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03/07/18

Accrual Basis

State of Nevada Board of Homeopathic Medical Examiners

Profit & Loss

July 2014 through June 2015

	Jul '14 - Jun 15
Ordinary Income/Expense	
Income	
Donation Income	4,100.00
Fees	
Fingerprint Fee	50.00
License Fee	600.00
License Fee - Renewal	29,900.00
License Fee Renewal	2,800.00
Total Fees	33,350.00
Total Income	37,450.00
Expense	
Automobile Expense	59.46
Computer Expense	398.15
Dept. of Public Safety	40.00
gifts and donations	101.46
Homeo. Board operating expense	125.00
Insurance	
Liability Insurance	963.04
Total Insurance	963.04
Lobbying	213.48
Meetings Expense	2,190.74
Office Supplies	283.27
Postage and Delivery	29.99
Professional Fees	
Accounting	300.00
Consultants & Proctors	4,000.00
Legal Fees	1,874.55
Web-Site	250.00
Total Professional Fees	6,424.55
Reimbursement	100.00
Rent	2,200.00
Support Services	22,000.00
Telephone	1,465.76
Total Expense	36,594.90
Net Ordinary Income	855.10
Net Income	855.10

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Accrual Basis

State of Nevada Board of Homeopathic Medical Examiners
Balance Sheet
As of June 30, 2015

	<u>Jun 30, 15</u>
ASSETS	
Current Assets	
Checking/Savings	
Wells Fargo Checking 7048	15,933.87
Wells Fargo Savings 7321135605	150.22
Total Checking/Savings	<u>16,084.09</u>
Total Current Assets	<u>16,084.09</u>
TOTAL ASSETS	<u>16,084.09</u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	130,366.69
Total Accounts Payable	<u>130,366.69</u>
Total Current Liabilities	<u>130,366.69</u>
Total Liabilities	130,366.69
Equity	
Opening Bal Equity	10,961.54
Retained Earnings	-126,099.24
Net Income	855.10
Total Equity	<u>-114,282.60</u>
TOTAL LIABILITIES & EQUITY	<u>16,084.09</u>

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Accrual Basis

State of Nevada Board of Homeopathic Medical Examiners
Profit & Loss
July 2015 through June 2016

	<u>Jul '15 - Jun 16</u>
Ordinary Income/Expense	
Income	
Fees	
Fingerprint Fee	150.00
License Fee	1,600.00
License Fee - Renewal	30,600.00
License Fee Renewal	1,000.00
Total Fees	<u>33,350.00</u>
Total Income	33,350.00
Expense	
Automobile Expense	78.73
Computer Expense	838.31
Dept. of Public Safety	114.75
Homeo. Board operating expense	279.00
Insurance	
Liability Insurance	925.36
Total Insurance	<u>925.36</u>
Meetings Expense	222.13
Office Supplies	514.42
Postage and Delivery	185.83
Professional Development	75.00
Professional Fees	
Accounting	150.00
Computer	190.00
Legal Fees	3,675.40
Professional Fees - Other	300.00
Total Professional Fees	<u>4,315.40</u>
Rent	2,400.00
Support Services	24,000.00
Telephone	2,007.70
Total Expense	<u>35,956.63</u>
Net Ordinary Income	<u>-2,606.63</u>
Net Income	<u><u>-2,606.63</u></u>

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Accrual Basis

State of Nevada Board of Homeopathic Medical Examiners
Balance Sheet
As of June 30, 2016

	<u>Jun 30, 16</u>
ASSETS	
Current Assets	
Checking/Savings	
Wells Fargo Checking 7048	13,911.90
Wells Fargo Savings 7321135605	150.22
Total Checking/Savings	<u>14,062.12</u>
Total Current Assets	<u>14,062.12</u>
TOTAL ASSETS	<u>14,062.12</u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	130,951.35
Total Accounts Payable	<u>130,951.35</u>
Total Current Liabilities	<u>130,951.35</u>
Total Liabilities	130,951.35
Equity	
Opening Bal Equity	10,961.54
Retained Earnings	-125,244.14
Net Income	<u>-2,606.63</u>
Total Equity	<u>-116,889.23</u>
TOTAL LIABILITIES & EQUITY	<u>14,062.12</u>

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Accrual Basis

State of Nevada Board of Homeopathic Medical Examiners

Profit & Loss

July 2016 through June 2017

	Jul '16 - Jun 17
Ordinary Income/Expense	
Income	
Donation Income	8,000.00
Fees	
Fingerprint Fee	150.00
License Fee	1,900.00
License Fee - Renewal	24,150.00
License Fee Renewal	4,600.00
Other Fees	700.00
Fees - Other	300.00
Total Fees	31,800.00
Total Income	39,800.00
Expense	
Automobile Expense	33.55
Dept. of Public Safety	36.25
Insurance	
Liability Insurance	894.25
Total Insurance	894.25
Lobbying	114.20
Meetings Expense	289.30
Office Supplies	543.46
Postage and Delivery	160.19
Professional Fees	
Accounting	300.00
Computer	345.00
Consultants & Proctors	8,000.00
Legal Fees	15,775.57
Total Professional Fees	24,420.57
Rent	2,600.00
Support Services	24,000.00
Telephone	
Internet - DSL	282.05
Telephone - Other	2,005.94
Total Telephone	2,287.99
Travel & Ent	
Travel	25.00
Total Travel & Ent	25.00
Total Expense	55,404.76
Net Ordinary Income	-15,604.76
Net Income	-15,604.76

