APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

FOR LOCAL GOVERNMENTS WITH EITHER REVENUES OR EXPENDITURES MORE THAN \$100,000 BUT NOT MORE THAN \$750,000

Under the Local Government Audit Law (Section 29-1-601, et seq., C.R.S.) any local government may apply for an exemption from audit if neither revenues nor expenditures exceed \$750,000 for the year.

If your local government has either revenues or expenditures of LESS than \$100,000, use the SHORT FORM

EXEMPTIONS FROM AUDIT ARE NOT AUTOMATIC

To qualify for exemption from audit, a local government must complete an Application for Exemption from Audit EACH YEAR and submit it to the Office of the State Auditor (OSA) for approval.

Any preparer of an Application for Exemption from Audit must be an independent accountant with knowledge of governmental accounting.

Approval for an exemption from audit is granted only upon the review by the OSA.

READ ALL INSTRUCTIONS BEFORE COMPLETING AND SUBMITTING THIS FORM

ALL APPLICATIONS MUST BE FILED WITH THE OSA WITHIN 3 MONTHS AFTER THE ACCOUNTING YEAR-END. FOR EXAMPLE, APPLICATIONS MUST BE RECEIVED BY THE OSA ON OR BEFORE MARCH 31 FOR GOVERNMENTS WITH A DECEMBER 31 YEAR-END.

GOVERNMENTAL ACTIVITY SHOULD BE REPORTED ON THE MODIFIED ACCRUAL BASIS

PROPRIETARY ACTIVITY SHOULD BE REPORTED ON A BUDGETARY BASIS

POSTMARK DATES WILL NOT BE ACCEPTED AS PROOF OF SUBMISSION ON OR BEFORE THE STATUATORY DEADLINE

PRIOR YEAR FORMS ARE OBSOLETE AND WILL NOT BE ACCEPTED.

FOR YOUR REFERENCE, COLORADO REVISED STATUTES CAN BE FOUND AT THIS ADDRESS:

APPLICATIONS SUBMITTED ON FORMS OTHER THAN THOSE PRESCRIBED BY THE OSA WILL NOT BE ACCEPTED.

http://www.lexisnexis.com/hottopics/Colorado/

APPLICATIONS MUST BE FULLY AND ACCURATELY COMPLETED.

	CHECKLIST						
Has the preparer signed the application?		Checkout our new web portal. Register your account and submit electronic Applications for Exemption From Audit, Extension of					
Has the entity corrected all Prior Year Deficiencies as communicated by t	Time to File requests, Audited Financial Statements, and more!						
Has the application been PERSONALLY reviewed and approved by the go	overning body?	See the link below.					
Are all sections of the form complete, including responses to all of the qu	estions?	OSA LG Web Portal					
Did you include any relevant explanations for unusual items in the approp	priate spaces at the end of each section?						
Will this application be submitted electronically?							
If yes, have you read and understand the new Electronic Signature Policy? See new here policy							
Ol'							
☐ Have you included a resolution?							
 Does the resolution state that the governing body <u>PERSON</u> 	<u>IALLY</u> reviewed and approved the resolution in an open public meeting?						
☐ Has the resolution been signed by a <u>MAJORITY</u> of the gove	erning body? (See sample resolution.)						
Will this application be submitted via a mail service? (e.g. US Post Office,	FedEx, UPS, courier.)						
☐ If yes, does the application include ORIGINAL INK SIGNAT	URES from the MAJORITY of the governing body?						
	FILING METHODS						
NEW METHOD! WEB PORTAL: Register and submit your Applications at our new portal:	https://apps.leg.co.gov/osa/ig						
MAIL: Office of the State Auditor Local Government Audit Division 1525 Sherman St., 7th Floor Denver, CO 80203							

QUESTIONS?

Email: osa.lg@coleg.gov or Phone: 303-869-3000

IMPORTANT!

