

**APPLICATION FOR EXEMPTION FROM AUDIT
LONG FORM**

1820.00

For the Year Ended
12/31/2016
or fiscal year ended:

NAME OF GOVERNMENT: HSS-PARSHALL FIRE PROTECTION DISTRICT
 ADDRESS: PO BOX 45
 HSS CO 80451
 CONTACT PERSON: MARK KRIEG
 PHONE: 9708879307
 EMAIL: markk@krieginc.com
 FAX: 9707971118

CERTIFICATION OF PREPARER

I certify that I am an independent accountant with knowledge of governmental accounting and that the information in the Application is complete and accurate to the best of my knowledge. I am aware that the Audit Law requires that a person independent of the entity complete the application 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: MARK KRIEG
 TITLE: ACCOUNTANT
 FIRM NAME (if applicable):
 ADDRESS: PO BOX 1003 GRANBY CO 80446
 PHONE: 9708879307
 DATE PREPARED (Must be Completed prior to Board approval): 3/7/2017
 RELATIONSHIP TO ENTITY: ACCOUNTANT

PREPARER (SIGNATURE REQUIRED)

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, date filed:
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

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RECEIVED
By Justin L. Smith at 1:12 pm, Mar 14, 2017

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page	
		Fund*	Fund*		Fund*	Fund*		
Assets								
1-1	Cash & Cash Equivalents	\$	20,671 \$	-	Cash & Cash Equivalents	\$	- \$	-
1-2	Investments	\$	30,765 \$	-	Investments	\$	- \$	-
1-3	Receivables	\$	1,000 \$	-	Receivables	\$	- \$	-
1-4	Due from Other Entities or Funds	\$	- \$	-	Due from Other Entities or Funds	\$	- \$	-
	All Other Assets (specify)				Other Current Assets	\$	- \$	-
1-5	PRE-PAID EXPENSES	\$	6,593 \$	-	Total Current Assets	\$	- \$	-
1-6	DEPRECIABLE ASSETS	\$	42,118 \$	-	Capital Assets, net (from Part 4)	\$	- \$	-
1-7		\$	- \$	-	Other Long Term Assets (specify)	\$	- \$	-
1-8		\$	- \$	-		\$	- \$	-
1-9		\$	- \$	-		\$	- \$	-
1-10		\$	- \$	-		\$	- \$	-
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS	\$	101,147 \$	-	(add lines 1-1 through 1-10) TOTAL ASSETS	\$	- \$	-
1-12	TOTAL DEFERRED OUTFLOWS OF RESOURCES	\$	- \$	-	TOTAL DEFERRED OUTFLOWS OF RESOURCES	\$	- \$	-
1-13	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$	101,147 \$	-	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$	- \$	-
Liabilities								
1-14	Accounts Payable	\$	2,111 \$	-	Accounts Payable	\$	- \$	-
1-15	Accrued Payroll and Related Liabilities	\$	1,090 \$	-	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	\$	3,201 \$	-	TOTAL CURRENT LIABILITIES	\$	- \$	-
1-20	All Other Liabilities (specify)	\$	- \$	-	Proprietary Debt Outstanding (from Part 4-4)	\$	- \$	-
1-21		\$	- \$	-	Other Liabilities (specify)	\$	- \$	-
1-22		\$	- \$	-		\$	- \$	-
1-23		\$	- \$	-		\$	- \$	-
1-24		\$	- \$	-		\$	- \$	-
1-25		\$	- \$	-		\$	- \$	-
1-26		\$	- \$	-		\$	- \$	-
1-27		\$	- \$	-		\$	- \$	-
1-28	(add lines 1-19 through 1-27) TOTAL LIABILITIES	\$	3,201 \$	-	(add lines 1-19 through 1-27) TOTAL LIABILITIES	\$	- \$	-
1-29	TOTAL DEFERRED INFLOWS OF RESOURCES	\$	- \$	-	TOTAL DEFERRED INFLOWS OF RESOURCES	\$	- \$	-
Fund Balance								
1-30	Nonspendable Prepaid	\$	- \$	-	Net Position			
1-31	Nonspendable Inventory	\$	- \$	-	Net Investment in Capital Assets	\$	- \$	-
1-32	Restricted (specify)	\$	- \$	-	Emergency Reserves	\$	- \$	-
1-33	Committed (specify)	\$	- \$	-	Other Designations/Reserves	\$	- \$	-
1-34	Assigned (specify)	\$	- \$	-	Restricted	\$	- \$	-
1-35	Unassigned	\$	97,946 \$	-	Undesignated/Unreserved/Unrestricted	\$	- \$	-
1-36	Add lines 1-30 through 1-35 This total should be the same as line 3-33 TOTAL FUND BALANCE	\$	97,946 \$	-	Add lines 1-30 through 1-35 This total should be the same as line 3-33 TOTAL NET POSITION	\$	- \$	-
1-37	Add lines 1-28, 1-29 and 1-36 This total should be the same as line 1-13 TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND BALANCE	\$	101,147 \$	-	Add lines 1-28, 1-29 and 1-36 This total should be the same as line 1-13 TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET POSITION	\$	- \$	-