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03/07/18

Accrual Basis

State of Nevada Board of Homeopathic Medical Examiners
Balance Sheet
As of June 30, 2017

	<u>Jun 30, 17</u>
ASSETS	
Current Assets	
Checking/Savings	
Wells Fargo Checking 7048	12,410.97
Wells Fargo Savings 7321135605	150.22
Total Checking/Savings	<u>12,561.19</u>
Total Current Assets	<u>12,561.19</u>
TOTAL ASSETS	<u>12,561.19</u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	145,055.18
Total Accounts Payable	<u>145,055.18</u>
Total Current Liabilities	<u>145,055.18</u>
Total Liabilities	145,055.18
Equity	
Opening Bal Equity	10,961.54
Retained Earnings	-127,850.77
Net Income	-15,604.76
Total Equity	<u>-132,493.99</u>
TOTAL LIABILITIES & EQUITY	<u>12,561.19</u>

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Accrual Basis

State of Nevada Board of Homeopathic Medical Examiners

Profit & Loss

July 2017 through June 2018

	Jul '17 - Jun 18
Ordinary Income/Expense	
Income	
Fees	
Fingerprint Fee	300.00
License Fee	400.00
License Fee - Renewal	25,600.00
License Fee Renewal	2,200.00
Total Fees	28,500.00
Legal Income	30,000.00
Total Income	58,500.00
Expense	
Bank Service Charges	28.00
Dept. of Public Safety	145.00
Hearing Expenses	165.89
Insurance	
Liability Insurance	-14,766.29
Total Insurance	-14,766.29
Meetings Expense	2,593.23
Office Supplies	476.35
Postage and Delivery	20.22
Professional Fees	
Accounting	250.00
Legal Fees	30,509.23
Web-Site	350.00
Total Professional Fees	31,109.23
Rent	1,600.00
Support Services	16,000.00
Telephone	
Internet - DSL	306.10
Telephone - Other	1,194.21
Total Telephone	1,500.31
Total Expense	38,871.94
Net Ordinary Income	19,628.06
Other Income/Expense	
Other Income	
Other Income	136.80
Total Other Income	136.80
Net Other Income	136.80
Net Income	19,764.86

State of Nevada Board of Homeopathic Medical Examiners
Balance Sheet
As of March 7, 2018

	<u>Mar 7, 18</u>
ASSETS	
Current Assets	
Checking/Savings	
Wells Fargo Checking 7048	46,283.51
Wells Fargo Savings 7321135605	49.83
Total Checking/Savings	<u>46,333.34</u>
Total Current Assets	<u>46,333.34</u>
TOTAL ASSETS	<u>46,333.34</u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	159,062.47
Total Accounts Payable	<u>159,062.47</u>
Total Current Liabilities	<u>159,062.47</u>
Total Liabilities	159,062.47
Equity	
Opening Bal Equity	10,961.54
Retained Earnings	-143,455.53
Net Income	19,764.86
Total Equity	<u>-112,729.13</u>
TOTAL LIABILITIES & EQUITY	<u>46,333.34</u>

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03/09/18

Cash Basis

State of Nevada Board of Homeopathic Medical Examiners

Profit & Loss Budget vs. Actual

July 2016 through June 2017

	Jul '16 - Jun 17	Budget	\$ Over Budget	% of Budget
Ordinary Income/Expense				
Income				
Donation Income	8,000.00	8,000.00	0.00	100.0%
Fees				
Fingerprint Fee	150.00	150.00	0.00	100.0%
License Fee	1,900.00	1,900.00	0.00	100.0%
License Fee - Renewal	24,150.00	2,850.00	21,300.00	847.4%
License Fee Renewal	4,600.00			
Other Fees	700.00			
Fees - Other	300.00			
Total Fees	31,800.00	4,900.00	26,900.00	649.0%
Total Income	39,800.00	12,900.00	26,900.00	308.5%
Expense				
Automobile Expense	33.55			
Dept. of Public Safety	36.25			
Insurance				
Liability Insurance	925.36			
Total Insurance	925.36			
Lobbying	114.20			
Meetings Expense	289.30			
Office Supplies	543.46			
Postage and Delivery	160.19			
Professional Fees				
Accounting	300.00			
Computer	345.00			
Consultants & Proctors	8,000.00			
Legal Fees	1,640.63			
Total Professional Fees	10,285.63			
Rent	2,600.00			
Support Services	24,000.00			
Telephone				
Internet - DSL	282.05			
Telephone - Other	2,005.94			
Total Telephone	2,287.99			
Travel & Ent				
Travel	25.00			
Total Travel & Ent	25.00			
Total Expense	41,300.93			
Net Ordinary Income	-1,500.93	12,900.00	-14,400.93	-11.6%
Net Income	-1,500.93	12,900.00	-14,400.93	-11.6%

