

CONTACT PERSON
PHONE
EMAIL
FAX

Axis International School
Jenny Whitaker
(970) 658-4199
Jwhitaker@axiscolorado.org
(970) 965-0061

CERTIFICATION OF PREPARER

I certify that I am an independent accountant with knowledge of governmental accounting and that the information in the Application is complete and accurate to the best of my knowledge. I am aware that the Audit Law requires that a person independent of the entity complete the application if revenues or expenditure are at least \$100,000 but not more than \$750,000, and that independent means someone who is separate from the entity.

NAME: Cameron Mascoll
TITLE: Financial Consultant
FIRM NAME (if applicable): Mascoll Financial Consulting
ADDRESS: 1890 S Dale Ct Denver Co 80219
PHONE: (917)710-0277
DATE PREPARED: 8/15/2019
RELATIONSHIP TO ENTITY: Consultant

PREPARER (SIGNATURE REQUIRED)
C. Mascoll

Has the entity filed for, or 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.]

YES	NO	If Yes, date filed:
<input type="checkbox"/>	<input checked="" type="checkbox"/>	

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Indicate Name of Fund
NOTE: Attach additional sheets as necessary.

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		Operational	Grant		Fund*	Fund*	
Assets				Assets			
1-1	Cash & Cash Equivalents	\$ 80,261	\$ (3,167)	Cash & Cash Equivalents	\$ -	\$ -	
1-2	Investments	\$ -	\$ -	Investments	\$ -	\$ -	
1-3	Receivables	\$ 2,958	\$ 9,062	Receivables	\$ -	\$ -	
1-4	Due from Other Entities or Funds	\$ -	\$ -	Due from Other Entities or Funds	\$ -	\$ -	
	All Other Assets [specify...]	\$ -	\$ -	Other Current Assets	\$ -	\$ -	
1-5		\$ -	\$ -		\$ -	\$ -	
1-6		\$ -	\$ -	Total Current Assets	\$ -	\$ -	
1-7		\$ -	\$ -	Capital Assets, net (from Part 4-4)	\$ -	\$ -	
1-8		\$ -	\$ -	Other Long Term Assets [specify...]	\$ -	\$ -	
1-9		\$ -	\$ -		\$ -	\$ -	
1-10		\$ -	\$ -		\$ -	\$ -	
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS	\$ 83,219	\$ 5,895	(add lines 1-1 through 1-10) TOTAL ASSETS	\$ -	\$ -	
1-12	TOTAL DEFERRED OUTFLOWS OF RESOURCES	\$ -	\$ -	TOTAL DEFERRED OUTFLOWS OF RESOURCES	\$ -	\$ -	
1-13	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ 83,219	\$ 5,895	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ -	\$ -	
Liabilities				Liabilities			
1-14	Accounts Payable	\$ -	\$ 5,845	Accounts Payable	\$ -	\$ -	
1-15	Accrued Payroll and Related Liabilities	\$ -	\$ -	Accrued Payroll and Related Liabilities	\$ -	\$ -	
1-16	Accrued Interest Payable	\$ -	\$ -	Accrued Interest Payable	\$ -	\$ -	
1-17	Due to Other Entities or Funds	\$ -	\$ -	Due to Other Entities or Funds	\$ -	\$ -	
1-18	All Other Current Liabilities	\$ -	\$ -	All Other Current Liabilities	\$ -	\$ -	
1-19	TOTAL CURRENT LIABILITIES	\$ -	\$ 5,845	TOTAL CURRENT LIABILITIES	\$ -	\$ -	
1-20	All Other Liabilities [specify...]	\$ -	\$ -	Proprietary Debt Outstanding (from Part 4-4)	\$ -	\$ -	
1-21		\$ -	\$ -	Other Liabilities [specify...]:	\$ -	\$ -	
1-22		\$ -	\$ -		\$ -	\$ -	
1-23		\$ -	\$ -		\$ -	\$ -	
1-24		\$ -	\$ -		\$ -	\$ -	
1-25		\$ -	\$ -		\$ -	\$ -	
1-26		\$ -	\$ -		\$ -	\$ -	
1-27		\$ -	\$ -		\$ -	\$ -	
1-28	(add lines 1-19 through 1-27) TOTAL LIABILITIES	\$ -	\$ 5,845	(add lines 1-19 through 1-27) TOTAL LIABILITIES	\$ -	\$ -	
1-29	TOTAL DEFERRED INFLOWS OF RESOURCES	\$ -	\$ -	TOTAL DEFERRED INFLOWS OF RESOURCES	\$ -	\$ -	
Fund Balance				Net Position			
1-30	Nonspendable Prepaid	\$ -	\$ -	Net Investment in Capital Assets	\$ -	\$ -	
1-31	Nonspendable Inventory	\$ -	\$ -		\$ -	\$ -	

1-32	Restricted [specify...]	\$	-	\$	-	Emergency Reserves	\$	-	\$	-
1-33	Committed [specify...]	\$	-	\$	-	Other Designations/Reserves	\$	-	\$	-
1-34	Assigned (Education Exp)	\$	83,219	\$	-	Restricted	\$	-	\$	-
1-35	Unassigned:	\$	-	\$	50	Undesignated/Unreserved/Unrestricted	\$	-	\$	-
1-36	Add lines 1-30 through 1-35 This total should be the same as line 3-33 TOTAL FUND BALANCE	\$	83,219	\$	50	Add lines 1-30 through 1-35 This total should be the same as line 3-33 TOTAL NET POSITION	\$	-	\$	-
1-37	Add lines 1-28, 1-29 and 1-36 This total should be the same as line 1-13 TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND BALANCE	\$	83,219	\$	5,895	Add lines 1-28, 1-29 and 1-36 This total should be the same as line 1-13 TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET POSITION	\$	-	\$	-

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page	
		Operational	Grant		Fund*	Fund*		
Tax Revenue				Tax Revenue				
2-1	Property [include mills levied in Question 10-6]	\$	-	\$	-	\$	-	
2-2	Specific Ownership	\$	-	\$	-	\$	-	
2-3	Sales and Use Tax	\$	-	\$	-	\$	-	
2-4	Other Tax Revenue [specify...]:	\$	-	\$	-	\$	-	
2-5		\$	-	\$	-	\$	-	
2-6		\$	-	\$	-	\$	-	
2-7		\$	-	\$	-	\$	-	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$	-	\$	-	\$	-	
2-9	Licenses and Permits	\$	-	\$	-	\$	-	
2-10	Highway Users Tax Funds (HUTF)	\$	-	\$	-	\$	-	
2-11	Conservation Trust Funds (Lottery)	\$	-	\$	-	\$	-	
2-12	Community Development Block Grant	\$	-	\$	-	\$	-	
2-13	Fire & Police Pension	\$	-	\$	-	\$	-	
2-14	Grants	\$	97,562	\$	167,477	\$	-	
2-15	Donations	\$	-	\$	50	\$	-	
2-16	Charges for Sales and Services	\$	-	\$	-	\$	-	
2-17	Rental Income	\$	-	\$	-	\$	-	
2-18	Fines and Forfeits	\$	-	\$	-	\$	-	
2-19	Interest/Investment Income	\$	-	\$	-	\$	-	
2-20	Tap Fees	\$	-	\$	-	\$	-	
2-21	Proceeds from Sale of Capital Assets	\$	-	\$	-	\$	-	
2-22	All Other [specify...]:	\$	-	\$	-	\$	-	
2-23		\$	-	\$	-	\$	-	
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES	\$	97,562	\$	167,527	\$	-	
Other Financing Sources				Other Financing Sources				
2-25	Debt Proceeds	\$	-	\$	-	\$	-	
2-26	Developer Advances	\$	-	\$	-	\$	-	
2-27	Other [specify...]:	\$	-	\$	-	\$	-	
2-28	Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES	\$	-	\$	-	\$	-	
2-29	Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$	97,562	\$	167,527	\$	-	
							GRAND TOTALS	\$ 265,089

IF GRAND TOTAL REVENUES AND OTHER FINANCING SOURCES for all funds (Line 2-29) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		Operational	Grant		Fund*	Fund*	
Expenditures				Expenditures			

3-1	General Government	\$	-	\$	-
3-2	Judicial	\$	-	\$	-
3-3	Law Enforcement	\$	-	\$	-
3-4	Fire	\$	-	\$	-
3-5	Highways & Streets	\$	-	\$	-
3-6	Solid Waste	\$	-	\$	-
3-7	Contributions to Fire & Police Pension Assoc.	\$	-	\$	-
3-8	Health	\$	-	\$	-
3-9	Culture and Recreation	\$	-	\$	-
3-10	Transfers to other districts	\$	-	\$	-
3-11	Other [specify...]:	\$	-	\$	-
3-12	Educational (Charter School)	\$	14,343	\$	167,477
3-13		\$	-	\$	-
3-14	Capital Outlay	\$	-	\$	-
	Debt Service				
3-15	Principal	\$	-	\$	-
3-16	Interest	\$	-	\$	-
3-17	Bond Issuance Costs	\$	-	\$	-
3-18	Developer Principal Repayments	\$	-	\$	-
3-19	Developer Interest Repayments	\$	-	\$	-
3-20	All Other [specify...]:	\$	-	\$	-
3-21		\$	-	\$	-
3-22	Add lines 3-1 through 3-21	\$	14,343	\$	167,477
	TOTAL EXPENDITURES				
3-23	Interfund Transfers (In)	\$	-	\$	-
3-24	Interfund Transfers Out	\$	-	\$	-
3-25	Other Expenditures (Revenues):	\$	-	\$	-
3-26		\$	-	\$	-
3-27		\$	-	\$	-
3-28		\$	-	\$	-
3-29	(Add lines 3-23 through 3-28)				
	TOTAL TRANSFERS AND OTHER EXPENDITURES	\$	-	\$	-
3-30	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures				
	Line 2-29, less line 3-22, plus line 3-29	\$	83,219	\$	50
3-31	Fund Balance, January 1 from December 31 prior year report	\$	-	\$	-
3-32	Prior Period Adjustment (MUST explain)	\$	-	\$	-
3-33	Fund Balance, December 31				
	Sum of Line 3-30, 3-31, and 3-32				
	This total should be the same as line 1-36.	\$	83,219	\$	50

General Operating & Administrative	\$	-	\$	-	
Salaries	\$	-	\$	-	
Payroll Taxes	\$	-	\$	-	
Contract Services	\$	-	\$	-	
Employee Benefits	\$	-	\$	-	
Insurance	\$	-	\$	-	
Accounting and Legal Fees	\$	-	\$	-	
Repair and Maintenance	\$	-	\$	-	
Supplies	\$	-	\$	-	
Utilities	\$	-	\$	-	
Contributions to Fire & Police Pension Assoc.	\$	-	\$	-	
Other [specify...]	\$	-	\$	-	
Capital Outlay	\$	-	\$	-	
Debt Service					
Principal	\$	-	\$	-	
Interest	\$	-	\$	-	
Bond Issuance Costs	\$	-	\$	-	
Developer Principal Repayments	\$	-	\$	-	
Developer Interest Repayments	\$	-	\$	-	
All Other [specify...]	\$	-	\$	-	
	\$	-	\$	-	
3-22	Add lines 3-1 through 3-21	\$	-	\$	-
	TOTAL EXPENDITURES	\$	-	\$	-
3-23	Net Interfund Transfers (In) Out	\$	-	\$	-
	Other [specify...][enter negative for expense]	\$	-	\$	-
	Depreciation	\$	-	\$	-
	Other Financing Sources (Uses) (from line 2-28)	\$	-	\$	-
	Capital Outlay (from line 3-14)	\$	-	\$	-
	Debt Principal (from line 3-15, 3-18)	\$	-	\$	-
3-29	(Line 3-26, plus line 3-27, less line 3-24, less line 3-25)				
	TOTAL GAAP RECONCILING ITEMS	\$	-	\$	-
	Net Increase (Decrease) in Net Position				
	Line 2-29, less line 3-22, plus line 3-29, plus line 3-23, less line 3-24	\$	-	\$	-
	Net Position, January 1 from December 31 prior year report	\$	-	\$	-
	Prior Period Adjustment (MUST explain)	\$	-	\$	-
	Net Position, December 31				
	Line 3-30 plus line 3-31	\$	-	\$	-
	This total should be the same as line 1-36.	\$	-	\$	-

GRAND TOTAL
\$ 181,820

IF GRAND TOTAL EXPENDITURES for all funds (Line 3-22) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

PART 4 - DEBT OUTSTANDING, ISSUED, AND RETIRED

Please answer the following questions by marking the appropriate boxes.

YES NO

Please use this space to provide any explanations or comments:

- 4-1 Does the entity have outstanding debt? YES NO
- 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

4-4 Please complete the following debt schedule, if applicable: (please only include principal amounts)

	Outstanding at beginning of 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 agree 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? YES NO
- If so: How much? \$ -

7-3 Date the debt was authorized:

4-6 Does the entity intend to issue debt within the next calendar year?

If yes: How much? \$ -

4-7 Does the entity have debt that has been refinanced that it is still responsible for?

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

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? \$ -



PART 5 - CASH AND INVESTMENTS

Please provide the entity's cash deposit and investment balances.		AMOUNT	TOTAL	Please use this space to provide any explanations or comments.
5-1	YEAR-END Total of ALL Checking and Savings accounts	\$ 80,788		
5-2	Certificates of deposit	\$ -		
TOTAL CASH DEPOSITS			\$ 80,788	
Investments (if investment is a mutual fund, please list underlying investments):				
5-3		\$ -		
		\$ -		
		\$ -		
		\$ -		
TOTAL INVESTMENTS			\$ -	
TOTAL CASH AND INVESTMENTS			\$ 80,788	

Please answer the following question by marking in the appropriate box		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.)? If no, MUST explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART 6 - CAPITAL ASSETS

Please answer the following question by marking in the appropriate box		YES	NO	Please use this space to provide any explanations or comments.
6-1	Does the entity have capitalized 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 checked="" type="checkbox"/>	

6-3	Complete the following Capital Assets table for GOVERNMENTAL FUNDS:	Balance - beginning of the year*	Additions	Deletions	Year-End Balance
	Land	\$ -	\$ -	\$ -	\$ -
	Buildings	\$ -	\$ -	\$ -	\$ -
	Machinery and equipment	\$ -	\$ -	\$ -	\$ -
	Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
	Infrastructure	\$ -	\$ -	\$ -	\$ -
	Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
	Other (explain):	\$ -	\$ -	\$ -	\$ -
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
	TOTAL	\$ -	\$ -	\$ -	\$ -

6-4	Complete the following Capital Assets table for PROPRIETARY FUNDS:	Balance - beginning of the year*	Additions	Deletions	Year-End Balance
	Land	\$ -	\$ -	\$ -	\$ -
	Buildings	\$ -	\$ -	\$ -	\$ -
	Machinery and equipment	\$ -	\$ -	\$ -	\$ -
	Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
	Infrastructure	\$ -	\$ -	\$ -	\$ -
	Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
	Other (explain):	\$ -	\$ -	\$ -	\$ -
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
	TOTAL	\$ -	\$ -	\$ -	\$ -

*must agree to prior year ending balance

PART 7 - PENSION INFORMATION

Please answer the following question by marking in the appropriate box		YES	NO	Please use this space to provide any explanations or comments.
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.):	\$ -
TOTAL	\$ -

What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?

\$ -

PART 8 - BUDGET INFORMATION

Please answer the following question by marking in the appropriate box

	YES	NO	N/A	Please use this space to provide any explanations or comments:
8-1 Did the entity file a current year budget with the Department of Local Affairs, in accordance with Section 29-1-113 C.R.S.? If no, MUST explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Entity files budget with Colorado Department of education through its authorizer, CSI
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 budgeted for each fund for the year reported

Fund Name	Budgeted Expenditures
Operational	\$ 22,261
Grant	\$ 229,500
	\$ -
	\$ -

PART 9 - TAX PAYER'S BILL OF RIGHTS (TABOR)

Please answer the following question by marking in the appropriate box

	YES	NO	Please use this space to provide any explanations or comments:
9-1 Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? government from the 3 percent emergency reserve requirement. All governments should determine if they meet	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

PART 10 - GENERAL INFORMATION

Please answer the following question by marking in the appropriate box

	YES	NO	Please use this space to provide any explanations or comments:
10-1 Is this application for a newly formed governmental entity?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

If yes:

Date of formation:

7/1/3018

10-2 Has the entity changed its name in the past or current year?

If Yes:

NEW name

PRIOR name

10-3 Is the entity a metropolitan district?

10-4 Please indicate what services the entity provides:

Education

10-5 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:

CSI

10-6 Does the entity have a certified mill levy?

If yes: Please provide the number of mills levied for the year reported (do not enter \$ amounts):

Bond Redemption mills	0.000
General/Other mills	0.000
Total mills	0.000

Please use this space to provide any additional explanations or comments not previously included:

OSA USE ONLY

Entity Wide:	General Fund	Governmental Funds	Notes
Unrestricted Cash & Investments \$ 80,788	Unrestricted Fund Balan \$ 80,788	Total Tax Revenue \$ 83,219	-
Current Liabilities \$ 5,845	Total Fund Balance \$ 5,845	Revenue Paying Debt Service \$ -	-
Deferred Inflow \$ -	PY Fund Balance \$ -	Total Revenue \$ 83,219	265,089
	Total Revenue \$ 97,562	Total Debt Service Principal \$ -	-
	Total Expenditures \$ 14,343	Total Debt Service Interest \$ -	-
	Interfund In \$ -		
	Interfund Out \$ -	Enterprise Funds	
Governmental	Proprietary	Net Position \$ -	
Total Cash & Investments \$ 77,094	- Current Assets \$ -	- PY Net Position \$ -	
Transfers In \$ -	- Deferred Outflow \$ -	Government-Wide	
Transfers Out \$ -	- Current Liabilities \$ -	- Total Outstanding Debt \$ -	
Property Tax \$ -	- Deferred Inflow \$ -	- Authorized but Unissued \$ -	
Debt Service Principal \$ -	- Cash & Investments \$ -	- Year Authorized \$ -	
Total Expenditures \$ 181,820			
Total Developer Advances \$ -			

PART 12 - GOVERNING BODY APPROVAL

Please answer the following question by marking in the appropriate box

12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

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.

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 \$750,000 or less must have an application prepared by an independent accountant with knowledge of 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.

Board Member	Print Board Member's Name	I, _____, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
1	Tom Siegel	Signed: <u>[Signature]</u> Date: <u>10/16/19</u> My term Expires: <u>2022</u>
2	Darcy Peters	Signed: <u>[Signature]</u> Date: <u>10/16/19</u> My term Expires: <u>2022</u>
3	Lina Xiong	Signed: <u>[Signature]</u> Date: <u>10/16/19</u> My term Expires: <u>2023</u>
4	Claudia Farfan-Lorono	Signed: <u>[Signature]</u> Date: <u>10/16/19</u> My term Expires: <u>2023</u>
5	Wade Turner	Signed: <u>[Signature]</u> Date: <u>10/16/19</u> My term Expires: <u>2023</u>
6	Dr. Mary Vogl	Signed: <u>[Signature]</u> Date: <u>10/16/19</u> My term Expires: <u>2023</u>
7		Signed: _____ Date: _____ My term Expires: _____

EXAMPLE - DO NOT FILL OUT THIS PAGE

This sample resolution/ordinance for exemption from audit is provided as an example of the documentation that is required, the wording may be used as a basis for your own local government document, if needed, however you MUST draft your own ordinance or resolution making any changes where applicable. Legal counsel should be consulted regarding any questions.

AXIS INTERNATIONAL ACADEMY
Fort Collins, Colorado
RESOLUTION NO. _____

AXIS International Academy Resolution for Exemption from Audit

A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR YEAR 2019 FOR AXIS INTERNATIONAL ACADEMY, STATE OF COLORADO.

WHEREAS, the Board of Directors of AXIS International Academy 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 exceeded seven hundred and fifty 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, an application for exemption from audit for AXIS International Academy has been prepared by Cameron Mascoll, Mascoll Financial Consulting, and 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 Directors of AXIS International Academy that the application for exemption from audit for AXIS International Academy for the fiscal year ended June 30th, 2019, has been personally reviewed and is hereby approved by a majority of the governing body of AXIS International Academy; that those members of the governing body 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 AXIS International Academy for the fiscal year ended June 30th, 2019.

ADOPTED THIS 16 DAY OF Oct, 2019.

I, Tom Siegel attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Signed [Signature] Date 10/16/19 My term expires 2022

I, Darcy Peters attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Signed [Signature] Date 10/16/19 My term expires 2022

I, Lina Xiong attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Signed [Signature] Date 10/16/2019 My term expires 2023

I, Claudia Tefan-Lomic attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Signed [Signature] Date 10/16/19 My term expires 2023

I, WADE TURNER attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Signed [Signature] Date 10-16-2019 My term expires 2023

I, Dr. Mary Vogl attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Signed [Signature] Date 10/16/2019 My term expires 2023

I, _____ attest that 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 _____