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		Fund*	Fund*		Fund*	Fund*	
	Tax Revenue			Tax Revenue			
2-1	Property	\$ 109,634	\$ -	Property	\$ -	\$ -	
2-2	Specific Ownership	\$ 6,788	\$ -	Specific Ownership	\$ -	\$ -	
2-3	Sales and Use Tax	\$ -	\$ -	Sales and Use Tax	\$ -	\$ -	
2-4	Other Tax Revenue (specify)	\$ -	\$ -	Other Tax Revenue (specify)	\$ -	\$ -	
2-5	DELINQUENT INTEREST & TAXES	\$ 270	\$ -		\$ -	\$ -	
2-6		\$ -	\$ -		\$ -	\$ -	
2-7		\$ -	\$ -		\$ -	\$ -	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ 116,692	\$ -	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 (Lottery)	\$ -	\$ -	
2-12	Community Development Block Grant	\$ -	\$ -	Community Development Block Grant	\$ -	\$ -	
2-13	Fire & Police Pension	\$ -	\$ 4,500	Fire & Police Pension	\$ -	\$ -	
2-14	Grants	\$ 190,571	\$ -	Grants	\$ -	\$ -	
2-15	Donations	\$ 2,524	\$ -	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	\$ 78	\$ 11,757	Interest/Investment Income	\$ -	\$ -	
2-20	Tap Fees	\$ -	\$ -	Tap Fees	\$ -	\$ -	
2-21	Developer Advances	\$ -	\$ -	Developer Advances	\$ -	\$ -	
2-22	All Other (specify)	\$ -	\$ -	All Other (specify)	\$ -	\$ -	
2-23	STATE CONTRIBUTION	\$ -	\$ 8,100		\$ -	\$ -	
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ 309,865	\$ 24,357	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ -	\$ -	
	Other Financing Sources			Other Financing Sources			
2-25	Debt Proceeds	\$ -	\$ -	Debt Proceeds	\$ -	\$ -	
2-26	Proceeds from Sale of Capital Assets	\$ -	\$ -	Proceeds from Sale of Capital Assets	\$ -	\$ -	
2-27	Other (specify)	\$ -	\$ -	Other (specify)	\$ -	\$ -	
2-28	Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES	\$ -	\$ -	Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES	\$ -	\$ -	GRAND TOTALS
2-29	Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ 309,865	\$ 24,357	Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ -	\$ -	\$ 334,222

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 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		Fund*	Fund*		Fund*	Fund*	
Expenditures				Expenditures			
3-1	General Government	\$ -	\$ -	General Operating & Administrative	\$ -	\$ -	
3-2	Judicial	\$ -	\$ -	Salaries	\$ -	\$ -	
3-3	Law Enforcement	\$ -	\$ -	Payroll Taxes	\$ -	\$ -	
3-4	Fire	\$ 74,373	\$ -	Contract Services	\$ -	\$ -	
3-5	Highways & Streets	\$ -	\$ -	Employee Benefits	\$ -	\$ -	
3-6	Solid Waste	\$ -	\$ -	Insurance	\$ -	\$ -	
3-7	Contributions to Fire & Police Pension Assoc.	\$ 4,500	\$ -	Accounting and Legal Fees	\$ -	\$ -	
3-8	Health	\$ -	\$ -	Repair and Maintenance	\$ -	\$ -	
3-9	Culture and Recreation	\$ -	\$ -	Supplies	\$ -	\$ -	
3-10	Other (specify)	\$ -	\$ -	Utilities	\$ -	\$ -	
3-11	BENEFITS	\$ -	\$ 15,000	Contributions to Fire & Police Pension Assoc.	\$ -	\$ -	
3-12		\$ -	\$ -	Other (specify)	\$ -	\$ -	
3-13		\$ -	\$ -		\$ -	\$ -	
3-14	Capital Outlay	\$ -	\$ -	Capital Outlay	\$ -	\$ -	
	Debt Service			Debt Service			
3-15	Principal	\$ -	\$ -	Principal	\$ -	\$ -	
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)	\$ -	\$ -	
3-21		\$ -	\$ -		\$ -	\$ -	
3-22	Add lines 3-1 through 3-21 TOTAL EXPENDITURES	\$ 78,873	\$ 15,000	Add lines 3-1 through 3-21 TOTAL EXPENDITURES	\$ -	\$ -	GRAND TOTAL \$ 93,873
3-23	Interfund Transfers (In)	\$ -	\$ -	Net Interfund Transfers (In)	\$ -	\$ -	
3-24	Interfund Transfers out	\$ -	\$ -	Net Interfund Transfers out	\$ -	\$ -	
3-25	Other Expenditures (Revenues)	\$ -	\$ -	Depreciation	\$ -	\$ -	
3-26	CAPITAL OUTLAY	\$ 303,805	\$ -	Other Financing Sources (Uses) (from line 2-28)	\$ -	\$ -	
3-27		\$ -	\$ -	Capital Outlay (from line 3-14)	\$ -	\$ -	
3-28		\$ -	\$ -	Debt Principal (from line 3-15)	\$ -	\$ -	
3-29	(Add lines 3-23 through 3-28) TOTAL TRANSFERS AND OTHER EXPENDITURES	\$ 303,805	\$ -	(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 Sources Over (Under) Expenditures Line 2-29, less line 3-22, plus line 3-29	\$ (72,813)	\$ 9,357	Net Increase (Decrease) in Net Position Line 2-29, less line 3-22, plus line 3-29, plus line 3-23, less line 3-24	\$ -	\$ -	
3-31	Fund Balance, January 1 from December 31 prior year report	\$ 170,759	\$ 233,948	Net Position, January 1 from December 31 prior year report	\$ -	\$ -	
3-32	Prior Period Adjustment (MUST explain)	\$ -	\$ -	Prior Period Adjustment (MUST explain)	\$ -	\$ -	
3-33	Fund Balance, December 31 Sum of Line 3-30, 3-31, and 3-32 This total should be the same as line 1-36.	\$ 97,946	\$ 243,305	Net Position, December 31 Line 3-30 plus line 3-31 This total should be the same as line 1-36.	\$ -	\$ -	

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.

PART 4 - DEBT OUTSTANDING, ISSUED, AND RETIRED

Please answer the following questions by marking the appropriate boxes.		YES	NO
4-1	Does the entity have outstanding debt?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4-2	Is the debt repayment schedule attached? If no, MUST explain:	<input type="checkbox"/>	<input type="checkbox"/>
4-3	Is the entity current in its debt service payments? If no, MUST explain:	<input type="checkbox"/>	<input type="checkbox"/>
4-4	Please complete the following debt schedule, if applicable: (please only include principal amounts)	Outstanding at beginning of year	Issued during year
	General obligation bonds	\$ -	\$ -
	Revenue bonds	\$ -	\$ -
	Notes/Loans	\$ -	\$ -
	Leases	\$ -	\$ -
	Developer Advances	\$ -	\$ -
	Other (specify):	\$ -	\$ -
	TOTAL	\$ -	\$ -