**NEVADA STATE BOARDS
BALANCE SHEET
June 30, 2017**

ASSETS

1. Cash – Checking Account	\$ <u>12,410.97</u>
2. Cash – Savings Account	<u>150.22</u>
3. Short-term Investments (See instructions)	<u> </u>
4. Other Assets (Attach schedule)	<u>12,410.97</u>
5. TOTAL ASSETS	\$ <u>12,561.19</u>

LIABILITIES AND FUND BALANCE

6. Accounts Payable	\$ <u>145,086.29</u>
7. Other Liabilities (Attach schedule)	<u> </u>
8. TOTAL LIABILITIES	<u> </u>
9. Fund Balance: Beginning of Year	\$ <u>116,889.23</u>
9a. Revenue (Attach schedule)	<u>39,800.00</u>
9b. Expenditures (Attach schedule)	<u>55,435.87</u>
10. Fund Balance: End of Year	<u>132,525.10</u>
11. TOTAL LIABILITIES AND FUND BALANCE	\$ <u>12,561.19</u>

Board Name: HOMEOPATHIC MEDICAL EXAMINERS Date: 11/29/2017

Form Completed by: NANCY EKLOF Title: Executive Director

Signature: Nancy Eklof

Please submit a copy of this form, applicable schedules, the June 30 bank statement(s), and the year end bank reconciliation to the Legislative Auditor and the Chief of the Budget Division of the Office of Finance on or before December 1. Retain all originals for your files.

**NEVADA STATE BOARDS
BALANCE SHEET
June 30, 2016**

ASSETS

- | | |
|--|---------------------|
| 1. Cash – Checking Account | \$ <u>13,911.90</u> |
| 2. Cash – Savings Account | <u>150.22</u> |
| 3. Short-term Investments (See instructions) | <u> </u> |
| 4. Other Assets (Attach schedule) | <u> </u> |
| 5. TOTAL ASSETS | \$ <u>14,062.62</u> |

LIABILITIES AND FUND BALANCE

- | | |
|--|----------------------|
| 6. Accounts Payable | \$ <u>130,951.35</u> |
| 7. Other Liabilities (Attach schedule) | <u> </u> |
| 8. TOTAL LIABILITIES | <u>130,951.35</u> |
| 9. Fund Balance: Beginning of Year | \$ <u>114,282.60</u> |
| 9a. Revenue (Attach schedule) | <u>33,350.00</u> |
| 9b. Expenditures (Attach schedule) | <u>35,954.63</u> |
| 10. Fund Balance: End of Year | <u>116,889.23</u> |
| 11. TOTAL LIABILITIES AND FUND BALANCE | \$ <u>140,62.12</u> |

Board Name: HOMEOPATHIC MEDICAL EXAMINERS Date: 11/30/2016

Form Completed by: NANCY EKLOF Title: EXECUTIVE DIRECTOR

Signature: Nancy Eklof

Please submit a copy of this form, applicable schedules, the June 30 bank statement(s), and the year end bank reconciliation to the Legislative Auditor and the Chief of the Budget Division of the Office of Finance on or before December 1. Retain all originals for your files.

**NEVADA STATE BOARDS
BALANCE SHEET
June 30, 2015**

ASSETS

- | | |
|--|--------------------------------|
| 1. Cash – Checking Account | \$ <u>15,933.⁸⁷</u> |
| 2. Cash – Savings Account | <u>150.²²</u> |
| 3. Short-term Investments (See instructions) | _____ |
| 4. Other Assets (Attach schedule) | _____ |
| 5. TOTAL ASSETS | \$ <u>16,084.⁰⁹</u> |

LIABILITIES AND FUND BALANCE

- | | |
|--|---------------------------------|
| 6. Accounts Payable | \$ <u>130,366.⁶⁹</u> |
| 7. Other Liabilities (Attach schedule) | _____ |
| 8. TOTAL LIABILITIES | |
| 9. Fund Balance: Beginning of Year | \$ <u>115,137.⁷⁰</u> |
| 9a. Revenue (Attach schedule) | <u>37,450.⁰⁰</u> |
| 9b. Expenditures (Attach schedule) | <u>36,594.⁹⁰</u> |
| 10. Fund Balance: End of Year | <u>114,282.⁶⁰</u> |
| 11. TOTAL LIABILITIES AND FUND BALANCE | \$ <u>16,084.⁰⁹</u> |

Board Name: Homeopathic Medical Examiners Date: 11/24/2015

Form Completed by: NANCY EKLOF Title: EXECUTIVE DIRECTOR

Signature: Nancy Eklof

Please submit a copy of this form, applicable schedules, the June 30 bank statement(s), and the year end bank reconciliation to the Legislative Auditor and the Chief of the Budget Division of the Department of Administration on or before December 1. Retain all originals for your files.