All Applications for Exemption from Audit are subject to review and approval by the Office of the State Audito

Governmental Activity should be reported on the Modified Accrual Basis

Proprietary Activity should be reported on the Cash or Budgetary Basis -- A Budget to GAAP reconciliation is provided in Part

Failure to file an application or denial of the request could cause the local government to lose its exemption from audit for that year and the ensuing year

In that event, AN AUDIT SHALL BE REQUIRED

		NG FORM	1		4 210
AME OF GOVERNMENT DDRESS	Centennial Crossing Metropolitan District No 1 1613 Pelican Lake Point Ste 201			12/	Year Ended 31/2022 year ended:
ONTACT PERSON HONE MAIL	Windsor, CO 80550 Ann E. Eldridge 720-289-1484 ann@eldridgecps.com				
	CERTIFICAT	ION OF P	REPARER		
dependent of the entity complete t	countant with knowledge of governmental accounting and that the information in the application if revenues or expenditure are at least \$100,000 but not more than \$		s complete and acc		uires that a pe
	countant with knowledge of governmental accounting and that the information in		s complete and acc		uires that a pe
Idependent of the entity complete to AME: ITLE IRM NAME (if applicable) DDRESS HONE	countant with knowledge of governmental accounting and that the information in the application if revenues or expenditure are at least \$100,000 but not more than \$ Ann E. Eldridge Contract Accountant 10250 W. Alamo Place; Littleton, CO 80127 720-289-1484		s complete and acc		uires that a pe
Idependent of the entity complete to AME: ITLE IRM NAME (if applicable) DDRESS HONE ATE PREPARED ELATIONSHIP TO ENTITY	countant with knowledge of governmental accounting and that the information in the application if revenues or expenditure are at least \$100,000 but not more than \$ Ann E. Eldridge Contract Accountant 10250 W. Alamo Place; Littleton, CO 80127 720-289-1484 02.28.2023 Contract Accountant		s complete and acc		uires that a pe
Idependent of the entity complete to AME: ITLE IRM NAME (if applicable) DDRESS HONE ATE PREPARED ELATIONSHIP TO ENTITY PREPARER (SIGNATURE	countant with knowledge of governmental accounting and that the information in the application if revenues or expenditure are at least \$100,000 but not more than \$ Ann E. Eldridge Contract Accountant 10250 W. Alamo Place; Littleton, CO 80127 720-289-1464 02.28.2023 Contract Accountant REQUIRED)		s complete and acc		uires that a pe
idependent of the entity complete of AME: ITLE IRM NAME (if applicable) DDRESS HONE ATE PREPARED ELATIONSHIP TO ENTITY PREPARER (SIGNATURE OMAGA as the entity filed for, or has the	countant with knowledge of governmental accounting and that the information in the application if revenues or expenditure are at least \$100,000 but not more than \$ Ann E. Eldridge Contract Accountant 10250 W. Alamo Place; Littleton, CO 80127 720-289-1484 02.28.2023 Contract Accountant		s complete and acc		uires that a pe

