

# APPLICATION FOR EXEMPTION FROM AUDIT

## SHORT FORM

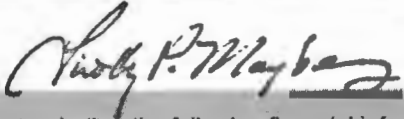
|                    |                              |                                                         |
|--------------------|------------------------------|---------------------------------------------------------|
| NAME OF GOVERNMENT | Town of Pitkin               | For the Year Ended<br>12/31/16<br>or fiscal year ended: |
| ADDRESS            | PO Box 9<br>Pitkin, CO 81241 |                                                         |
| CONTACT PERSON     | Sara Gibb                    |                                                         |
| PHONE              | 970-787-0968                 |                                                         |
| EMAIL              | thetownofpitkin@q.com        |                                                         |
| FAX                | 970-642-1089                 |                                                         |

### PART 1 - CERTIFICATION OF PREPARER

I certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to the best of my knowledge.

|                                            |                                                           |
|--------------------------------------------|-----------------------------------------------------------|
| NAME:                                      | Timothy P Mayberry                                        |
| TITLE                                      | Independent Accountant                                    |
| FIRM NAME (if applicable)                  | Holscher, Mayberry & Company, LLC                         |
| ADDRESS                                    | 8310 South Valley Highway, Suite 300, Englewood, CO 80112 |
| PHONE                                      | 303 993-2199                                              |
| DATE PREPARED                              |                                                           |
| (Must be prepared prior to Board approval) | 3/28/2017                                                 |

**PREPARER** (SIGNATURE REQUIRED)



Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types

**GOVERNMENTAL**  
(MODIFIED ACCRUAL BASIS)



**PROPRIETARY**  
(CASH OR BUDGETARY BASIS)



**E**

**RECEIVED**

By Justin L. Smith at 7:49 am, Mar 30, 2017

## PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

| Line# | Description                                              | Round to nearest Dollar | Please use this space to provide any necessary explanations |
|-------|----------------------------------------------------------|-------------------------|-------------------------------------------------------------|
| 2-1   | Ta Property                                              | \$ 19,951               |                                                             |
| 2-2   | Specific ownership                                       | \$ 1,113                |                                                             |
| 2-3   | Sales and use                                            | \$ 35,619               |                                                             |
| 2-4   | Other (specify):                                         | \$ 447                  |                                                             |
| 2-5   | Licenses and permits                                     | \$ 4,841                | Franchise Taxes                                             |
| 2-6   | Intergovernment Grants                                   | \$ 180                  | 446.54                                                      |
| 2-7   | Conservation Trust Funds (Lottery)                       | \$ 288                  | Mineral Leases                                              |
| 2-8   | Highway Users Tax Funds (HUTF)                           | \$ 8,403                | 2576.85                                                     |
| 2-9   | Other (specify):                                         | \$ 3,314                | Addtl MV                                                    |
| 2-10  | Charges for services                                     | \$ 1,200                | 737.50                                                      |
| 2-11  | Fines and forfeits                                       | \$ -                    |                                                             |
| 2-12  | Special assessments                                      | \$ -                    |                                                             |
| 2-13  | Investment income                                        | \$ 773                  |                                                             |
| 2-14  | Charges for utility services                             | \$ -                    |                                                             |
| 2-15  | Debt proceeds (should agree with line 4-4, column 2)     | \$ -                    |                                                             |
| 2-16  | Lease proceeds                                           | \$ -                    |                                                             |
| 2-17  | Developer Advances received (should agree with line 4-4) | \$ -                    |                                                             |
| 2-18  | Proceeds from sale of capital assets                     | \$ -                    |                                                             |
| 2-19  | Fire and police pension                                  | \$ -                    |                                                             |
| 2-20  | Donations                                                | \$ -                    |                                                             |
| 2-21  | Other (specify):                                         | \$ 38                   |                                                             |
| 2-22  |                                                          | \$ -                    |                                                             |
| 2-23  |                                                          | \$ -                    |                                                             |
| 2-24  | (add lines 2-1 through 2-23) TOTAL REVENUE               | \$ 76,166               |                                                             |

