

# APPLICATION FOR EXEMPTION FROM AUDIT

## SHORT FORM

NAME OF GOVERNMENT  
ADDRESS

Glenwood Meadows Metropolitan District No. 2
710 E. Durant Avenue
Suite W-6
Aspen, Colorado
Michael C. Maple
970-925-9046
mmaple@dunrene.com
970-925-1162

For the Year Ended  
12/31/20  
or fiscal year ended:

CONTACT PERSON  
PHONE  
EMAIL  
FAX

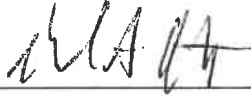
### PART 1 - CERTIFICATION OF PREPARER

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

Michael S. Marolt
Controller
PO Box 8705, Aspen, CO 81612
970-920-1144
3-10-21

### 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"/>

P

## 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	<b>Taxes: Property</b> (report mills levied in Question 10-6)	\$ 4,127	Please use this space to provide any necessary explanations
2-2	Specific ownership	\$ 251	
2-3	Sales and use	\$ -	
2-4	Other (specify): Fee in Lieu Exempt Property	\$ 3,272	
2-5	Licenses and permits	\$ -	
2-6	<b>Intergovernmental: Grants</b>	\$ -	
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	\$ -	
2-14	Charges for utility services	\$ 9	
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) <b>TOTAL REVENUE</b>	\$ 7,699	

## 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.

Line#	Description	Round to nearest Dollar	Please use this space to provide any necessary explanations
3-1	<b>Administrative</b>	\$ -	Please use this space to provide any necessary explanations
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	\$ -	
3-10	Utilities and telephone	\$ -	
3-11	Fire/Police	\$ -	
3-12	Streets and highways	\$ -	
3-13	Public health	\$ -	
3-14	Capital outlay	\$ -	
3-15	Utility operations	\$ -	
3-16	Culture and recreation	\$ -	
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	Tax Collection & Bank Fee	\$ 83	
3-25	Contributions to Other Governments	\$ 7,613	
3-26	(add lines 3-1 through 3-24) <b>TOTAL EXPENDITURES/EXPENSES</b>	\$ 7,696	

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%; margin-top: 5px;"></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%; margin-top: 5px;"></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):	\$ -	\$ -	\$ -	\$ -
	<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes:	How much?	\$ 24,000,000.00	
	Date the debt was authorized:	11/4/2003	
4-6	Does the entity intend to issue debt within the next calendar year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes:	How much?	\$ -	
4-7	Does the entity have debt that has been refinanced that it is still responsible for?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes:	What is the amount outstanding?	\$ -	
4-8	Does the entity have any lease agreements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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"/>	<input type="checkbox"/>
	What are the annual lease payments?	\$ -	

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	\$ 431	
5-2 Certificates of deposit	\$ -	
<b>Total Cash Deposits</b>		<b>\$ 431</b>
Investments (if investment is a mutual fund, please list underlying investments):		
	\$ -	
	\$ -	
	\$ -	
	\$ -	
5-3 <b>Total Investments</b>		<b>\$ -</b>
<b>Total Cash and Investments</b>		<b>\$ 431</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

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	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ -	\$ -	\$ -	\$ -
Accumulated Depreciation	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

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?  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:

Fund Name	Budgeted Expenditures/Expenses
2020 Budget	\$ 7,779

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

Please answer the following question by marking in the appropriate box

- |            |   | Yes                                 | No                       |
|------------|---|-------------------------------------|--------------------------|
| <b>9-1</b> | <b>Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]?</b>   | <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                                  |
|-------------|--|--------------------------|-------------------------------------|
| <b>10-1</b> | <b>Is this application for a newly formed governmental entity?</b>                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes:     | <b>Date of formation:</b> <input style="width: 450px; height: 15px;" type="text"/> |                          |                                     |
| <b>10-2</b> | <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:**

- |             |   |                                     |                          |
|-------------|---|-------------------------------------|--------------------------|
| <b>10-3</b> | <b>Is the entity a metropolitan district?</b>             | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|             | <b>Please indicate what services the entity provides:</b> |                                     |                          |
|             | <input style="width: 600px; height: 15px;" type="text"/>  |                                     |                          |

- |             |   |                          |                                     |
|-------------|---|--------------------------|-------------------------------------|
| <b>10-4</b> | <b>Does the entity have an agreement with another government to provide services?</b> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes:     | <b>List the name of the other governmental entity and the services provided:</b>      |                          |                                     |
|             | <input style="width: 600px; height: 15px;" type="text"/>                              |                          |                                     |

- |             |  |                          |                                     |
|-------------|--|--------------------------|-------------------------------------|
| <b>10-5</b> | <b>Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during</b> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes:     | <b>Date Filed:</b> <input style="width: 450px; height: 15px;" type="text"/>                                  |                          |                                     |