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

Indicate Name of Fun	d
----------------------	---

20		Governme	ental Funds		Proprietary/Fid	uciary Funds	Please use this space to
ne#	Description	Fund*	Fund*	Description	Fund*	Fund*	provide explanation of ar
	Assets			Assets			items on this page
1-1	Cash & Cash Equivalents	231,121	s -		\$ -	\$ -	
1-2	Investments \$	-	\$ -			\$ -	-1
1-3	Receivables	280,728	\$ 1,275	Receivables	\$ -	\$ -	
1-4	Due from Other Entities or Funds	•	\$ -	4	\$ -		
1-5	Property Tax Receivable	6,926	\$ 24,240	Other Current Assets [specify]			
	All Other Assets [specify]			,	\$ -	\$ -	
1-6	Lease Receivable (as Lessor)	-	\$ -	Total Current Assets	\$	\$ 10 -5 - 17 - 17 -	
-7	Prepaids \$	455	\$ -	Capital & Right to Use Assets, net (from Part 6-4)	s -	\$ -	
-8	\$	-				\$ -	
-9	\$	-	\$ -			\$ -	-
-10	\$	•			·	\$ -	
-11	(add lines 1-1 through 1-10) TOTAL ASSETS \$	519,230	\$ 25,515	(add lines 1-1 through 1-10) TOTAL ASSETS	\$ 12 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		\$
	Deferred Outflows of Resources:			Deferred Outflows of Resources	- The state of the	· sarry samp was with	u.J
-12	[specify]	•	\$.		\$ -	s -	
-13	[specify]	-	\$ -		s -		
-14	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS		 	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS	•		1
-15	TOTAL ASSETS AND DEFERRED OUTFLOWS \$						7
	Liabilities			Liabilities	Temaso-dividual volumento . Te	7/10- W/PC-2410-1	1
16	Accounts Payable \$	119,334	\$.	Accounts Payable	\$ -	s -	7
17	Accrued Payroll and Related Liabilities \$			Accrued Payroll and Related Liabilities	\$ -	\$ -	
-18	Unearned Property Tax Revenue	-	\$ -	Accrued Interest Payable	\$ -	\$ -	-
-19	Due to Other Entities or Funds	-	\$ -	Due to Other Entitles or Funds	\$ -	\$ -	
-20	All Other Current Liabilities	-	\$ -	All Other Current Liabilities	\$ -	\$ -	
-21	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES S	119,334	\$	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	\$ 150 3 100 0 - 11	\$.	
-22	All Other Liabilities [specify]	-	\$ -	Proprietary Debt Outstanding (from Part 4-4)	\$ -	\$ -	
-23	\$	•	\$.	Other Liabilities [specify]:	\$ -	\$ -	
-24	\$	-	\$ -		\$ -	\$ -	
-25	\$	-	\$ -		\$ -	\$ -	
-26	\$	-	\$ -		\$ -	\$ -	
-27	(add lines 1-21 through 1-26) TOTAL LIABILITIES \$	119,334	\$	(add lines 1-21 through 1-26) TOTAL LIABILITIES	Silver and a constant	S STATE OF THE STA	
	Deferred Inflows of Resources:			Deferred Inflows of Resources			
-28	Deferred Property Taxes	108	\$ 377	Pension/OPEB Related	\$ -	s -	7
29	Lease related (as lessor)	•	\$.	Other [specify]	\$ -		
30	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS \$	108	\$ 377	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	\$ 11.76 (27.07.1	\$	
	Fund Balance			Net Position			
31	Nonspendable Prepaid \$	-	\$ -	Net investment in Capital Assets	\$ -	\$ -	7
32	Nonspendable Inventory \$	-	\$ -				_
-33	Restricted [specify]	-	\$ -	Emergency Reserves	\$ -	\$ -	7
34	Committed (specify)	-	\$ -		<u> </u>	\$ -	
-35	Assigned [specify]	-	\$ -	Restricted	\$ -	\$ -	
36	Unassigned: \$	399,788	\$ 25,138	Undesignated/Unreserved/Unrestricted	5 -	\$ -	
37	Add lines 1-31 through 1-36	A TANK MARK	2001032724-0000	Add lines 1-31 through 1-36			
	This total should be the same as line 3-33			This total should be the same as line 3-33			
	TOTAL FUND BALANCE S	399,788	\$ 25,138		s -		
38	Add lines 1-27, 1-30 and 1-37			Add lines 1-27, 1-30 and 1-37	N 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ATTACAMENT OF A STATE OF	
	This total should be the same as line 1-15			This total should be the same as line 1-15			
	TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND			TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET			
	BALANCE S	519,230	\$ 25,515		The second of the second	\$	

