following table:	Balance - Beginning of Year		Addi	tions	Del	letions		- End of the
	i .		72.0	Ś	- 6	\$	-	\$	-
	Land	\$							
	Land Buildings	\$		\$	- 1	\$	161	\$	4
		\$	-	\$		\$	•	\$	= =
	Buildings	\$ \$ \$:=: :=:	\$ \$ \$		\$ \$		<u> </u>	-

AE

14	REVENUE: All revenues for all funds must be reflected in this section including proceeds from the sale of the government's lan- equipment and proceeds from debt or lease transactions.	d, building, and	
	Description	(Omit cents)	
2-1	Taxes:MV 2184 M.Homes 31	\$ 2215	<u> </u>
2-2	Property 0140	\$ 9140	===
2-3	Sales	\$	-
2-4	Franchise 2814	\$ 2814	:=0
2-5	Licenses and permits	\$	150
2-6	Intergovermental	\$	-
2-7	Fines	\$	
2-8	Investment earnings	\$:58
2-9	Payments in lieu of taxe	\$:=8
2-10	Drug forfeitures	\$	28
2-11	Charges for utility services	\$:=7
2-12	Debt proceeds	\$	-0
	Lease proceeds	\$:•)
	Proceeds from sale of capital assets	\$	
2-15	Other (specify): Building Rental 2250	\$ 2250	390
2-16	State of Mrs 11,274	\$ 11.274	:40
2-17	And the state of t	\$	300
2-18		\$	387
2-19		\$	93
2-20		\$	20
2-21	TOTAL REVENUE all sources	\$ 27,693	5.

		P/	ART 3 - EX	PENDITU	JRES(Di	sbursements-	Cash Basis	5)		
	EXPENDITURES: All					uding the purchase of fix			d	
	principa	and interest pa	ayments on long-te	erm debt.						
	Description						(Omit cents)			
3-1	Administrative							\$		=
3-2	Salaries						\$	6310		
3-3	Payroll taxes	Payroll taxes						\$		7
3-4	Contract services						\$			
3-5	Employee benefits						\$	1129	-	
3-6	Insurance					\$		=_		
3-7	Accounting and le	gal fees						\$	1895	iπ
3-8	Repair and maintenance				\$	1123				
3-9	Supplies	Supplies					\$		=	
3-10	Utilities and telephone				\$	17.58				
3-11	Police				\$	855				
3-12	Fire							\$		*
3-13	Streets and highwa	ays						\$		-
3-14	Public health							\$		4
3-15	Culture and recrea	tion						\$		ū.
3-16	Utility operations							\$		4
3-17	Capital outlay							\$		<u> </u>
3-18	Debt service princi	pal						\$		9
3-19	Debt service intere	st						\$		-
3-20	Contribution to pe							\$		-
3-21	Other (specify):	Ano	lysisBank	canarae.	ני			\$	895	
3-22				0				\$		_
3-23								\$		8
3-24								\$		2
3-25				TOT	AL EXP	ENDITURES	all categories	\$	20,00x	÷

	Please answer the following question by r	ease answer the following question by marking in the appropriate boxes					
7-1	Did the municipality approve a budget for the						
7-2	If no, please explain:						
If yes:	Please indicate the amount appropriated	for each of your funds for the ne	xt fiscal year end?				
	Fund Name	Budgeted fiscal year end	Expenditures				
		\$	*		V V T T V MAR		
		\$	v				
	*	\$		T. YUNG BU			
	PA	ART 8 - GENERAL INFOR	MATION				
	Please answer the following question by n	narking in the appropriate boxes		Yes	No		
	Has the Municipal Compiance Questionnaire	been completed, adopted by your bo	oard and now				
	part of your minutes? If no please explain:			1			
8-1				1			
				1	.71		

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	Dwist DEVall	2025	Duft Doll
9-2	Wanda Harrison	2025	Wanda Harrison
9-3	KENNY CLANTON	2025	Kenny Clanton
9-4	Tray Jordan C/ag.	2025	In and Coto
9-5	Donna Wall	2025	Donne Wall
9-6	Lary Baker Jr	2025	Ly Bakon L
9-7			
9-8			