- |             |  |                                     |                          |
|-------------|--|-------------------------------------|--------------------------|
| <b>10-6</b> | <b>Does the entity have a certified Mill Levy?</b> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|-------------|--|-------------------------------------|--------------------------|

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

Bond Redemption mills	-
General/Other mills	5.000
<b>Total mills</b>	<b>5.000</b>

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 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 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	Michael C. Maple	I <u>Michael C. Maple</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>3/11/21</u> My term Expires: <u>May 2023</u>
2	Julie Z. Maple	I <u>Julie Z. Maple</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>3/11/21</u> My term Expires: <u>May 2022</u>
3	Lawrence Marx III	I <u>Lawrence Marx III</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>3/11/21</u> My term Expires: <u>May 2022</u>
4	Suzanne E. Macgregor	I <u>Suzanne E. Macgregor</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 2023</u>
5	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: _____
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: _____

3:54 PM

03/05/21

Accrual Basis

## Glenwood Meadows Metropolitan Dist 2

### Profit & Loss

January through December 2020

	<u>Jan - Dec 20</u>	<u>Jan - Dec 19</u>	<u>\$ Change</u>
<b>Income</b>			
Fee In Lieu	3,271.65 ✓	3,559.10	-287.45
Interest Income	9.17 ✓	0.00	9.17
Property Taxes	4,173.65 ✓	1,526.95	2,646.70
SOT Tax Revenue	251.24 ✓	106.65	144.59
Treasurer Fee	-83.47 ✓	-30.54	-52.93
<b>Total Income</b>	<u>7,622.24</u>	<u>5,162.16</u>	<u>2,460.08</u>
<b>Expense</b>			
XFR to / from Dist 1	7,613.00 ✓	5,162.00	2,451.00
<b>Total Expense</b>	<u>7,613.00</u>	<u>5,162.00</u>	<u>2,451.00</u>
<b>Net Income</b>	<u>9.24</u>	<u>0.16</u>	<u>9.08</u>

## Glenwood Meadows Metropolitan Dist 2

## Balance Sheet

As of December 31, 2020

03/05/21  
Accrual Basis

	Dec 31, 20	Dec 31, 19	\$ Change
<b>ASSETS</b>			
Current Assets			
Checking/Savings			
ANB Operating 3687	430.64	421.40	9.24
Total Checking/Savings	430.64	421.40	9.24
Accounts Receivable			
In Lieu Fee A/R	3,271.65	3,271.65	0.00
Prop Tax A/R	10,889.35	4,174.00	6,715.35
SOT A/R	952.76	333.00	619.76
Total Accounts Receivable	15,113.76	7,778.65	7,335.11
Total Current Assets	15,544.40	8,200.05	7,344.35
<b>TOTAL ASSETS</b>	<b>15,544.40</b>	<b>8,200.05</b>	<b>7,344.35</b>
<b>LIABILITIES &amp; EQUITY</b>			
Liabilities			
Current Liabilities			
Other Current Liabilities			
Deferred In Lieu Fee	3,271.65	3,271.65	0.00
Deferred Property Taxes	10,889.35	4,174.00	6,715.35
Deferred SOT Tax	952.76	333.00	619.76
Total Other Current Liabilities	15,113.76	7,778.65	7,335.11
Total Current Liabilities	15,113.76	7,778.65	7,335.11
Total Liabilities	15,113.76	7,778.65	7,335.11
Equity			
Retained Earnings	421.40	421.24	0.16
Net Income	9.24	0.16	9.08
Total Equity	430.64	421.40	9.24
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<b>15,544.40</b>	<b>8,200.05</b>	<b>7,344.35</b>

**GLENWOOD MEADOWS METROPOLITAN  
DISTRICT No. 2 - RESIDENTIAL  
2020 BUDGET**

**GENERAL FUND**

Current year transfers to book  
Budget year accruals to book

	<b>Actual 2018</b>	<b>Estimated 2019</b>	<b>Budget 2020</b>
Beginning Balance	\$421	\$421	\$421
<b>REVENUE</b>			
Property Taxes - Operating Mill	1,151	1,527	4,174
Specific Ownership Taxes	81	105	333
Excluded Prop Fees in Lieu	3,559	3,559	3,272
Residential Development Fee	0	0	0
Bond Proceeds	0	0	0
Developer Advances	0	0	0
Investment Income	33	0	0
<b>TOTAL</b>	<b>\$4,825</b>	<b>\$5,191</b>	<b>\$7,779</b>
<b>TOTAL FUNDS AVAILABLE</b>	<b>\$5,247</b>	<b>\$5,612</b>	<b>\$8,200</b>
<b>EXPENSES</b>			
Bond Interest	\$0	\$0	\$0
Bond Principal	0	0	0
Bond Issuance/Underwriting	0	0	0
Administration	0	0	0
Project Construction	0	0	0
Tax Collection Fees	23	33	90
Operating Expense	0	0	0
Transfers to District No. 1	4,802	5,158	7,689
<b>TOTAL</b>	<b>\$4,825</b>	<b>\$5,191</b>	<b>\$7,779</b> ✓
<b>ENDING FUND BALANCE</b>	<b>\$421</b>	<b>\$421</b>	<b>\$421</b>