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		Governm	ental Funds		Proprietary	/Fiduciary Funds	The same of the sa
.ine #	Description	Fund*	Fund*	Description	Fund*	Fund*	Please use this space to provide explanation of an
Tax	Revenue			Tax Revenue			items on this page
2-1 F	Property (Include mills levied in Question 10-6)	\$ 6,818	\$ 23,86	Property [include mills levied in Question 10-6]	\$	- \$	- 1000000000000000000000000000000000000
	Specific Ownership	\$ 404	\$ 1,41	Specific Ownership	\$	- \$	-
2-3	Sales and Use Tax	\$ -	\$	- Sales and Use Tax	\$	- \$	-
	Other Tax Revenue [specify]:	\$ -	\$	Other Tax Revenue [specify]:	\$	- \$	-
-5 Roy	/alities	\$ 5,311	\$ 18,59		\$	- \$	-
-6		\$ -	\$	-	\$	- \$	•
-7		\$ -	\$		\$	- \$	-
-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ 12,533	\$ 43,86	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$	- 8	
9 1	Licenses and Permits	\$ -	\$	Licenses and Permits	\$	- \$	-
10 H	Highway Users Tax Funds (HUTF)	\$ -	\$	- Highway Users Tax Funds (нитя)	\$	- \$	-
11 (Conservation Trust Funds (Lottery)	\$ -	\$	- Conservation Trust Funds (Lottery)	\$	- \$	-
12 (Community Development Block Grant	\$ -	\$	- Community Development Block Grant	\$	- \$	-
13 F	Fire & Police Pension	\$ -	\$	Fire & Police Pension	\$	- S	-
14 (Grants	\$ -	\$	- Grants	\$	- \$	-
15 [Donations	\$ -	\$	- Donations	\$	- \$	
16 (Charges for Sales and Services	\$ -	\$	Charges for Sales and Services	\$	- \$	-
17 F	Rental Income	\$ -	\$	- Rental Income	\$	- \$	-
18 F	Fines and Forfeits	\$ -	\$	Fines and Forfeits	\$	- \$	-
19 I	nterest/investment Income	\$ -	\$	Interest/Investment Income	\$	- \$	-
20	Tap Fees	\$ -	\$	Tap Fees	\$	- \$	-
21	Proceeds from Sale of Capital Assets	\$ -	\$	Proceeds from Sale of Capital Assets	\$	- \$	-
22	All Other [specify]:	\$ -	\$	- All Other [specify]:	\$	- \$	•
23		\$ -	\$		\$	- \$	-
24	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ 12,533	\$ 43,86	Add lines 2-8 through 2-23 TOTAL REVENUES	\$	- 8	•
(Other Financing Sources			Other Financing Sources			Actived .
25	Debt Proceeds	\$ -	\$	- Debt Proceeds	\$	- \$	-
26	Lease Proceeds	\$.	\$	Lease Proceeds	\$	- \$	-
27	Developer Advances	\$ -	\$	- Developer Advances	\$	- \$	-
28 1	Fransfers to other districts	\$ 175,243	\$	Other [specify]:	\$	- \$	-
29	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES	\$ 175,243		Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES			GRAND TOTALS
30	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ 187,776	\$ 43.86	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES		- \$	- S 231,

IF GRAND TOTAL REVENUES AND OTHER FINANCING SOURCES for all funds (Line 2-29) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

