

# APPLICATION FOR EXEMPTION FROM AUDIT

## SHORT FORM

NAME OF GOVERNMENT ADDRESS

Town of Vilas
P O Box 637
Vilas, CO 81087

For the Year Ended  
12/31/18  
or fiscal year ended:

CONTACT PERSON  
PHONE  
EMAIL  
FAX

Lisa Byrne
(719) 523-4044
townofvilascolorado@gmail.com
(719) 523-1898

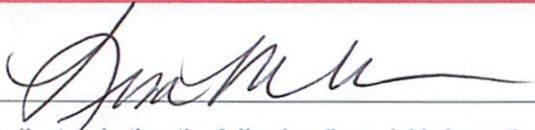
### PART 1 - CERTIFICATION OF PREPARER

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

Lisa Byrne
Clerk Pro Tem
P O Box 637, Vilas, CO 81087
(719) 523-4044
3/30/2019

### 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)

## 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	Taxes: Property (report mills levied in Question 10-6)	\$ 5,050	
2-2	Specific ownership	\$ 597	
2-3	Sales and use	\$ -	
2-4	Other (specify): MotVeh/Homestd/Penalty/Fees	\$ 571	
2-5	Licenses and permits	\$ -	
2-6	Intergovernmental: Grants	\$ -	
2-7	Conservation Trust Funds (Lottery)	\$ 542	
2-8	Highway Users Tax Funds (HUTF)	\$ 5,907	
2-9	Other (specify):	\$ -	
2-10	Charges for services	\$ -	
2-11	Fines and forfeits	\$ -	
2-12	Special assessments	\$ -	
2-13	Investment income	\$ -	
2-14	Charges for utility services	\$ 39,349	
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	\$ 500	
2-19	Fire and police pension	\$ -	
2-20	Donations	\$ 4,600	
2-21	Other (specify): Interest	\$ 83	
2-22		\$ -	
2-23		\$ -	
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE	\$ 57,199	

## 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	\$ 375	
3-2	Salaries	\$ -	
3-3	Payroll taxes	\$ -	
3-4	Contract services	\$ 550	
3-5	Employee benefits	\$ -	
3-6	Insurance	\$ 1,730	
3-7	Accounting and legal fees	\$ 628	
3-8	Repair and maintenance	\$ 179	
3-9	Supplies	\$ 371	
3-10	Utilities and telephone	\$ 2,116	
3-11	Fire/Police	\$ 5,904	
3-12	Streets and highways	\$ 4,196	
3-13	Public health	\$ -	
3-14	Culture and recreation	\$ 545	
3-15	Utility operations	\$ 17,476	
3-16	Capital outlay	\$ 4,000	
3-17	Debt service principal (should agree with Part 4)	\$ 4,038	
3-18	Debt service interest	\$ 8,638	
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): Miscellaneous per Budget	\$ 185	
3-24		\$ -	
3-25		\$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES	\$ 50,931	

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 checked="" type="checkbox"/>	<input type="checkbox"/>		
4-2 Is the debt repayment schedule attached? If no, MUST explain: <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	<input checked="" 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%; margin-top: 5px;"></div>	<input checked="" 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	\$ 182,862	\$ -	\$ 4,038	\$ 178,824
Notes/Loans	\$ -	\$ -	\$ -	\$ -
Leases	\$ -	\$ -	\$ -	\$ -
Developer Advances	\$ -	\$ -	\$ -	\$ -
Other (specify):	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 182,862</b>	<b>\$ -</b>	<b>\$ 4,038</b>	<b>\$ 178,824</b>

\*must tie to prior year ending balance

Please answer the following questions by marking the appropriate boxes.

	Yes	No
4-5 Does the entity have any authorized, but unissued, debt? If yes: How much? <span style="float: right;">\$ -</span> Date the debt was authorized: <span style="float: right;">_____</span>	<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? <span style="float: right;">\$ -</span>	<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? <span style="float: right;">\$ -</span>	<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? <span style="float: right;">_____</span> What are the annual lease payments? <span style="float: right;">\$ -</span>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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	\$ 40,787	
5-2 Certificates of deposit	\$ 21,324	
<b>Total Cash Deposits</b>		<b>\$ 62,111</b>
Investments (if investment is a mutual fund, please list underlying investments):		
	\$ -	
	\$ -	
	\$ -	
	\$ -	
<b>Total Investments</b>		<b>\$ -</b>
<b>Total Cash and Investments</b>		<b>\$ 62,111</b>

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

Complete the following capital assets table:	Balance - beginning of the year*	Additions (Must be included in Part 3)	Deletions	Year-End Balance
Land	\$ 13,980	\$ -	\$ -	\$ 13,980
Buildings	\$ 47,640	\$ -	\$ -	\$ 47,640
Machinery and equipment	\$ 206,419	\$ 4,000	\$ 500	\$ 209,919
Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Other (explain): Distribution System	\$ 1,286,627	\$ -	\$ -	\$ 1,286,627
Accumulated Depreciation	\$ (411,210)	\$ -	\$ -	\$ (411,210)
<b>TOTAL</b>	<b>\$ 1,143,456</b>	<b>\$ 4,000</b>	<b>\$ 500</b>	<b>\$ 1,146,956</b>

Please use this space to provide any explanations or comments:

\*\*\*See Page 7, Part 10 below, for 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?  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.):	\$ -
<b>TOTAL</b>	<b>\$ -</b>

What is the monthly benefit paid for 20 years of service per retiree as of Jan  \$ -

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
- 
- 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 budgeted for each fund for the year reported:

Conservation Trust Fund	\$ 9,000
Operating Fund	\$ 817,076
Water Reserve Fund	\$ -
Tabor Reserve	\$ 2,000
***See Page 7 below for explanations or comments.	

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

Please answer the following question by marking in the appropriate box

		Yes	No
9-1	<b>Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X,</b> <small>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.</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If no, MUST explain:

## PART 10 - GENERAL INFORMATION

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

		Yes	No
10-1	<b>Is this application for a newly formed governmental entity?</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes:	Date of formation: <input style="width: 450px;" type="text"/>		
10-2	<b>Has the entity changed its name in the past or current year?</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes:	Please list the NEW name & PRIOR name: <input style="width: 550px;" type="text"/>		
10-3	<b>Is the entity a metropolitan district?</b> Please indicate what services the entity provides: <input style="width: 550px;" type="text"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10-4	<b>Does the entity have an agreement with another government to provide services?</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes:	List the name of the other governmental entity and the services provided: <input style="width: 550px;" type="text"/>		
10-5	<b>Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes:	Date Filed: <input style="width: 450px;" type="text"/>		
10-6	<b>Does the entity have a certified Mill Levy?</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes:	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):		

Bond Redemption mills	-
General/Other mills	40.30
<b>Total mills</b>	<b>40.30</b>

Please use this space to provide any explanations or comments:

### Part 6 – Capital Assets

The Town of Vilas experienced a complete administrative and executive turnover during the April 2018 election cycle. Spending was curtailed, including replacing contract labor with volunteers. We have provided an inventory of capital assets to CIRSA, our new insurance carrier, reflecting estimated replacement cost valuation figures. For this exemption application we are relying upon the veracity of the capital asset figures carried over from the prior fiscal year. We anticipate performing a full audit in the coming year that will provide precise and verified figures for all capital assets and accumulated depreciation.

### Part 8 – Budget Information

The 2018 appropriations, with the fund names and amounts listed above were filed by the prior administration, within the "Budget Year Ending December 31, 2018" document, except for the "Operating Fund" which was increased from \$809,576 to \$817,076 by the current administration, through a Budget Contingency Resolution, adopted April 26, 2018. The additional \$7,500 was transferred from unappropriated and unrestricted Water Reserve Fund equity reserves to the Operating Fund to provide the operating cash needed to overcome deficits uncovered by the recently elected Board, in the General Fund and Water Enterprise Operating Fund portions of the coming "Operating Fund."

## 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	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: _____
1	Lisa M. Byrne	I <u>Lisa Byrne</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>3-31-19</u> My term Expires: <u>04-2020</u>
2	Billie J Freiburger	I <u>Billie Freiburger</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>Billie Freiburger</u> Date: <u>3-31-19</u> My term Expires: <u>4-2020</u>
3	Pauline Eubanks	I <u>Pauline Eubanks</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>Pauline Eubanks</u> Date: <u>3-31-19</u> My term Expires: <u>4-2020</u>
4	<u>Ethan Eubanks</u>	I <u>Ethan Eubanks</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>Ethan Eubanks</u> Date: <u>3-31-19</u> My term Expires: <u>4-2022</u>
5	Rusty Allen	I <u>Rusty Allen</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>Rusty Allen</u> Date: <u>3-31-19</u> My term Expires: <u>4-2020</u>
6		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: _____
7		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: _____

UNITED STATES DEPARTMENT OF AGRICULTURE  
RURAL DEVELOPMENT  
ANNUAL STATEMENT OF LOAN ACCOUNT

SAVE THIS INFORMATION  
FOR INCOME TAX PURPOSES

DESCRIPTION	ADVANCES	INTEREST	PRINCIPAL	TOTAL	T	INTEREST RATE	EFFECTIVE DATE
BEGIN LOAN BALNCE		713.91	182,861.47	183,575.38			010118
PAYMENT		4,331.06	2,006.94	6,338.00	R	04.7500	060118
PAYMENT		4,307.07	2,030.93	6,338.00	R	04.7500	120118
TOTAL LOAN PMTS		8,638.13	4,037.87	12,676.00			
TOTAL PAID ON ALL LOANS THIS YEAR		8,638.13	4,037.87	12,676.00			
LOAN ACTIVITY	0.00	8,638.13	4,037.87	12,676.00			
LOAN BALANCE	UNPD INTEREST	698.14 **	UNPD PRIN	178,823.60 **			
NXT AMT DUE	6,338.00		DATE DUE	060118			
PAYMENT STATUS	ON SCHEDULE						
ALL LOAN ACTIVITY	0.00	8,638.13	4,037.87	12,676.00			
BORR BAL	UNPD INTEREST	698.14	UNPD PRIN	178,823.60			

\*These unpaid balances may not reflect the total amount due to the Agency at payoff.

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.  <b>USDA RURAL DEVELOPMENT</b> PHONE#(833)797-3726 4300 GODDFELLOW BLVD FC-1332 ST. LOUIS, MO 63120	CAUTION: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.	OMB NO. 1545-0901 <b>2018</b> (Rev. June 2018) Form 1098	CORRECTED (if checked) <b>Mortgage Interest Statement</b>
RECIPIENT'S/LENDERS TIN <b>431757115</b>	PAYER'S/BORROWER'S TIN <b>*****3943</b>	1 Mortgage interest received from payer(s)/borrower(s) \$ <b>0.00</b>	COPY B FOR PAYER/BORROWER  The information in boxes 1 through 9 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.
PAYER'S/BORROWER'S name, street address (including apt. no.), city or town, state or province, country, and ZIP or foreign postal code  <b>VILAS, TOWN OF</b> <b>P O BOX 637</b> <b>VILAS, CO</b>	2 Outstanding mortgage principal as of 1/1/2018 \$	3 Mortgage origination date	
05-756 81087	4 Refund of overpaid interest \$	5 Mortgage insurance premiums \$	
9 Number of properties securing the mortgage 10 Other	6 Points paid on purchase of principal residence \$	7 If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 6. <input checked="" type="checkbox"/>	
Account number (see instructions) <b>05005*****394391 01</b>	8 Address or description of property securing mortgage (see instructions)		

**IRS FORM 1098 DOES NOT APPLY TO YOUR LOAN**

**RESOLUTION/ORDINANCE FOR EXEMPTION FROM AUDIT**  
(Pursuant to Section 19-1-604, C.R.S.)

A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR FISCAL YEAR 2018, FOR THE TOWN OF VILAS, STATE OF COLORADO.

WHEREAS, the Board of Public Trustees of the Town of Vilas wishes to claim exemption from the audit requirements of Section 19-1-603, C.R.S.; and

WHEREAS, Section 29-1-604, C.R.S., states that any local government where neither revenues nor expenditures exceed seven hundred and fifty thousand dollars may, with the approval of the State Auditor, be exempt from the provision of Section 19-1-603, C.R.S.; and

WHEREAS, neither revenues nor expenditures for the Town of Vilas exceeded \$100,000 for Fiscal Year 2018; and

WHEREAS, an application for exemption from audit for the Town of Vilas has been prepared by Lisa Byrne, 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 Public Trustees of the Town of Vilas that the application for exemption from audit for the Town of Vilas for the Fiscal Year ended December 31, 2018, has been personally reviewed and is hereby approved by a majority of the Board of Public Trustees of the Town of Vilas; that those members of the Board of Public 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 Vilas for the fiscal year ended December 31, 2018.

ADOPTED THIS 31<sup>st</sup> day of March, A.D. 2019.

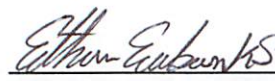
  
\_\_\_\_\_  
Rusty Allen, Mayor Pro Tem


  
\_\_\_\_\_  
ATTEST: Lisa Byrne, Clerk Pro Tem

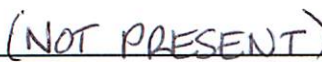
MEMBERS OF GOVERNING BODY:

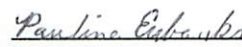
  
\_\_\_\_\_  
Rusty Allen, Trustee Term Expires 4/2020

  
\_\_\_\_\_  
Lisa Byrne, Trustee Term Expires 4/2020

  
\_\_\_\_\_  
Ethan Eubanks, Trustee Term Expires 4/2022

  
\_\_\_\_\_  
Billie Freiburger, Trustee Term Expires 4/2020

  
\_\_\_\_\_  
Clif Hair, Trustee

  
\_\_\_\_\_  
Pauline Eubanks, Trustee Term Expires 4/2020