## PART 3 - EXPENDITURES

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

| Line# | Description                                                             | Round to nearest Dollar | Please use this space to provide any necessary explanations |
|-------|-------------------------------------------------------------------------|-------------------------|-------------------------------------------------------------|
| 3-1   | Administrative                                                          | \$ 1,825                |                                                             |
| 3-2   | Salaries                                                                | \$ 14,951               |                                                             |
| 3-3   | Payroll taxes                                                           | \$ -                    |                                                             |
| 3-4   | Contract services                                                       | \$ 9,977                |                                                             |
| 3-5   | Employee benefits                                                       | \$ -                    |                                                             |
| 3-6   | Insurance                                                               | \$ 3,329                |                                                             |
| 3-7   | Accounting and legal fees                                               | \$ 9,650                |                                                             |
| 3-8   | Repair and maintenance                                                  | \$ 5,176                |                                                             |
| 3-9   | Supplies                                                                | \$ 1,057                |                                                             |
| 3-10  | Utilities and telephone                                                 | \$ -                    |                                                             |
| 3-11  | Fire/Police                                                             | \$ 8,250                |                                                             |
| 3-12  | Streets and highways                                                    | \$ 7,041                |                                                             |
| 3-13  | Public health                                                           | \$ -                    |                                                             |
| 3-14  | Culture and recreation                                                  | \$ 69                   |                                                             |
| 3-15  | Utility operations                                                      | \$ -                    |                                                             |
| 3-16  | Capital outlay                                                          | \$ 1,293                |                                                             |
| 3-17  | Debt service principal (should agree with Part 4)                       | \$ -                    |                                                             |
| 3-18  | Debt service interest                                                   | \$ -                    |                                                             |
| 3-19  | Repayment of Developer Advance Principal (should agree with line 4-4)   | \$ -                    |                                                             |
| 3-20  | Repayment of Developer Advance Interest                                 | \$ -                    |                                                             |
| 3-21  | Contribution to pension plan (should agree to line 7-2)                 | \$ -                    |                                                             |
| 3-22  | Contribution to Fire & Police Pension Assoc. (should agree to line 7-2) | \$ -                    |                                                             |
| 3-23  | Other (specify):                                                        | \$ -                    |                                                             |
| 3-24  |                                                                         | \$ -                    |                                                             |
| 3-25  |                                                                         | \$ -                    |                                                             |
| 3-26  | (add lines 3-1 through 3-24) TOTAL EXPENDITURES                         | \$ 62,619               |                                                             |

If TOTAL REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER than \$100,000 - **STOP**. You may not use this form. Please use the "Application for Exemption from Audit - LONG FORM".

## 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? ☐ Yes      ☒ No

If Yes, please attach a copy of the entity's Debt Repayment Schedule.

4-2 Is the debt repayment schedule attached? If no, MUST explain: ☐ Yes      ☐ No

4-3 Is the entity current in its debt service payments? If no, MUST explain: ☐ Yes      ☐ No

| Please complete the following debt schedule, if applicable:<br>(please only include principal amounts)(enter all amount as positive numbers) |  |  |  |  | Outstanding at end of prior year | Issued during year | Retired during year | Outstanding at year-end |
|----------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|----------------------------------|--------------------|---------------------|-------------------------|
| General obligation bonds                                                                                                                     |  |  |  |  | \$ -                             | \$ -               | \$ -                | \$ -                    |
| Revenue bonds                                                                                                                                |  |  |  |  | \$ -                             | \$ -               | \$ -                | \$ -                    |
| Notes/Loans                                                                                                                                  |  |  |  |  | \$ -                             | \$ -               | \$ -                | \$ -                    |
| Leases                                                                                                                                       |  |  |  |  | \$ -                             | \$ -               | \$ -                | \$ -                    |
| Developer Advances                                                                                                                           |  |  |  |  | \$ -                             | \$ -               | \$ -                | \$ -                    |
| Other (specify):                                                                                                                             |  |  |  |  | \$ -                             | \$ -               | \$ -                | \$ -                    |
| <b>TOTAL</b>                                                                                                                                 |  |  |  |  | \$ -                             | \$ -               | \$ -                | \$ -                    |

Please answer the following questions by marking the appropriate boxes.

Yes      No

4-5 Does the entity have any authorized, but unissued, debt? ☐ Yes      ☒ No

If yes: How much? \$ -  
Date the debt was authorized:

4-6 Does the entity intend to issue debt within the next calendar year? ☐ Yes      ☒ No

If yes: How much? \$ -

4-7 Does the entity have debt that has been refinanced that it is still responsible for? ☐ Yes      ☒ No

If yes: What is the amount outstanding? \$ -

4-8 Does the entity have any lease agreements? ☐ Yes      ☒ No

If yes: What is being leased?  
What is the original date of the lease?  
Number of years of lease?  
Is the lease subject to annual appropriation? ☐ Yes      ☒ No  
What are the annual lease payments? \$ -

4-9 Does the entity have a certified Mill Levy? ☒ Yes      ☐ No

If yes: Please provide the following mills levied for the year reported:

|                 |                  |
|-----------------|------------------|
| Bond Redemption | -                |
| General/Other   | 19,915.00        |
| <b>TOTAL</b>    | <b>19,915.00</b> |

Please use this space to provide any explanations or comments:

## 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 \$ 64,432

5-2 Certificates of deposit \$ 100,000

**Total Cash Deposits** **\$ 164,432**

Investments (if investment is a mutual fund, please list underlying investments):

5-3 CSAFE \$ 90,123

CSAFE - CTF \$ 11,647

\$ -

\$ -

**Total Investments** **\$ 101,770**

**Total Cash and Investments** **\$ 266,202**

Please answer the following questions by marking in the appropriate boxes

Yes      No      N/A

5-4 Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.? ☒ Yes      ☐ No      ☐ N/A

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.)? ☒ Yes      ☐ No      ☐ N/A

If no, MUST use this space to provide any explanations:

## PART 6 - CAPITAL ASSETS

Please answer the following questions by marking in the appropriate boxes.

Yes                      No

- |     |                                                                                                                                  |                                     |                          |
|-----|----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
| 6-1 | Does the entity have capital 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"/> |

6-3

Complete the following capital assets table:

|                                                                           | Balance - beginning<br>of the year | Additions (Must<br>be included in<br>Part 3) | Deletions   | Year-End<br>Balance |
|---------------------------------------------------------------------------|------------------------------------|----------------------------------------------|-------------|---------------------|
| Land                                                                      | \$ 19,400                          | \$ -                                         | \$ -        | \$ 19,400           |
| Buildings                                                                 | \$ 182,183                         | \$ -                                         | \$ -        | \$ 182,183          |
| Machinery and equipment                                                   | \$ 24,208                          | \$ -                                         | \$ -        | \$ 24,208           |
| Furniture and fixtures                                                    | \$ -                               | \$ -                                         | \$ -        | \$ -                |
| Construction In Progress (CIP)                                            | \$ -                               | \$ -                                         | \$ -        | \$ -                |
| Other (explain):                                                          | \$ -                               | \$ -                                         | \$ -        | \$ -                |
| Accumulated Depreciation<br>(Please enter a negative, or credit, balance) | \$ (46,915)                        | \$ (7,617)                                   | \$ -        | \$ (54,532)         |
| <b>TOTAL</b>                                                              | <b>\$ 178,876</b>                  | <b>\$ (7,617)</b>                            | <b>\$ -</b> | <b>\$ 171,259</b>   |

Please use this space to provide any explanations or comments:

## PART 7 - PENSION INFORMATION

Please answer the following questions by marking in the appropriate boxes.

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 type="checkbox"/> | <input checked="" type="checkbox"/> |

If yes: Who administers the plan?

Indicate the contributions from:

|                                                                                   |             |
|-----------------------------------------------------------------------------------|-------------|
| Tax (property, SO, sales, etc.):                                                  | \$ -        |
| State contribution amount:                                                        | \$ -        |
| Other (gifts, donations, etc.):                                                   | \$ -        |
| <b>TOTAL</b>                                                                      | <b>\$ -</b> |
| What is the monthly benefit paid for 20 years of service per retiree as of Jan 1? | \$ -        |

Please use this space to provide any explanations or comments:

## PART 8 - BUDGET INFORMATION

Please answer the following questions by marking in the appropriate boxes.

Yes                      No                      N/A

- |     |                                                                                                                                                         |                                     |                          |                          |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 8-1 | Did the entity file a budget with the Department of Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.? If no, MUST explain: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|

- |     |                                                                                                                    |                                     |                          |                          |
|-----|--------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 8-2 | Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|-----|--------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|

If yes: Please indicate the amount appropriated for each fund for the year reported:

| Fund Name | Budgeted Expenditures |
|-----------|-----------------------|
| General   | \$ 41,989             |
| Streets   | \$ 13,326             |
| CTF       | \$ 2,000              |
| Cemetery  | \$ 500                |
| Town Hall | \$ 6,500              |

## PART 9 - TAXPAYER'S BILL OF RIGHTS (TABOR)

Please answer the following question by marking in the appropriate box

Yes

No

9-1

Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]?



Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent emergency reserve requirement. All governments should determine if they meet this requirement of TABOR.

If no, MUST explain:

## PART 10 - GENERAL INFORMATION

Please answer the following questions by marking in the appropriate boxes.

Yes

No

10-1

Is this application for a newly formed governmental entity?



If yes:

Date of formation:

10-2

Has the entity changed its name in the past or current year?



If yes:

Please list the NEW name & PRIOR name:

10-3

Is the entity a metropolitan district?



Please indicate what services the entity provides:

10-4

Does the entity have an agreement with another government to provide services?



If yes:

List the name of the other governmental entity and the services provided:

10-5

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.]



If yes:

Date Filed:

Please use this space to provide any explanations or comments:

## PART 11 - GOVERNING BODY APPROVAL

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 1 | Print Board Member's Name<br><u>RACHEL NEW</u>        | I <u>Rachel New</u> , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.<br>Signed <u>Rachel New</u><br>Date: <u>March 28, 2017</u><br>My term Expires: <u>4/15/2018</u> |
| Board Member 2 | Print Board Member's Name<br><u>CHRIS NASSO</u>       | I <u>Chris Nasso</u> , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.<br>Signed <u>Chris Nasso</u><br>Date: <u>3/28/17</u><br>My term Expires: <u>4/15/18</u>        |
| Board Member 3 | Print Board Member's Name<br><u>Matthew D. Bucher</u> | I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.<br>Signed <u>Matthew D. Bucher</u><br>Date: <u>3/28/2016</u><br>My term Expires: <u>4/15/18</u>              |
| Board Member 4 | Print Board Member's Name<br><u>CORY NASSO</u>        | I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.<br>Signed <u>Cory Nasso</u><br>Date: <u>3/28/17</u><br>My term Expires: <u>4/15/18</u>                       |
| Board Member 5 | Print Board Member's Name<br><u>BRAD WICK</u>         | I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.<br>Signed <u>Brad Wick</u><br>Date: <u>3/28/2018</u><br>My term Expires: <u>4/15/2018</u>                    |
| Board Member 6 | Print Board Member's Name                             | I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.<br>Signed _____<br>Date: _____<br>My term Expires: _____                                                     |
| Board Member 7 | Print Board Member's Name                             | I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.<br>Signed _____<br>Date: _____<br>My term Expires: _____                                                     |

RESOLUTION 1 SERIES 2017  
THE TOWN OF PITKIN, COLORADO

RESOLUTION FOR EXEMPTION FROM AUDIT  
(Pursuant to Section 29-1-604, C.R.S.)

A RESOLUTION APPROVING AN EXEMPTION FROM AUDIT FOR FISCAL YEAR 2016  
FOR THE TOWN OF PITKIN, STATE OF COLORADO.

WHEREAS, the Board of Trustees of the Town of Pitkin wishes to claim exemption from the  
audit requirements of Section 29-1-603, C.R.S.; and

WHEREAS, Section 29-1-604 (1), C.R.S. states that any local government where neither  
revenue nor expenditures exceed \$100,000.00 may, with the approval of the State Auditor, be  
exempt from the provisions of Section 29-1-603, C.R.S.; and

WHEREAS, neither revenue nor expenditures for the Town of Pitkin exceeded \$100,000 for  
Fiscal Year 2016; and

WHEREAS an application for exemption from audit for the Town of Pitkin has been prepared by  
Holscher, Mayberry & Company, LLC, 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 by the Board of Trustees of the Town of Pitkin that the  
application for exemption from audit for the Town of Pitkin for the Fiscal Year ended December  
31<sup>st</sup>, 2016, has been personally reviewed and is hereby approved by a majority of the Board of  
Trustees of the Town of Pitkin; that those members of the Board of Trustees 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 Town of Pitkin for the fiscal year ended  
December 31, 2016.

Members of the Board of Trustees

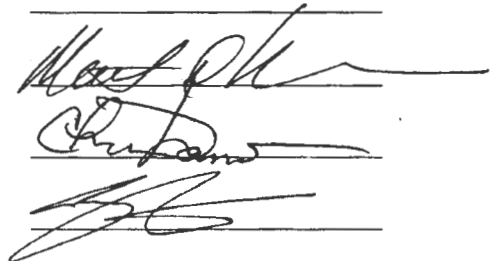
Signature

Eddy Balch

Matt Buchanan

Chris Nasso

Cory Nasso



Brad Wick

Brad Wick

ADOPTED THIS 28<sup>th</sup> day of March 2017



Attest:

Sara Gibb

Sara Gibb, Clerk/Treasurer

Rachel New  
Rachel New, Mayor Pro Tem