PART 3 - FINANC	IAL STATE	MENT	S - OP	PERATING STATEMENT - EXPENDIT	URES/EXP	ENSES	
	Govern	mental Fund	ls		Proprietary	//Fiduciary Funds	Please use this space to
Line # Description	Fund*	Fi	und*	Description	Fund*	Fund*	provide explanation of any
Expenditures				Expenses			items on this page
3-1 General Government		26 \$		General Operating & Administrative	\$	- \$	· NELL LEADERS NO.
3-2 Judicial	\$	- \$	•	Salaries	\$	- \$	•
3-3 Law Enforcement	\$	- \$		Payroll Taxes	\$	- \$	-
3-4 Fire	\$	- \$	-	Contract Services	\$	- \$	-
3-5 Highways & Streets	\$	- \$	-	Employee Benefits	\$	- \$	-
3-6 Solid Waste	\$	- \$		Insurance	\$	- \$	-
3-7 Contributions to Fire & Police Pension Assoc.	\$	- \$	-	Accounting and Legal Fees	\$	- \$	-
3-8 Health	\$	- \$		Repair and Maintenance	\$	- \$	-
3-9 Culture and Recreation	\$	- \$	•	Supplies	\$	- S	•
3-10 Transfers to other districts		\$		Utilities	S	- S	7
3-11 Landscape maintenance	\$ 203,5			Contributions to Fire & Police Pension Assoc.	S	- S	-
3-12 Utilities		3 \$		Other [specify]	S	- S	-
3-13 Treasurer fees	4	2 \$	357		S	- \$	_
3-14 Capital Outlay	S	- S	001	Capital Outlay	\$	- S	
Debt Service	•	- 4		Debt Service	3	- 4	•]
	S				_		
3-15 Principal (should match amount in 4-4)		- \$		Principal (should match amount in 4-4)	\$	- \$	-
3-16 Interest	\$	- \$		Interest	\$	- \$	-
3-17 Bond Issuance Costs	\$	- \$		Bond Issuance Costs	\$	- \$	-
3-18 Developer Principal Repayments	\$	- \$		Developer Principal Repayments	\$	- \$	-
3-19 Developer Interest Repayments	\$	- \$	-	Developer Interest Repayments	\$	- \$	•
3-20 All Other [specify]:	\$	- \$	-	All Other [specify]:	\$		• 1
3-21	\$	- \$			\$	- \$	- GRAND TOTAL
3-22 Add lines 3-1 through 3-21 TOTAL EXPENDITURES	\$ 282,56	14 S	357	Add lines 3-1 through 3-2 TOTAL EXPENSES		- S	\$ 282,92
3-23 Interfund Transfers (In)	\$ (18,6	7) \$		Net Interfund Transfers (In) Out	\$	- \$	-
3-24 Interfund Transfers Out	\$	- \$	18,617	Other [specify][enter negative for expense]	\$	- S	•
3-25 Other Expenditures (Revenues):	\$	- \$		Depreciation/Amortization	\$	- S	-
3-26	\$	- S	-	Other Financing Sources (Uses) (from time 2-28)	\$	- S	-
3-27	S	- S		Capital Outlay (from line 3-14)	\$	- S	_
3-28	S	- 8		Debt Principal (from line 3-15, 3-18)	S	- 3	_
3-29 (Add lines 3-23 through 3-28) TOTAL	STATE SAIG DON'T	na stranska	1000	(Line 3-27, plus line 3-28, less line 3-26, less line 3-25			
TRANSFERS AND OTHER EXPENDITURES							
	\$ (18,6	7) \$	18,617	pitis fille 3-24) TOTAL GAAF RECONCILING ITEMS	\$	- \$ E	1-1
3-30 Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures				Net Increase (Decrease) in Net Position Line 2-29, less line 3-22, plus line 3-29, less line 3-23			
Line 2-29, less line 3-22, less line 3-29	\$ (76,1	O) \$	24,891	and aray, 1000 into 0-22, plus into 0-20, 1000 into 0-20	\$	- \$ 100 miles	2 <u>4</u>
				Not Regition January 1 from December 24 prior year			
3-31 Fund Balance, January 1 from December 31 prior year report				Net Position, January 1 from December 31 prior year			
	\$ 475,99	8 \$	248	report	\$	- \$	-
3-32 Prior Period Adjustment (MUST explain)	\$	- S	_	Prior Period Adjustment (MUST explain)	S	- S	
3-33 Fund Balance, December 31	ACTORNAL SERVICES CO.	SORT MERCHANISM TO		Net Position, December 31	U.C. Albana and all and	563; 1/2630 (1011) 21/21/21/21/21/21	
Sum of Lines 3-30, 3-31, and 3-32				Sum of Lines 3-30, 3-31, and 3-32	A STATE OF THE STATE OF		192
This total should be the same as line 1-37.	\$ 399,78	8 \$	25.138	This total should be the same as line 1-37.	\$	- 5	-
COLUMN TOTAL SYSTEMS THE SAME AS INC. 1-07.	4		20,100	The team ended by the dalle to the Tot.	1 V 0 12/20 - 201/10 - 2 - 7 - 1/4	A STATE OF THE PARTY OF THE PAR	NOTE:

IF GRAND TOTAL EXPENDITURES for all funds (Line 3-22) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

	DADTA	EDT OUTCTANDIN	C ICCLIED AL	ID DETIDED	
	PART 4 - L	DEBT OUTSTANDIN	G, 1550ED, AN	NURETIKED	The first of the second of the
	Please answer the following questions by marking the appl	opriate boxes.	YES	NO	Please use this space to provide any explanations or comments:
4-1	Does the entity have outstanding debt?	777		2	
4-2	Is the debt repayment schedule attached? If no, MUST explain:			D	
	na			0	
4-3	is the entity current in its debt service payments? If no, MUST explain:			u	
4-4	na				
4-4	Please complete the following debt schedule, if applicable: (please only include principal	Outstanding at Issued du	ring Retired during	utstanding at year-end	
	amounts)	beginning of year* year	year	atotaliang at your ona	
	General obligation bonds	\$ - \$	- \$ - \$	-	
	Revenue bonds	\$ - \$	- \$ - \$		
	Notes/Loans Lease Liabilities	\$ - \$ \$ - \$	- \$ - \$ - \$ - \$		
	Developer Advances	\$ - \$	- \$ - \$		
	Other (specify):	s - s	- \$ - \$		
	TOTAL	*must agree to prior year ending balance	- \$ - \$	-	
811	Please answer the following questions by marking the appropriate boxes.	thust agree to prior year enoung balance	YES	NO	
4-5	Does the entity have any authorized, but unissued, debt [Section 29-1-605(2) C.R.	5.]?		V	
If yes:	How much?	\$ -			
4-6	Date the debt was authorized: Does the entity intend to issue debt within the next calendar year?	na		Ø	
	How much?	\$ -			
4-7	Does the entity have debt that has been refinanced that it is still responsible for?			•	
If yes:	What is the amount outstanding? Does the entity have any lease agreements?	\$ -	0	Ø	
	What is being leased?				
•	What is the original date of the lease?				
	Number of years of lease? Is the lease subject to annual appropriation?			<u> </u>	
	What are the annual lease payments?	\$	D 20		the second secon
		PART 5 - CASH ANI	D INVESTMEN	TS	
	Please provide the entity's cash deposit and investment balances.		AMOUNT		Please use this space to provide any explanations or comments:
5-1	YEAR-END Total of ALL Checking and Savings accounts		\$ 231,121		
5-2	Certificates of deposit	TOTAL CASH DEPO	OSITS -	231,121	
	Investments (if investment is a mutual fund, please list underlying investments):	TOTAL GAOTIBLE	30113	201,121	
	na		s -		
5-3	na		\$ -		
0-0	na		\$ -		
	na	TOTAL INVESTM	ENTS		
		TOTAL CASH AND INVESTM	The same of the sa		
	Please answer the following question by marking in the appropriate box	YES	NO	N/A	
5-4	Are the entity's Investments legal in accordance with Section 24-75-601, et. seq.,		0	2	
5-5	Are the entity's deposits in an eligible (Public Deposit Protection Act) public depo		o		
9-5	10.5-101, et seq. C.R.S.)? If no, MUST explain:			J	

	PART	6 - CAPITAL	AND RIGH	11-10-US	EASSETS	
	Please answer the following question by marking in the appropriate box			YES	NO	Please use this space to provide any explanations or comments:
3-1	Does the entity have capitalized assets?		4-7-27-2	Ø		*
3-2	Has the entity performed an annual inventory of capital assets in accordance with	h Section 29-1-506, C	C.R.S.? If no,	2		
	MUST explain:			1		
			I I I I I I I I I I I I I I I I I I I			
5-3		Balance -	Additions		The state of the s	
	Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS:	beginning of the	2	Deletions	Year-End Balance	
		year 1			threat is miles for	
	Land Buildings				\$	•
	Machinery and equipment	\$ -	\$ - \$ -	+	\$	•
	Furniture and fixtures	<u>-</u>	\$ -		\$	
	Infrastructure		\$ -		S	-
	Construction in Progress (CIP)	\$ -	\$ -		\$	-
	Leased Right-to-Use Assets	\$ -	\$ -	\$ -	\$	•
	Intangible Assets		\$ -		\$	-
	Landscaping	\$ 2,796,454			\$ 2,846,4	154
	Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance) Accumulated Depreciation (Enter a negative, or credit, balance)		\$ -		\$ (004.7	
		\$ (270,205)		1	\$ (294,7	
	TOTAL		\$ 25,436	3 -	\$ 2,551,6	85
i-4	Complete the following Capital & Right-To-Use Assets table for PROPRIETARY FUNDS:	Balance -			ACCUMULATION OF THE REAL PROPERTY.	
)- -4	Complete the following Capital & Right-10-ose Assets (able for PROPRIETART FORDS;	beginning of the	Additions	Deletions	Year-End Balance	
	Land	year*		\$ -	\$	
	Buildings	\$ -	\$ -		\$	-
	Machinery and equipment	\$ -	š -		\$	-
	Furniture and fixtures	\$ -	\$ -		\$	•
	Infrastructure	\$ -	\$ -	\$ -	\$	•
	Construction in Progress (CIP)	-	<u>\$</u> -		\$	•
	Leased Right-to-Use Assets		\$ -		\$	
	Intangible Assets Other (explain):	\$ - \$ -	\$ - \$ -		\$	-
	Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)		\$ -		S	-
	Accumulated Depreciation (Enter a negative, or credit, balance)		š -	- T	\$	•
	TOTAL	s .	s -		S	•
		* Must agree to prior yea	er-end balance	-		······································
					lay on line 3-14 and capitaliz	red
		in accordance with the go	overnment's capitaliza	tion policy. Please e	xplain any discrepancy	
-		PART 7 - PE	NSIONINE	ORMATIO	ON	
		17 / 1 / - 1 L	IVII VIOIOVI.	YES		
	December and the beautiful the state of the			and the second	NO	Please use this space to provide any explanations or comments:
'-1	Does the entity have an "old hire" firefighters' pension plan?				2	
-2	Does the entity have a volunteer firefighters' pension plan?				2	
,00.	Who administers the plan?			ы	ď	
	Indicate the contributions from:					
	Tax (property, SO, sales, etc.);	[\$ -			
	State contribution amount:		\$ -			
			\$.	-		
	Other (gifts, donations, etc.):	5530	<u> </u>			
		TOTAL	\$ -			
	What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?		\$ -			

	PART 8 -	BUDGET INFO	DRMATION	1	
	Please answer the following question by marking in the appropriate box	YES	NO	N/A	Please use this space to provide any explanations or comments:
8-1	Did the entity file a current year budget with the Department of Local Affairs, in accordance with	2			
	Section 29-1-113 C.R.S.? If no, MUST explain: Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.?	v			
8-2	If no, MUST explain:	<u>.</u>			
If yes:	Please indicate the amount appropriated for each fund separately for the year reported	(240)			
		priations By Fund			
	General Fund \$ Debt service Fund \$	70,804 246,510			
	\$	•			
B 8	PART 9 - TAX PA	YER'S BILL OF	RIGHTS	(TABOR)	
	Please answer the following question by marking in the appropriate box		YES	NO	Please use this space to provide any explanations or comments:
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section		2		
	Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percrequirement. All governments should determine if they meet this requirement of TABOR.	cent emergency reserve			
	PART 10 -	GENERAL INF	ORMATIC	N	
	Please answer the following question by marking in the appropriate box		YES	NO	Please use this space to provide any explanations or comments:
10-1	is this application for a newly formed governmental entity?			2	
If yes:					
	Date of formation:	na			
40.0	Hen the entity channel its name in the mast or current year?	100		2	
	Has the entity changed its name in the past or current year?				
If Yes:	NEW name na				
	PRIOR name na				
	Is the entity a metropolitan district? Please indicate what services the entity provides:		Ø	0	
10-4	The District was established in September 2006 to provide funding to District No. 1 for the design, acquis	ition construction inst			
40.5		sition, construction, inst	0	Ø	
	Does the entity have an agreement with another government to provide services?		u	Ø	
ii yes.	List the name of the other governmental entity and the services provided:				
40.0	Does the entity have a certified mill levy?				
	Please provide the number of mills levied for the year reported (do not enter \$ amounts):		Ø		
ii yes:		35.000			
	General/Other mills	10.000			
	Total mills	45.000			

Please use this space to provide any additional explanations or comments not previously included:

				OSA USE ONLY		
Entity Wide:		General Fund		Governmental Funds		Notes
Inrestricted Cash & Investments	\$	231,121 Unrestricted Fund Balan	. 5	399,788 Total Tax Revenue		56,398
urrent Liabilities	\$	119,334 Total Fund Balance	3	399,788 Revenue Paying Debt Service	4	
eferred inflow	\$	485 PY Fund Balance	\$	475,958 Total Revenue		231,641
		Total Revenue	\$	187,776 Total Debt Service Principal		
		Total Expenditures	\$	282,564 Total Debt Service Interest		
overnmental		Interfund In	\$	(18,617)		
otal Cash & Investments	\$	231,121 Interfund Out	\$	- Enterprise Funds		
ransfers In	\$	- Proprietary		Net Position		
ansfers Out	\$	- Current Assets	\$	- PY Net Position	•	
roperty Tax	\$	30,681 Deferred Outflow	\$ 1000	- Government-Wide		
ebt Service Principal	3	- Current Liabilities	\$	- Total Outstanding Debt	S - S	
otal Expenditures	\$	282,921 Deferred Inflow	\$	Authorized but Unissued	\$	
otal Developer Advances		- Cash & Investments	\$	- Year Authorized		na
otal Developer Repayments	\$	- Principal Expense	1			

20	PART 12 - GOVERNING BO	DDY APPRO	DVAL	
	Please answer the following question by marking in the appropriate box	YES	NO	
12-1	If you plan to submit this form electronically, have you read the new Electronic Signature Policy?			

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedures

Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as Docusign or Echosign. Required elements and safeguards are as follows:

- The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.
- The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.
- Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

- 1) Submit the application in hard copy via the US Mail including original signatures.
- 2) Submit the application electronically via email and either,
- a. Include a copy of an adopted resolution that documents formal approval by the Board, or
- b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

Below is the certification and approval of the governing body By signing, each individual member is certifies that this Application for Exemption from Audit has been prepared consistent with Section 29-1-604, C.R.S., which states that a governmental agency with revenue and expenditures of \$750,000 or less must have an application prepared by an independent accountant with knowledge of governmental accounting; completed to the best of their knowledge and is accurate and true. Use additional pages if needed.

	Print the names of <u>ALL</u> members of the governing body below.	A <u>MAJORITY</u> of the members of the governing body must complete and sign in the column below.
	Full Name	i, bret Hall , attest that I am a duly elected or appointed board member, and that I have
1	Bret Hall	personally reviewed and application for exemption from audit. Signed Date: 4130 2023 My term Expires: 5 2025
	Full Name	An extra about a second control of the control of t
•		I,
	John Hall	Signed Date: 4/30/1005 My term Expires: 5/2023
	Full Name	I,, attest that I am a duly elected or appointed board member, and that I have
3		personally reviewed and approve this application for exemption from audit. Signed Date:
		My term Expires:
	Full Name	I,, attest that I am a duly elected or appointed board member, and that I have
d		personally reviewed and approve this application for exemption from audit. Signed
		My term Expires:
	Full Name	I,, attest that I am a duly elected or appointed board member, and that I have
		personally reviewed and approve this application for exemption from audit. Signed
		My term Expires:
	Full Name	ı,, attest that I am a duly elected or appointed board member, and that I have
6		personally reviewed and approve this application for exemption from audit. Signed Date:
		My term Expires:
	Full Name	I,, attest that I am a duly elected or appointed board member, and that I have
7		personally reviewed and approve this application for exemption from audit. Signed
		Signed Date: