

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT
ADDRESS

Liberty Hill Metroploitan District
PO Box 2552 Centennial, CO 80122

For the Year Ended
12/31/17
or fiscal year ended:

CONTACT PERSON
PHONE
EMAIL
FAX

Sheldon McDonnell
303-917-0759
lhmetrodistrict@gmail.com

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:
TITLE
FIRM NAME (if applicable)
ADDRESS
PHONE
DATE PREPARED
(Must be prepared prior to
Board approval)

Sheldon McDonnell
Treasurer
PO Box 2552 Centennial, CO 80122
303-917-0759
3/1/2018

PREPARER (SIGNATURE REQUIRED)



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

GOVERNMENTAL <small>(MODIFIED ACCRUAL BASIS)</small>	PROPRIETARY <small>(CASH OR BUDGETARY BASIS)</small>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

E

RECEIVED

Office of the State Auditor

March 29, 2018

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	
2-1	Taxes: Property	\$ 70,282	Please use this space to provide any necessary explanations
2-2	Specific ownership	\$ 6,281	
2-3	Sales and use	\$ -	
2-4	Other (specify): Senior Exempt	\$ 4,419	
2-5	Licenses and permits		
2-6	Intergovernmental: 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	\$ 2,117	
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):	\$ -	
2-22		\$ -	
2-23		\$ -	
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE	\$ 83,099	

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	
3-1	Administrative	\$ 1,747	Please use this space to provide any necessary explanations
3-2	Salaries	\$ 5,975	
3-3	Payroll taxes	\$ -	
3-4	Contract services	\$ 18,145	
3-5	Employee benefits	\$ -	Payroll taxes were paid but not taken from account until January
3-6	Insurance	\$ 3,781	
3-7	Accounting and legal fees	\$ -	
3-8	Repair and maintenance	\$ 1,687	
3-9	Supplies	\$ 302	
3-10	Utilities and telephone	\$ 2,882	
3-11	Fire/Police	\$ -	
3-12	Streets and highways	\$ -	
3-13	Public health	\$ -	
3-14	Culture and recreation	\$ -	
3-15	Utility operations	\$ -	
3-16	Capital outlay	\$ 5,774	
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	\$ 40,293	

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: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<input type="checkbox"/>	<input type="checkbox"/>		
4-3 Is the entity current in its debt service payments? If no, MUST explain: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<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	\$ -	\$ -	\$ -	\$ -

*must tie to prior year ending balance

	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 <u>mills</u> levied for the year reported (do not report \$ amounts):	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Bond Redemption		-
General/Other		7.31
TOTAL		7.31

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	\$ 5,745	
5-2 Certificates of deposit	\$ -	
Total Cash Deposits		\$ 5,745
Investments (if investment is a mutual fund, please list underlying investments):		
5-3 Colo Trust Plus	\$ 203,198	
	\$ -	
	\$ -	
	\$ -	
Total Investments		\$ 203,198
Total Cash and Investments		\$ 208,943

	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? Yes No
- 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: Yes No

No inventory performed since our assets are the fence, landscaping, irrigation, and signage around the perimeter of the Liberty Hill Neighborhood

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): Fence and Landscaping	\$ 200,362	\$ 5,774	\$ -	\$ 206,136
Accumulated Depreciation (Please enter a negative, or credit, balance)	\$ (17,001)	\$ (192)	\$ -	\$ (17,193)
TOTAL	\$ 183,361	\$ 5,582	\$ -	\$ 188,943

*must tie to prior year ending balance

Please use this space to provide any explanations or comments:

A section of retaining wall was replaced in June 2017 with a 15 year depreciation. Six months of depreciation taken for the remainder of the year

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? Yes No
- 7-2 Does the entity have a volunteer firemen's pension plan? Yes No

If yes: Who administers the plan?

Indicate the contributions from:

Tax (property, SO, sales, etc.):	\$ -
State contribution amount:	\$ -
Other (gifts, donations, etc.):	\$ -
TOTAL	\$ -

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.? Yes No N/A
- If no, MUST explain:

- 8-2 Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: Yes No N/A

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

General Fund	\$ 91,750

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

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: <input style="width: 450px;" type="text"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10-2	Has the entity changed its name in the past or current year? If yes: Please list the NEW name & PRIOR name: <input style="width: 500px;" type="text"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10-3	Is the entity a metropolitan district? Please indicate what services the entity provides: <input style="width: 500px;" type="text" value="We oversee the perimeter maintenance of the fence and landscaping for the neighborhood"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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: <input style="width: 500px;" type="text"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10-5	Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> 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: <input style="width: 450px;" type="text"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Please use this space to provide any explanations or comments:

PART 11 - GOVERNING BODY APPROVAL

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

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

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.

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 Cameron McDonnell	I <u>Cameron McDonnell</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>3-19-18</u> My term Expires: <u>May 2020</u>
Board Member 2	Print Board Member's Name Andrea Bobb	I <u>Andrea Bobb</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>A. Bobb</u> Date: <u>3-19-18</u> My term Expires: <u>May 2020</u>
Board Member 3	Print Board Member's Name Heather Lemay	I <u>Heather Lemay</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>Heather Lemay</u> Date: <u>3-19-18</u> My term Expires: <u>May 2018</u>
Board Member 4	Print Board Member's Name Julie Tombarie	I <u>Julie Tombarie</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>Julie Tombarie</u> Date: <u>3-19-18</u> My term Expires: <u>May 2018</u>
Board Member 5	Print Board Member's Name Sheldon McDonnell	I <u>Sheldon McDonnell</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>Sheldon McDonnell</u> Date: <u>3/19/18</u> My term Expires: <u>May 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. Signed _____ Date: _____ 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. Signed _____ Date: _____ My term Expires: _____

GF LIBERTY HILL METRO DIST

Profit & Loss

January through December 2017

03/27/18

Accrual Basis

	Jan - Dec 17
Ordinary Income/Expense	
Income	
Tax Revenue	
Senior/Vet Exemption-GF	3,312.84
Senior/Vet Exemption-Contract	1,106.56
Current Tax-General Fund	54,056.87
Current Tax-Contract	16,225.56
Specific Ownership-General Fund	4,704.70
Specific Ownership-Contract	1,576.71
Total Tax Revenue	<u>80,983.24</u>
Total Income	80,983.24
Expense	
Admin Expense	
Membership	302.22
Treasurer's Fees	1,120.53
Insurance	3,781.33
Office Supplies	301.74
Website Hosting	324.32
Total Admin Expense	<u>5,830.14</u>
Payroll Expenses	
Directors Fees	5,975.00
Total Payroll Expenses	<u>5,975.00</u>
Perimeter Maintenance	
Capital Project	5,774.00
Maintenance Contract	18,145.13
Repairs	1,687.37
Total Perimeter Maintenance	<u>25,606.50</u>
Utilities	
Electric	502.98
Water	2,378.98
Total Utilities	<u>2,881.96</u>
Total Expense	<u>40,293.60</u>
Net Ordinary Income	40,689.64
Other Income/Expense	
Other Income	
Interest Income	2,117.14
Total Other Income	<u>2,117.14</u>
Net Other Income	<u>2,117.14</u>
Net Income	<u><u>42,806.78</u></u>

Balance Sheet

As of December 31, 2017

Dec 31, 17

ASSETS	
Current Assets	
Checking/Savings	
Wells Fargo Savings	554.13
Wells Fargo Checking	5,191.03
Colotrust	203,198.69
Total Checking/Savings	208,943.85
Total Current Assets	208,943.85
TOTAL ASSETS	208,943.85
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
Payroll Liabilities	359.55
Total Other Current Liabilities	359.55
Total Current Liabilities	359.55
Total Liabilities	359.55
Equity	
Fund Balance	165,800.33
Opening Bal Equity	-22.81
Net Income	42,806.78
Total Equity	208,584.30
TOTAL LIABILITIES & EQUITY	208,943.85

RESOLUTION 2018-1

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 LIBERTY HILL METROPOLITAN DISTRICT STATE OF COLORADO.

WHEREAS, the board of the Liberty Hill Metropolitan 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 revenue nor expenditures for Liberty Hill Metropolitan District exceeded \$100,000 for Fiscal Year 2017; and

WHEREAS, an application for exemption from audit for Liberty Hill Metropolitan District has been prepared by Sheldon McDonnell a person skilled in 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 Liberty Hill Metropolitan District that the application for exemption from audit for Liberty Hill Metropolitan District for the Fiscal Year ended December 31, 2017, has been personally reviewed and is hereby approved by a majority of the board of the Liberty Hill Metropolitan 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 Liberty Hill Metropolitan District for the fiscal year ended December 31, 2017.

ADOPTED THIS 19 day of March, A.D. 2018.