**GLENWOOD MEADOWS METROPOLITAN DISTRICT NO. 2**

**RESOLUTION TO ADOPT BUDGET**

WHEREAS, the Board of Directors ("Board") of Glenwood Meadows Metropolitan District No. 2 ("District") has appointed a budget committee to prepare and submit a proposed 2019 budget to the Board at the proper time; and

WHEREAS, such budget committee has submitted the proposed budget to the Board for its consideration; and

WHEREAS, upon due and proper notice, the budget was open for inspection by the public at a designated place, and a public hearing was held on November 13, 2019, and interested electors were given the opportunity to file or register any objections to the budget; and

WHEREAS, the budget has been prepared to comply with all terms, limitations and exemptions, including, but not limited to, enterprise, reserve transfer and expenditure exemptions, under Article X, Section 20 of the Colorado Constitution ("TABOR") and other laws or obligations which are applicable to or binding upon the District; and

WHEREAS, whatever increases may have been made in the expenditures, like increases were added to the revenues so that the budget remains in balance, as required by law;

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors of Glenwood Meadows Metropolitan District No. 2:

1. That estimated expenditures for each fund are as follows:

General Fund:	\$7,779
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2. That estimated revenues are as follows:

General Fund:

From unappropriated surpluses	\$421
From sources other than general property tax	\$3,605
From general property tax	\$4,174
Total	<u>\$8,200</u>

3. That the budget, as submitted, amended and herein summarized by fund be, and the same hereby is, approved and adopted as the budget of Glenwood Meadows Metropolitan District No. 2 for the 2019 fiscal year.

4. That the budget, as hereby approved and adopted, shall be certified by the Treasurer and/or President of the District to all appropriate agencies and is made a part of the public records of the District.

### TO SET MILL LEVIES

WHEREAS, the amount of money necessary to balance the budget for general operating expenses is \$4.174; and

WHEREAS, the 2019 valuation for assessment of the District, as certified by the County Assessor, is \$834,730.

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors of Glenwood Meadows Metropolitan District No. 2:

1. That for the purpose of meeting all general operating expenses of the District during the 2019 budget year, there is hereby levied a property tax of 5.00 mills upon each dollar of the total valuation for assessment of all taxable property within the District to raise \$4.174.

2. That the Treasurer and/or President of the District is hereby authorized and directed to immediately certify to the County Commissioners of Garfield County, Colorado, the mill levies for the District as hereinabove determined and set.

### TO APPROPRIATE SUMS OF MONEY

WHEREAS, the Board of Directors of the District has made provision in the budget for revenues in an amount equal to the total proposed expenditures as set forth therein; and

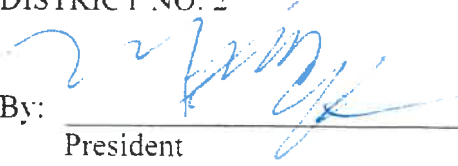
WHEREAS, it is not only required by law, but also necessary to appropriate the revenues provided in the budget to and for the purposes described below, as more fully set forth in the budget, including any interfund transfers listed therein, so as not to impair the operations of District.

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors of Glenwood Meadows Metropolitan District No. 2 that the following sums are hereby appropriated from the revenues of each fund, to each fund, for the purposes stated in the budget:

General Fund:	\$7,779
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Adopted this 13<sup>th</sup> day of November, 2019.

GLENWOOD MEADOWS METROPOLITAN  
DISTRICT NO. 2

By:   
\_\_\_\_\_  
President

ATTEST:


By:   
\_\_\_\_\_  
Secretary

**CERTIFICATION OF BUDGET**

TO: THE DIVISION OF LOCAL GOVERNMENT

This is to certify that the budget, attached hereto, is a true and accurate copy of the budget for Glenwood Meadows Metropolitan District No. 2, for the budget year ending December 31, 2020, as adopted on November 13, 2019.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of Glenwood Meadows Metropolitan District No. 2 in Garfield County, Colorado, this 13 day of November, 2019.

  
\_\_\_\_\_  
President

( S E A L )