Please use this space to provide any explanations or comments:

Please answer the following questions by marking the appropriate boxes.		YES	NO
4-5	Does the entity have any authorized, but unissued, debt?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	If yes: How much? \$ -		
	Date the debt was authorized:		
4-6	Does the entity intend to issue debt within the next calendar year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	If yes: How much? \$ -		
4-7	Does the entity have debt that has been refinanced that it is still responsible for?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	If yes: What is the amount outstanding? \$ -		
4-8	Does the entity have any lease agreements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If yes: What is being leased? WILDLAND TRUCK		
	What is the original date of the lease? 2/12/1992		
	Number of years of lease? ONE		
	Is the lease subject to annual appropriation?	<input type="checkbox"/>	<input type="checkbox"/>
	What are the annual lease payments? \$ 200		
4-9	Does the entity have a certified mill levy?	<input type="checkbox"/>	<input type="checkbox"/>
	If yes: Please provide the following mills levied for the year reported:		
	Bond Redemption 0.00		
	General/Other 0.00		
	TOTAL 0.00		

PART 5 - CASH AND INVESTMENTS

Please provide the entity's cash deposit and investment balances.		AMOUNT	TOTAL
5-1	YEAR-END Total of ALL Checking and Savings accounts	\$ 30,765	
5-2	Certificates of deposit	\$ -	
	TOTAL CASH DEPOSITS		\$ 30,765
	Investments (if investment is a mutual fund, please list underlying investments)		
5-3	MONEY MARKET ACCOUNT	\$ 20,670	
		\$ -	
		\$ -	
		\$ -	
	TOTAL INVESTMENTS		\$ 20,670
	TOTAL CASH AND INVESTMENTS		\$ 51,435

Please use this space to provide any explanations or comments:

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., C.R.S.?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5-5	Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq., C.R.S.)? If no, MUST explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART 6 - CAPITAL ASSETS

Please answer the following question by marking in the appropriate box	YES	NO
6-1 Does the entity have capitalized assets?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6-2 Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.? If no, MUST explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Please use this space to provide any explanations or comments:

6-3 Complete the following Capital Assets table for GOVERNMENTAL FUNDS:	Balance - beginning of the year	Additions	Deletions	Year-End Balance
Land	\$ -	\$ -	\$ -	-
Buildings	\$ 311,502	\$ 4,782	\$ -	316,284
Machinery and equipment	\$ 390,530	\$ 299,023	\$ -	689,553
Furniture and fixtures	\$ 2,872	\$ -	\$ -	2,872
Infrastructure	\$ -	\$ -	\$ -	-
Construction In Progress (CIP)	\$ -	\$ -	\$ -	-
Other (explain):	\$ -	\$ -	\$ -	-
Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	-
TOTAL	\$ 704,904	\$ 303,805	\$ -	1,008,709

6-4 Complete the following Capital Assets table for PROPRIETARY FUNDS:	Balance - beginning of the year	Additions	Deletions	Year-End Balance
Land	\$ -	\$ -	\$ -	-
Buildings	\$ -	\$ -	\$ -	-
Machinery and equipment	\$ -	\$ -	\$ -	-
Furniture and fixtures	\$ -	\$ -	\$ -	-
Infrastructure	\$ -	\$ -	\$ -	-
Construction In Progress (CIP)	\$ -	\$ -	\$ -	-
Other (explain):	\$ -	\$ -	\$ -	-
Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	-
TOTAL	\$ -	\$ -	\$ -	-

PART 7 - PENSION INFORMATION

Please answer the following question by marking in the appropriate box	YES	NO
7-1 Does the entity have an "old hire" firemen's pension plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7-2 Does the entity have a volunteer firemen's pension plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes: Who administers the plan?	FPPA	
Indicate the contributions from:		
Tax (property, SG, sales, etc.)	\$ 4,500	
State contribution amount	\$ 4,050	
Other (gifts, donations, etc.)	\$ -	
TOTAL	\$ 8,550	
What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?	\$ 250	

Please use this space to provide any explanations or comments:

PART 12 - GOVERNING BODY APPROVAL

Below is the certification and approval of the governing board. By signing the board member is certifying they are a duly elected or appointed officer of the local government. Governing board members may be verified. Also by signing, the board 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 all current governing board members below.

A MAJORITY of the governing board members must complete and sign in the column below.

Board Member	Print Board Member's 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: _____
1	JOE VRBAS	I, <u>Joseph Vrbas</u> , 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 <u>[Signature]</u> Date: <u>3/8/2017</u> My term Expires: <u>2018</u>
2	MIKE THOMPSON	I, <u>Michael Thompson</u> , 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 <u>[Signature]</u> Date: <u>3/8/17</u> My term Expires: <u>2018</u>
3	GEORGE DAVIS	I, <u>George F. Davis</u> , 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 <u>[Signature]</u> Date: <u>3/8/17</u> My term Expires: <u>2020</u>
4	ROD SALE	I, <u>ROD SALE</u> , 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 <u>[Signature]</u> Date: <u>3-8-2017</u> My term Expires: <u>2020</u>
5	ROB FIRTH	I, <u>Rob Firth</u> , 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 <u>[Signature]</u> Date: <u>3/9/17</u> My term Expires: <u>2018</u>
6		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		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: _____

**Original Signatures
Verified by**

Justin L. Smith

[Signature]

EXPLANATION FOR FUND BALANCE DIFFERENCE:

A PRIOR PERIOD ADJUSTMENT TO PENSION CONTRIBUTION EXPENSE (CR) AND PRE-PAID PENSION EXPENSE (DR) FOR \$4,050.00 HAD TO BE MADE TO 2014. THE ORIGINAL FINANCIAL REPORT SHOWED AN EXPENSE OF \$8,550.00 TO FUND THE PENSION FUND. IN 2015 HSS-PARSHALL RECEIVED THEIR STATE CONTRIBUTION FOR 2014 OF \$4,050.00. THE ENDING FUND BALANCE SHOULD HAVE BEEN \$186,779 INSTEAD OF \$182,729.

RESOLUTION/ORDINANCE FOR EXEMPTION FROM AUDIT

(Pursuant to Section 29-1-604, C.R.S.)

A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR FISCAL YEAR 2016 FOR THE **HSS-PARSHALL FIRE PROTECTION DISTRICT**, STATE OF COLORADO.

WHEREAS, the **BOARD** of **HSS-PARSHALL FIRE PROTECTION DISTRICT** wishes to claim exemption from the audit requirements of Section 29-1-603, C.R.S.; and

WHEREAS, Section 29-1-604, C.R.S., states that any local government where neither revenues nor expenditures exceed five hundred thousand dollars may, with the approval of the state auditor, be exempt from the provision of Section 29-1-603, C.R.S.; and

WHEREAS, neither revenues nor expenditures for **HSS-PARSHALL FIRE PROTECTION DISTRICT** exceeded \$750,000 for Fiscal Year 2015; and

WHEREAS, an application for exemption from audit for **HSS-PARSHALL FIRE PROTECTION DISTRICT** has been prepared by MARK KRIEG, an independent accountant with knowledge of governmental accounting; and


WHEREAS, said application for exemption from audit has been completed in accordance with regulations issued by the State Auditor.

NOW THEREFORE, be it resolved/ordained by the **BOARD** of the **HSS-PARSHALL FIRE PROTECTION DISTRICT** that the application for exemption from audit for **HSS-PARSHALL FIRE PROTECTION DISTRICT** for the fiscal year ended DECEMBER 31, 2016, has been personally reviewed and is hereby approved by a majority of the **BOARD** of the **HSS-PARSHALL FIRE PROTECTION DISTRICT**; that those members of the **BOARD** have signified their approval by signing below; and that this resolution shall be attached to, and shall become a part of, the application for exemption from audit of the **HSS-PARSHALL FIRE PROTECTION DISTRICT** for the fiscal year ended DECEMBER 31, 2016.

ADOPTED THIS 08TH day of MARCH, A.D. 2017



President



Secretary