#### **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 CHECKLIS 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 the OSA? Time to File requests, Audited Financial Statements, and more! See the link below. Has the application been PERSONALLY reviewed and approved by the governing body? Are all sections of the form complete, including responses to all of the questions? OSA LG Web Portal Did you include any relevant explanations for unusual items in the appropriate spaces at the end of each section? Will this application be submitted via Fax or Email? If yes, have you read and understand the new Electronic Signature Policy? See here new policy --or--Have you included a resolution? Does the resolution state that the governing body PERSONALLY reviewed and approved the resolution in an open public meeting? Π Has the resolution been signed by a MAJORITY of the governing 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 SIGNATURES from the MAJORITY of the governing body? FILING METHODS **NEW METHOD!** WEB PORTAL: Reigster and submit your Applications at our new portal: https://apps.leg.co.gov/osa/lg MAIL: Office of the State Auditor Local Government Audit Division 1525 Sherman St., 7th Floor Denver, CO 80203 FAX: 303-869-3061 EMAIL: osa.lg@state.co.us QUESTIONS? 303-869-3000 IMPORTANT! All Applications for Exemption from Audit are subject to review and approval by the Office of the State Auditor. 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 3 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.

### APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

	Edito / Ditai							
NAME OF GOVERNMENT	Highland Park Metropolitan District	For the Year Ended						
ADDRESS	7995 E Prentice Ave, Suite 103E, Greenwood Village, CO 80111	12/31/2020						
		or fiscal year ended:						
CONTACT PERSON	Sue Blair							
PHONE	303-381-4960							
EMAIL	sblair@crsofcolorado.com							
FAX	303-381-4961	3-381-4961						
	CERTIFICATION OF PREPARER							
		that the fulfit Law requires that a pareop						
I certify that I am an independent account	ant with knowledge of governmental accounting and that the information in the Application is complete and accurate to the best of my knowledge. I am awa	are that the Audit Law requires that a person						
independent of the entity complete the ap	plication if revenues or expenditure are at least \$100,000 but not more than \$750,000, and that independent means someone who is separate from the entity.							
NAME:	Joan Beans							
TITLE	Accountant							
FIRM NAME (if applicable)	Community Resource Services of Colorado							
ADDRESS	7995 E Prentice Ave, Suite 103E, Greenwood Village, CO 80111							
PHONE	303-381-4960							
DATE PREPARED	2/4/2021							
RELATIONSHIP TO ENTITY	Accountant							

#### RELATIONSHIP TO ENTITY Acc PREPARER (SIGNATURE REQUIRED)

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toan Bears

Has the entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status during the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-104 (3), C.R.S.]

YES NO If Yes, da

If Yes, date filed:

### PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

#### \* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

NOTE: At	tach additional sheets as necessary.	Heaters	Governmental Fu	nds		Proprietary/Fi	duciary Funds	
	Description		General	Gapital	Description	Fund	Fund	Please use this space to provide explanation of any
iLine #	DESCRIPTION		General	eapria				items on this page
Jacon and a state of the state	Assets			4	Assets			
1-1	Cash & Cash Equivalents	\$	10,540 \$	-		,	\$ -	
1-2	Investments	\$	552,445 \$	1,067,424			\$ -	
1-3	Receivables	\$	2,809 \$	-			\$ -	
1-4	Due from Other Entities or Funds	\$	- \$	-	Due from Other Entities or Funds		\$ -	
	All Other Assets [specify]				Other Current Assets	\$ -	\$ -	
1-5	Property Taxes Receivable	\$	564,657 \$	-	Total Current Assets	\$-	\$ -	
1-6	Prepaids	\$	8,709 \$	-	Capital Assets, net (from Part 6-4)	\$ -	\$ -	
1-7		\$	- \$	-	Other Long Term Assets [specify]	\$-	\$-	
1-8		\$	- \$	-	-	\$-	\$-	
1-9		\$	- \$	-		\$ -	\$ -	
1-10		\$	- \$	-		\$-	\$ -	
1-10	(add lines 1-1 through 1-10) TOTAL ASSETS		1,139,160 \$	1,067,424	(add lines 1-1 through 1-10) TOTAL ASSETS	\$-	\$ -	
1-12	TOTAL DEFERRED OUTFLOWS OF RESOURCES		- \$	-	TOTAL DEFERRED OUTFLOWS OF RESOURCES	\$ -	\$ -	
1-12	TOTAL ASSETS AND DEFERRED OUTFLOWS		1,139,160 \$	1,067,424	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$-	\$ -	
	Liabilities	¢			Liabilities			
1-14	Accounts Payable	\$	8,494 \$	-	Accounts Payable	\$-	\$ -	
1-15	Accrued Payroll and Related Liabilities	\$	491 \$	-	Accrued Payroll and Related Liabilities	\$-	\$-	
1-16	Accrued Interest Payable	\$	- \$	-	Accrued Interest Payable	\$-	\$ -	
1-17	Due to Other Entities or Funds	\$	- \$	-	Due to Other Entities or Funds	\$ -	\$ -	
1-18	All Other Current Liabilities	\$	- \$	-	All Other Current Liabilities	\$-	\$ -	
1-19	TOTAL CURRENT LIABILITIES		8,985 \$	-	TOTAL CURRENT LIABILITIES	\$-	\$ -	
1-20	All Other Liabilities [specify]	\$	- \$	-	Proprietary Debt Outstanding (from Part 4-4)	\$-	\$ -	*
1-21	Security Deposit	\$	200 \$	-	Other Liabilities [specify]:	\$ -	\$ -	
1-21	ocounty beposit	\$	- \$	-	1	\$ -	\$ -	
1-22		\$	- \$	-		\$ -	\$ -	
1-24		\$	- \$	-		\$ -	\$ -	
1-25		\$	- \$	-		\$ -	\$ -	
1-25		\$	- \$			\$ -	\$ -	
1-20		\$	- \$			\$ -	\$ -	
1-27	(add lines 1-19 through 1-27) TOTAL LIABILITIES		9,185 \$		(add lines 1-19 through 1-27) TOTAL LIABILITIES	\$-	\$ ~	
1-20	TOTAL DEFERRED INFLOWS OF RESOURCES	3665	564,657 \$		TOTAL DEFERRED INFLOWS OF RESOURCES		\$ -	1
1-29	Fund Balance	γ	304,037   \$		Net Position	· · · · · · · · · · · · · · · · · · ·	1 +	1
1 20	Nonspendable Prepaid	\$	- \$		Net Investment in Capital Assets	\$ -	\$ -	1
	Nonspendable Inventory	\$	- \$			1.7	. <u>1_7</u>	<u>.</u>
		\$	18,400 \$		Emergency Reserves	\$ -	\$ -	]
1-32	Restricted [TABOR]	\$	- \$	1.067.424	Other Designations/Reserves		\$ -	-
1-33	Committed [Capital Projects]	\$	- \$	1,007,424	Restricted		\$ -	~
1-34	Assigned [specify]	\$	546,918 \$		Undesignated/Unreserved/Unrestricted	1	\$ -	-
1-35	Unassigned:		J40,910 \$		Add lines 1-30 through 1-35		*	4
1-36	Add lines 1-30 through 1-3				Add lines 1-30 through 1-35 This total should be the same as line 3-33			
	This total should be the same as line 3-33 TOTAL FUND BALANCE				TOTAL NET POSITION		•	
			565,318 \$	1,067,424			\$ -	-
1-37	Add lines 1-28, 1-29 and 1-30	6516			Add lines 1-28, 1-29 and 1-36			
	This total should be the same as line 1-1:				This total should be the same as line 1-13 TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET			
	TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND BALANCI	1			POSITION	¢	¢	
		3	1,139,160 \$	1,067,424		- <del>-</del>	\$ -	1

## PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		G	overnmei	ntal Funds			Proprietary	/Fiduciary Funds	Please use this spac
Witte #	Description	Gene	aral	Gapital	[	Description	Fund <sup>a</sup>	Funet	provide explanation
	Tax Revenue					Tax Revenue			items on this page
2-1	Property [include mills levied in Question 10-6]	\$	569,070	\$	-	Property [include mills levied in Question 10-6]	\$	- \$	-
2-2	Specific Ownership	\$	40,685	\$	-	Specific Ownership	\$	- \$	-
2-3	Sales and Use Tax	\$	-	\$	-	Sales and Use Tax	\$	- \$	-
2-4	Other Tax Revenue [specify]:	\$	-	\$	-	Other Tax Revenue [specify]:	\$	- \$	-
2-5		\$	-	\$	-		\$	- \$	-
2-6		\$	-	\$	-		\$	- \$	-
2-7		\$	-	\$	-		\$	- \$	-
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE		609,755	\$	-	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$	- \$	-
2-9	Licenses and Permits	\$	-	\$	-	Licenses and Permits	\$	- \$	-
2-10	Highway Users Tax Funds (HUTF)	\$	-	\$	-	Highway Users Tax Funds (HUTF)	\$	- \$	-
2-11	Conservation Trust Funds (Lottery)	\$	-	\$	-	Conservation Trust Funds (Lottory)	\$	- \$	-
2-12	Community Development Block Grant	\$	-	\$	-	Community Development Block Grant	\$	- \$	-
2-13	Fire & Police Pension	\$	-	\$	-	Fire & Police Pension	\$	- \$	<u></u>
2-14	Grants	\$	-	\$	-	Grants	\$	- \$	-
2-15	Donations	\$	-	\$	-	Donations	\$	- \$	-
2-16	Charges for Sales and Services	\$	-	\$	-	Charges for Sales and Services	\$	- \$	-
2-17	Rental Income	\$	-	\$	-	Rental Income	\$	- \$	-
2-18	Fines and Forfeits	\$	-	\$	-	Fines and Forfeits	\$	- \$	-
2-19	Interest/Investment Income	\$	3,414	\$	2,537	Interest/Investment Income	\$	- \$	-
2-20	Tap Fees	\$	-	\$	-	Tap Fees	\$	- \$	-
2-21	Proceeds from Sale of Capital Assets	\$	-	\$	-	Proceeds from Sale of Capital Assets	\$	- \$	
2-22	All Other [specify]:	\$	-	\$	-	All Other [specify]:	\$	- \$	-
2-23		\$	-	\$	-		\$	- \$	-
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES		613,169	\$	2,537	Add lines 2-8 through 2-23 TOTAL REVENUES		- \$	-
	Other Financing Sources					Other Financing Sources			
2-25	Debt Proceeds	\$	-	\$	-	Debt Proceeds	\$	- \$	-
2-26	Developer Advances	\$	-	\$	-	Developer Advances	\$	- \$	-
2-27	Other [spocify]:	\$	-	\$	-	Other [specify]:	\$	- \$	-
2-28	Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES			s		Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES		- \$	GRAND TOTAL
2-29	Add lines 2-24 and 2-28	1	-			Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES			
	TOTAL REVENUES AND OTHER FINANCING SOURCES	\$	613,169	\$	2,537	han \$750,000 - <u>STOP.</u> You may not use this form. An audit i		- \$	- <b>S</b>

# PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES

C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.		G	iovernmer	ital Fun	ds			iduciary Funds	Please use this space to
Line #	Description	Gent	eral	0	apitai	Description	Frand	Fund	provide explanation of any
Contractory of the second s	Expenditures					Expenses	-		items on this page
3-1	General Government		277,148		23,536	Contrar operating at termine the set	+	\$ -	
3-2	Judicial	\$		\$	-			\$ -	-
3-3	Law Enforcement	\$		\$	-			\$ -	-
3-4	Fire	\$	- [		-		*	\$ -	4
3-5	Highways & Streets	\$		\$	-	difford benefite	•	\$ -	-
3-6	Solid Waste	\$	-	\$	-	heatense		- <u>\$</u> -	-
3-7	Contributions to Fire & Police Pension Assoc.	\$		\$	-	,	<u>\$</u> -		-
3-8	Health	\$	-		-	inspan and instances	\$		-
3-9	Culture and Recreation	\$	-	\$	-		·····	- \$ -	4
3-10	Transfers to other districts	\$	-		-			\$ -	-
3-11	Other [specify]:	\$		\$	-		-	\$ -	-
3-12	County Treasurer fees	\$	8,533		-		+	- \$ -	-
3-13	Repairs and maintenance	\$	-		-			- \$ -	-
3-14	Capital Outlay	\$	-	\$	-	copinal cancel	\$	- \$ -	
	Debt Service					Debt Service			7
3-15	Principal	\$		\$	-	i interper		- \$ -	-
3-16	Interest	\$	-	\$	-		*	- \$ -	-
3-17	Bond Issuance Costs	\$	-		-			- \$ -	-
3-18	Developer Principal Repayments	\$	-		-		*	- \$ -	-
3-19	Developer Interest Repayments	\$	-	\$	-	Dereicher mereinen sin einer		- \$ -	-
3-20	All Other [specify]:	\$	-		-	· · · · · · · · · · · · · · · · · · ·		- \$ -	
3-21		\$	-	\$	-		\$	- \$ -	GRAND TOTAL
3-22	Add lines 3-1 through 3-21 TOTAL EXPENDITURES	\$	285,681	\$	23,536	Add lines 3-1 through 3-21 TOTAL EXPENSES	*	- \$ -	\$ 309,21
3-23	Interfund Transfers (In)			\$	(400,000)	Net Interfund Transfers (In) Out	+	- \$ -	
3-24	Interfund Transfers Out	\$	400,000	\$	-	terre Feleren berken of the second seco		- \$ -	_
3-25	Other Expenditures (Revenues):	\$	-	\$	-	Depreciation	-	-  \$ -	_
3-26	-	\$	-	\$	-	Other Financing Sources (Uses) (from line 2-28)		- \$ -	_
3-27		\$	-	\$	-	Capital Outlay (from line 3-14)		- \$ -	
3-28		\$	-	\$	-	Debt Principal (from line 3-15, 3-18)	\$	- \$ -	4
3-29	(Add lines 3-23 through 3-28) TOTAL TRANSFERS AND OTHER EXPENDITURES		400.000	\$	(400.000)	(Line 3-26, plus line 3-27, less line 3-24, less line 3-25) TOTAL GAAP RECONCILING ITEMS	\$	- \$ -	
3-30	Excess (Deficiency) of Revenues and Other Financing	°			(	Net Increase (Decrease) in Net Position			
	Sources Over (Under) Expenditures					Line 2-29, less line 3-22, plus line 3-29, plus line 3-23, less			
	Line 2-29, less line 3-22, plus line 3-29	\$	(72,512)	\$	379,001	line 3-24	\$	- \$ -	
3-31	Fund Balance, January 1 from December 31 prior year					Net Position, January 1 from December 31 prior year			
/	report	\$	637,830	\$	688,423	report	\$	- \$	4
3-32	Prior Period Adjustment (MUST explain)	\$	_	\$	-	Prior Period Adjustment (MUST explain)	\$	- \$ -	
	Fund Balance, December 31		-	¥		Net Position, December 31			
3-33	Sum of Line 3-30, 3-31, and 3-32					Line 3-30 plus líne 3-31			
	This total should be the same as line 1-36.	\$	565,318	\$	1,067,424	This total should be the same as line 1-36.	\$	- \$ -	
	ND TOTAL EXPENDITURES for all funds (Line 3-22) are GRI 59-3000 for assistance.	EATER tha	n \$750,00	) - STO	P. You may	not use this form. An audit may be required. See Section 2	9-1-604, C.R.S., or	contact the OSA Lo	cal Government Division at

