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 Lena	For the Fiscal Year
	PO Box 108	Ended September 30, 2023
ADDRESS:		
	Lena, MS 39094	
CONTACT PERSON:	Mayor, Randy Jones	
TELEPHONE:	601-622-3809	
E-MAIL:	townoflena@att.net	
FAX:		┥

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.
- 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 <u>preparer must sign</u> 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 - CERTIFICATION OF PREPAR	ER		
$\overline{}$	Name: William S. Ellzey Title: princip	al		
1-2				
1-3	Address: Post Office Box 629, Canton, MS 39046 Date prepared: 11/20/2023 Telephone number:			
1-4	Date prepared: 11/20/2023 Telephone number:	601-85	9-3275	
1-5	Signature: Allen 5 Ellace Cet			
	The person that completes this form must be skilled in governmental accounting. (Skilled in	neans	C	heck One
	possessing suffient knowledge of governmental accounting to complete the exemption	on form.)		
1.0	Are you a parson chilled in account of the second of the s		Yes	No
$\overline{}$	Are you a person skilled in governmental accounting?		x	
	If no, this exemption will be rejected.			Commence Harry

	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.	,				
	Description	(Omit cents)				
2-1	Taxes:	\$				
2-2	Property	\$	17,201	-		
2-3	Sales	\$	22.569			
2-4	Franchise	\$	7.410	-		
2-5	Licenses and permits	\$	125			
2-6	Intergovermental	\$	41,390	-		
2-7	Fines	\$	4,750	-		
2-8	Investment earnings	\$	189			
2-9	Payments in lieu of taxe	\$				
2-10	Drug forfeitures	\$				
2-11	Charges for utility services	\$		-		
2-12	Debt proceeds	\$		-		
2-13	Lease proceeds	\$				
2-14	Proceeds from sale of capital assets	\$		*		
2-15	Other (specify):	\$		=		
2-16	Miscellaneous	\$	1,238			
2-17		\$	1,230			
2-18		\$				
2-19		\$				
2-20		\$				
2-21	TOTAL REVENUE all sources	\$	94,872	32		

	PART 3 - EXPENDITURES(Disbursements-Cash Basis	s)			
	EXPENDITURES: All expenditures for all funds must be reflected in this section including the purchase of fixed and movable a		and		
	principal and interest payments on long-term debt.				
	Description	T	(Omit cents)		
3-1	Administrative	\$	2,348		
3-2	Salaries	\$	10,205		
3-3	Payroll taxes	\$	1,141		
3-4	Contract services	\$	1,121		
3-5	Employee benefits	\$		120	
3-6	Insurance	\$	11,698	-	
3-7	Accounting and legal fees	\$	4,795	-	
3-8	Repair and maintenance	\$	7,973	-	
3-9	Supplies	\$	1,913	- 20	
3-10	Utilities and telephone	\$	5,484	-	
3-11	Police	\$	476	2	
3-12	Fire	\$	5,554		
3-13	Streets and highways	\$	8,131	-	
3-14	Public health	\$	0,131	-	
3-15	Culture and recreation	\$			
3-16	Utility operations	\$			
3-17	Capital outlay	\$	3,868	2	
3-18	Debt service principal	\$	3,000	2	
3-19	Debt service interest	\$		2	
3-20	Contribution to pension plan	\$	480		
3-21	Other (specify):	\$	400		
3-22		\$			
3-23		\$			
3-24		\$			
3-25	TOTAL EXPENDITURES all categories		62,153		

	Please answer the following ques	stions by marking th	e appropriate box	(Yes		No
4-1	1 Do you have outstanding debt?						X	
If yes:	Is the debt repayment schedule attached?						**	
	Please complete the following debt schedule, if applicable:	3		Total issued during fiscal year (add)		Total retired during fiscal year (less)		ing at fisca or end
	General obligation bonds	\$	\$	-	\$	•	\$	7.
	Revenue bonds	\$	\$	146	\$	120	\$	12
	Notes/loans	\$::#:	\$	(2)	\$	-	\$	2
	Leases	\$ =	\$	(2)	\$	196	\$	2
	Other (specify):	\$ -	\$	2.5	\$		\$	2
					VANA 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ide ijdorij.	
	Please answer the following ques					Yes		No
4-2	Does the municipality have any aut					Yes	l I	No
						Yes		No
4-2 f yes:	Does the municipality have any aut	horized, but unissued \$				Yes		No
	Does the municipality have any aut If yes, how much?	horized, but unissued \$ e?	debt?			Yes		No

	and investment balances.	Checking Accounts	Savings Accounts	Certificates of Deposit	T	Γotal
5-1	Cash deposits	\$ 255,621	\$ 14,319	\$	\$269.	940
5-2	Investments:				100000000000000000000000000000000000000	
5-3					\$	
5-4					\$	2
5-5					\$	
5-6					\$	8
5-7	Total Investments				\$	
5-8	Total Cash and Investments				\$269,	940
	Please answer the following questi	on by marking in the approp	riate box	Yes		No
5-9	Are your deposits in an eligible public depository (Sec 27-105-5 & 27-105-353)					

Ple		TAL ASSETS					
	ease answer the following questions by marking in the approp	riate boxes			Yes	No	,
6-1 Do							
6-2 Hav	ve you prepared an inventory of your land, buildings, and/or equip	ment			**	Х	
If yes: If n	no, please explain:					* **	
A	all of historical cost records have	e not bee	en mair	tai	ned.		
Cor	mplete the following table:	Balance - Beginning of the				Balance - E	End of the
		Year	Addition	s D	eletions	Yea	ar
Lan	nd	\$ -	\$	- \$		\$	3.57
Buil	ildings	\$	\$	- \$	*	\$) (4)
Mad	chinery and equipment	\$ =	\$	- \$		\$	
Furi	rniture and fixtures	\$ -	\$	- \$	2	\$	327
Oth	ner (explain):	\$ -	\$	- \$		\$	

	Please answer the following question	on by marking in the appropriate boxes	Yes	No
7-1	Did the municipality approve a budget	for the next fiscal year end?	X	
7-2	If no, please explain:			
If yes:	Please indicate the amount appro	priated for each of your funds for the next fiscal year end?		
	Fund Name	Budgeted fiscal year end Expenditures		
	General	\$78,008	200000000000000000000000000000000000000	
		\$ -		
		\$ -	Section of the section of	Sammer Salings and salve
		PART 8 - GENERAL INFORMATION		
	Please answer the following question	on by marking in the appropriate boxes	Yes	No
	Has the Municipal Compiance Questio	nnaire been completed, adopted by your board and now		
	part of your minutes? If no please exp	plain:	X	
8-1				

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	○ A Signature
	Mayor		la de la
9-1	Randy Jones	6/30/25	Local >
	Alderman		1 1 1
9-2	Tammy Jones	6/30/25	Janny Hones
	Alderman		
9-3	John Lowry	6/30/25	A Comment
	Alderman		1
9-4	Michael Sherman	6/30/25	Muha Dother
	Alderman		3
9-5	Todd Mascagni	6/30/25	Marian
	Alderman	/	0011
9-6	Bryan Bell	6/30/25	King till
9-7			
9-8			