

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

8937.00

NAME OF GOVERNMENT **Otis Fireman's Pension Fund**
ADDRESS **38315 Co. Rd. RR**
Otis, CO 80743

For the Year Ended
12/31/16
or fiscal year ended:

CONTACT PERSON **Larry C. Smith**
PHONE **970.246.3876**
EMAIL **lasmith@centurytel.net**
FAX

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: **Larry C. Smith**
TITLE **Secretary-Treasurer**
FIRM NAME (if applicable)
ADDRESS **38315 Co. Rd. RR**
PHONE **Otis, CO 80743**

DATE PREPARED
(Must be prepared prior to
Board approval) **2-1-2017**

PREPARER (SIGNATURE REQUIRED)

Larry C Smith

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

GOVERNMENTAL
(MODIFIED ACCRUAL BASIS)



PROPRIETARY
(CASH OR BUDGETARY BASIS)



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RECEIVED

By Justin L. Smith at 10:45 am, Feb 14, 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	\$	-
2-2	Specific ownership	\$	-
2-3	Sales and use	\$	-
2-4	Other (specify):	\$	-
2-5	Licenses and permits	\$	-
2-6	Intergovernment Grants	\$	-
2-7	Conservation Trust Funds (Lottery)	\$	-
2-8	Highway Users Tax Funds (HUTF)	\$	-
2-9	Other (specify):	\$	-
2-10	Charges for services	\$	-
2-11	Fines and forfeits	\$	-
2-12	Special assessments	\$	-
2-13	Investment income	\$	2,695
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	\$	3,250
2-20	Donations	\$	-
2-21	Other (specify):	\$	-
2-22	Otis Rural Fire Protection District	\$	2,500
2-23	Town of Otis	\$	1,000
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE	\$	9,445

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	\$	-
3-2	Salaries	\$	-
3-3	Payroll taxes	\$	-
3-4	Contract services	\$	-
3-5	Employee benefits	\$	-
3-6	Insurance	\$	-
3-7	Accounting and legal fees	\$	-
3-8	Repair and maintenance	\$	-
3-9	Supplies	\$	49
3-10	Utilities and telephone	\$	-
3-11	Fire/Police	\$	8,280
3-12	Streets and highways	\$	-
3-13	Public health	\$	-
3-14	Culture and recreation	\$	-
3-15	Utility operations	\$	-
3-16	Capital outlay	\$	-
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	Bond	\$	100
3-24	Safety Deposit Box Rent	\$	15
3-25		\$	-
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES	\$	8,444

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? If Yes, please attach a copy of the entity's Debt Repayment Schedule.	<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)(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):	\$ -	\$ -
TOTAL	\$ -	\$ -

	Yes	No
4-5 Does the entity have any authorized, but unissued, debt? If yes: How much? Date the debt was authorized:	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4-6 Does the entity intend to issue debt within the next calendar year? If yes: How much?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4-7 Does the entity have debt that has been refinanced that it is still responsible for? If yes: What is the amount outstanding?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4-8 Does the entity have any lease agreements? 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? What are the annual lease payments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4-9 Does the entity have a certified Mill Levy? If yes: Please provide the following mills levied for the year reported:	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Bond Redemption	-
	General/Other	-
	TOTAL	-

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	\$ 8,776	
5-2 Certificates of deposit	\$ 124,910	
Total Cash Deposits		\$ 133,686
Investments (if investment is a mutual fund, please list underlying investments):		
5-3	\$ -	
	\$ -	
	\$ -	
Total Investments		\$ -
Total Cash and Investments		\$ 133,686

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.?	<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.)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>		
6-3	Complete the following capital assets table:				
		Balance - beginning of the year	Additions (Must be included in Part 3)	Deletions	Year-End Balance
	Land	\$ -	\$ -	\$ -	\$ -
	Buildings	\$ -	\$ -	\$ -	\$ -
	Machinery and equipment	\$ -	\$ -	\$ -	\$ -
	Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
	Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
	Other (explain):	\$ -	\$ -	\$ -	\$ -
	Accumulated Depreciation (Please enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
	TOTAL	\$ -	\$ -	\$ -	\$ -

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 checked="" type="checkbox"/>	<input 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? Board of Directors		
	Indicate the contributions from:		
	Tax (property, SO, sales, etc.):	\$ 3,500	
	State contribution amount:	\$ 3,250	
	Other (gifts, donations, etc.):	\$ 2,695	
	TOTAL	\$ 9,445	
	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		
	Super Now Account #100990 (North Star Bank Otis, CO)	\$	8,449	

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:

Otis Rural Fire Protection District and Town of Otis

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

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 \$100,000 or less must have an application prepared by a person skilled in 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.

	Print Board Member's Name	A MAJORITY of the governing board members must complete and sign in the column below.
Board Member 1	Print Board Member's Name <u>RONAH B GRATON</u> Ron Graton	I <u>RON GRATON</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. Signed <u>[Signature]</u> Date: <u>2/9/17</u> My term Expires: _____
Board Member 2	Print Board Member's Name <u>MARKA Norman</u> Mark Norman	I <u>MARKA Norman</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. Signed <u>[Signature]</u> Date: <u>2-9-17</u> My term Expires: _____
Board Member 3	Print Board Member's Name <u>Terry Kuntz</u> Terry Kuntz	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. Signed <u>[Signature]</u> Date: <u>2-9-16</u> My term Expires: <u>May 18</u>
Board Member 4	Print Board Member's Name <u>Michael Ison</u> Mike Ison	I <u>Michael Ison</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. Signed <u>[Signature]</u> Date: <u>May 2018 2-9-17</u> My term Expires: <u>May 2018</u>
Board Member 5	Print Board Member's Name _____ Damon Gayle	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. Signed _____ Date: _____ My term Expires: _____
Board Member 6	Print Board Member's Name <u>Larry C Smith</u> Larry C. Smith	I <u>Larry C Smith</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. Signed <u>[Signature]</u> Date: <u>2-9-17</u> My term Expires: <u>Feb 19</u>
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. Signed _____ Date: _____ My term Expires: _____

2016 Annual Report of Otis Firemen's Pension Fund

Total Cash and Investments December 31, 2015:

Edward Jones FHLMC Medium term note #486-12599-1-1 (2.50%)	125,961.25
Super Now Account #1009901	<u>7,774.67</u>
	133,735.92

Income for 2016:

Edward Jones #486-12599-1-1 (2.50%)	1652.89
CD #41905 (North Star Bank) (1.65%)	1,033.33
Super Now Account #100990	8.64
F.P.P.A.	3,250.00
Otis Rural Fire Protection District	2,500.00
Town of Otis	<u>1,000.00</u>
Total	9,444.86

Note: The Edward Jones Note matured and lost value is the reason for loss in Balance on hand.

Expenses for 2016

Paid in pensions	8,280.00
Safety Deposit Box Rent	15.00
Surety Bond	100.00
Postage	<u>49.00</u>
Total	8,444.00
Net Loss:	(50.39)

Total Cash and Investments December 31, 2016

CD #41905 (North Star Bank) (1.65%)	124,910.00
Super now Account #100990	<u>8,775.53</u>
	133,685.53

Respectfully submitted,


Larry C. Smith Sec- Treas.