		- DEBT OUTST	ANDING	ISSUED	AND RETIRE	D
	Please answer the following questions by marking the a			YES	NO	Please use this space to provide any explanations or comments:
4-1	Does the entity have outstanding debt?					
4-2	Is the debt repayment schedule attached? If no, MUST explain:					
				_		
4-3	Is the entity current in its debt service payments? If no, MUST explain:				ц.	
4-4	Please complete the following debt schedule, if applicable: (please only include	Outstanding at Is	sued during	Retired during	Outstanding at year-	0.00
	principal amounts)	beginning of year"	year	year	Conception of the year.	
	General obligation bonds	\$ - \$		-  \$ -	\$	-
	Revenue bonds	\$ - \$			\$	-
	Notes/Loans	\$ - \$			\$	
	Leases	\$ - \$			\$	<del>_</del>
	Developer Advances	\$ - \$ \$ - \$			\$ \$	-
	Other (specify):				\$	
		*must agree to prior year en		- 1	<b>_</b>	
	Please answer the following questions by marking the appropriate boxes.			YES	NO	
-5	Does the entity have any authorized, but unissued, debt?			I		
es:	How much?	\$ 140,000				
	Date the debt was authorized:	11/4/1997			Q	
-6	Does the entity intend to issue debt within the next calendar year? How much?	\$ -		ليسا		
-7	Does the entity have debt that has been refinanced that it is still responsible				J	
	What is the amount outstanding?	\$ -				
1-8	Does the entity have any lease agreements?				2	
/es	What is being leased?					
	What is the original date of the lease?					
	Number of years of lease?	······				
	Is the lease subject to annual appropriation? What are the annual lease payments?	\$ -				
920	What are the annual lease payments :	PART 5 - CAS			ENTR	
		PART 0- CAC				
	Please provide the entity's cash deposit and investment balances.			AMOUNT \$ 10,540	TOTAL	Please use this space to provide any explanations or comments:
-1				\$ 10,540 \$ -		
-2	Certificates of deposit	T(0) (AL 0/A	SH DEPOSIT			540
	Investments (if investment is a mutual fund, please list underlying investments):		han an a	æ.		
				\$ 1,619,869		]
	ColoTrust			\$ 1,019,003		
5-3					•	
				\$ .		
		TOTAL	INVESTMENT	(S)	\$ 1,619	869
		TOTAL CASH AND	INVESTMENT	íS.	\$ 1,630	409
	Please answer the following question by marking in the appropriate box		YES	NO	N/A	
	Are the entity's Investments legal in accordance with Section 24-75-601, et. s	eg., C.R.S.?	V		· 🗆	
	Are the entity's deposits in an eligible (Public Deposit Protection Act) public	• •	J			
5-5			1.21	1.1	1.1	

	PA	ART 6 - CAPITAL A	ASSETS		
	Please answer the following question by marking in the appropriate box		YES	NO	Please use this space to provide any explanations or comments:
6-1	Does the entity have capitalized assets?				
6-2	Has the entity performed an annual inventory of capital assets in accordance with Section 2 MUST explain:	29-1-506, C.R.S.? If no,	V		

6-3	Complete the following Capital Assets table for GOVERNMENTAL FUNDS:	been	alance - ining of the year*	Additions	Deletions	Year-End Balance
	Land	\$	-	\$ -	\$ -	\$ -
	Buildings	\$	-	\$ -	\$ -	\$ -
	Machinery and equipment	\$	12,848	\$ -	\$ -	\$ 12,848
	Furniture and fixtures	\$	1,742,684	\$ -	\$ -	\$ 1,742,684
	Infrastructure	\$	512,735	\$ **	\$ 	\$ 512,735
	Construction In Progress (CIP)	\$	-	\$ -	\$ -	\$ -
	Other (explain):	\$	-	\$ -	\$ ~	\$ -
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$	(1,959,063)	\$ (44,033)	\$ -	\$ (2,003,096)
	TOTAL	\$	309,204	\$ (44,033)	\$ -	\$ 265,171
		(II)	alance :			
6-4	Complete the following Capital Assets table for PROPRIETARY FUNDS:	begir	uning of the year*	Additions	Deletions	Year-End Balance
	Land	\$	-	\$ -	\$ -	\$ -
	Buildings	\$	-	\$ -	\$ -	\$ -
	Machinery and equipment	\$	-	\$ -	\$ -	\$ -
	Furniture and fixtures	\$	-	\$ -	\$ -	\$ -
	Infrastructure	\$	-	\$ -	\$ -	\$ -
	Construction In Progress (CIP)	\$	-	\$ -	\$ -	\$ -
	Other (oxplain):	\$	-	\$ -	\$ -	\$ -
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$	-	\$ -	\$ -	\$ -
	TOTAL	\$	-	\$ -	\$ -	\$ -

\*must agree to prior year ending balance

	P/	ART 7 - PENSION INF	ORMATIC	ON	
	Please answer the following question by marking in the appropriate box		YES	NO	Please use this space to provide any explanations or comments:
7-1	Does the entity have an "old hire" firemen's pension plan?			I	
7-2	Does the entity have a volunteer firemen's pension plan?			J	
If yes:	Who administers the plan?				
	Indicate the contributions from:				
	Tax (property. SO, sales, etc.):	\$ -			
	State contribution amount:	\$ -			
	Other (gifts, donations, ctc.):	\$			
		TOTAL \$ -			
	What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?	\$ -			

	PART 8 - BI	JDGET IN	FORMATION		
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:
Did the entity file a current year budget with the Department of Local Affairs, i	n accordance with	Ø			
Did the entity pass an appropriations resolution in accordance with Section 2	9-1-108 C.R.S.?	J			
<sup>0-2</sup> If no, MUST explain:				لسما	
If yes: Please indicate the amount budgeted for each fund for the year reported			,		
Fund Name	Budgeted Expenditu				
General Fund Capital Repair and Replacement Fund	\$ \$	774,982 185,000	-		
	\$	-	-		
	\$	-			
	9 - TAX PAYE	R'S BILL			
Please answer the following question by marking in the appropriate box	- Article X. Contine 20	(5)12	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 government from the 3 percent emergency reserve requirement. All government	on, Article A, Section 20	(J)]?			
government from the 3 percent emergency reserve requirement. An governme					
	PART 10 - G	ENERAL I	NFORMATIC	DN	
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?				R	
If yes: Date of formation:					
Date of formation:			]		
10-2 Has the entity changed its name in the past or current year?					
			7		
If Yes: NEW name			~		
PRIOR name					
10-3 Is the entity a metropolitan district?			_ _		
10-4 Please indicate what services the entity provides:			_		
Streets, safety inspection, transportation, parks & recreation, television relay & tran		itrol			
10-5 Does the entity have an agreement with another government to provide service	ces?				
If yes: List the name of the other governmental entity and the services provided:			7		
10-6 Does the entity have a certified mill levy?					
If yes: Please provide the number of mills levied for the year reported (do not enter the second Redemnition mills)			Г		
Bond Redemption mil General/Other mil			-		i
Total mil	8.790	)	1		
Please use this space	ce to provide any add	litional explana	tions or comments	s not previously	ncluded:

				OSA USE ONLY			
ntity Wide:		General Fund		Governmental Funds		Notes	
nrestricted Cash & Investments	\$	1,630,409 Unrestricted Fund Bala	n \$	546,918 Total Tax Revenue	\$	609,755	
urrent Liabilities	s	8,985 Total Fund Balance	\$	565,318 Revenue Paying Debt Service	\$		
eferred Inflow	ŝ	564,657 PY Fund Balance	\$	637,830 Total Revenue	S	615,706	
elefted filliow		Total Revenue	s	613,169 Total Debt Service Principal	S	• •	
		Total Expenditures	S	285,681 Total Debt Service Interest	S	•	
overnmental		Interfund In	S				
otal Cash & Investments	S	1,630,409 Interfund Out	\$	400,000 Enterprise Funds			
ransfers in	S	- Proprietary		Net Position	\$		
ransfers Out	s	- Current Assets	S	<ul> <li>PY Net Position</li> </ul>	5	· · · · · · · · · · · · · · · · · · ·	
roperty Tax	ŝ	569,070 Deferred Outflow	S	- Government-Wide			
ebt Service Principal	ę	- Current Liabilities	S	- Total Outstanding Debt	\$		
	ŝ	309,217 Deferred Inflow	Ś	<ul> <li>Authorized but Unissued</li> </ul>	S	140,000	
otal Expenditures	ę	- Cash & Investments	ŝ	<ul> <li>Year Authorized</li> </ul>	1	1/4/1997	
otal Developer Advances otal Developer Repayments	S	- Principal Expense	5	•			1011110

PART 12 - GOVERNING B	ODY APPF	ROVAL	
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 certifying they are a duly elected or appointed officer of the local government. Governing members may be verified. Also by signing, the individual member is certifying they are a duly elected or appointed officer of the local government. Governing members may be verified. Also by signing, the individual member 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.
1	Full Name Michael Law	I, Michael Law, 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
2	Full Name Sara Kosted	I, Sara Kosted, 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 Date: Date: Date:
3	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 Date: My term Expires:
4	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 Date: My term Expires:
5	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 Date: My term Expires:
6	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 Date: My term Expires:
7	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 Date: My term Expires: