

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT ADDRESS

Julesburg Fire Protection District
615 West Sixth Street
Julesburg, CO 80737
Muriel L. Nelson
(970) 474-2526
mlnelson34@msn.com

For the Year Ended 12/31/19 or fiscal year ended:

CONTACT PERSON PHONE EMAIL 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: TITLE FIRM NAME (if applicable) ADDRESS PHONE DATE PREPARED

Muriel L. Nelson
Bookkeeper
615 West Sixth Street
(970) 474-2526
March 3, 2020

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

orig
sig

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.

2-1	Taxes:	Property (report mills levied in Question 10-6)	27,119	
2-2		Specific ownership	3,615	
2-3		Sales and use		
2-4		Other (specify): PILOT	39	
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		1,687	
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		2,000	
2-19	Fire and police pension		7,772	
2-20	Donations			
2-21	Other (specify): Interest on Taxes		37	
2-22				
2-23				
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE		\$ 49,259	

PART 3 - EXPENDITURES/EXPENSES

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.

3-1	Administrative		1,000	
3-2	Salaries			
3-3	Payroll taxes			
3-4	Contract services			
3-5	Employee benefits			
3-6	Insurance		5,036	
3-7	Accounting and legal fees		5,500	
3-8	Repair and maintenance		1,245	
3-9	Supplies		4,472	
3-10	Utilities and telephone		2,188	
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		1,555	
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)	5,075	
3-22	Contribution to Fire & Police Pension Assoc.	(should agree to line 7-2)		
3-23	Other (specify): Treasurer's Fees		815	
3-24				
3-25				
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES/EXPENSES		\$	

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; padding: 5px; margin-top: 5px;">Not Applicable</div> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4-3 | Is the entity current in its debt service payments? If no, MUST explain:
<div style="border: 1px solid black; padding: 5px; margin-top: 5px;">NotApplicable</div> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4-4 | | | |

General obligation bonds

Revenue bonds

Notes/Loans

Leases

Developer Advances

Other (specify):

TOTAL

General obligation bonds	\$ -	\$ -	\$ -	\$ -
Revenue bonds	\$ -	\$ -	\$ -	\$ -
Notes/Loans	\$ -	\$ -	\$ -	\$ -
Leases	\$ -	\$ -	\$ -	\$ -
Developer Advances	\$ -	\$ -	\$ -	\$ -
Other (specify):	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -

*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? \$ -
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? <input type="checkbox"/>
What are the annual lease payments? \$ - | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

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	\$ 49,104	
5-2	Certificates of deposit	\$ 74,776	
	Total Cash Deposits		\$ 123,880
5-3		\$ -	
		\$ -	
		\$ -	
		\$ -	
	Total Investments		\$ -
	Total Cash and Investments		\$ 123,880

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"/> |

PART 6 - CAPITAL ASSETS

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

- 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

6-3

Land	\$ -	\$ -	\$ -	\$ -
Buildings	\$ -	\$ -	\$ -	\$ -
Machinery and equipment	\$ 609,005	\$ 1,555	\$ 2,000-	\$ 608,560
Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ -	\$ -	\$ -	\$ -
Accumulated Depreciation	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -

PART 7 - PENSION INFORMATION

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

- 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? Town of Julesburg

Indicate the contributions from:

Tax (property, SO, sales, etc.):	\$ -
State contribution amount:	\$ 5,075-
Other (gifts, donations, etc.):	\$ -
Total	\$ 5,075-

What is the monthly benefit paid for 20 years of service per retiree as of Jan \$ 50-

PART 8 - BUDGET INFORMATION

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

- 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:

General	34,800
Pension	5,205
Equipment Replacement	68,000

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

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.

PART 10 - GENERAL INFORMATION

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
 If yes: Date Filed:

10-6 Does the entity have a certified Mill Levy?

If yes: Please provide the following mills levied for the year reported (do not report \$ amounts):

Bond Redemption mills	-
General/Other mills	1.521
Total mills	1.521

10-4 Mutual Aid Agreements with Ovid and Sedgwick, Colorado, and Big Springs, Nebraska. Verbal Agreements with Holyoke, Colorado, and Chappell, Nebraska

Print the names of ALL members of current governing body below.

A MAJORITY of the members of the governing body 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	James Dolezal	I <u>James Dolezal</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>3-5-2026</u> My term Expires: <u>May 2020</u>
2	Larry Renquist	I <u>Larry Renquist</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 _____ Date: _____ My term Expires: <u>May 2020</u>
3	K. Joe Kinnie	I <u>K. Joe Kinnie</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 _____ Date: _____ My term Expires: <u>May 2022</u>
4	Kenneth R. Hodges	I <u>Kenneth R. Hodges</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>3-24-2020</u> My term Expires: <u>May 2022</u>
5	Scott Strasser	I <u>Scott Strasser</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>3-16-2020</u> My term Expires: <u>May 2022</u>
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: _____
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: _____