

Failure to file an application or denial of the request could cause the local government to lose its exemption from audit for that year and the ensuing year.

In that event, AN AUDIT SHALL BE REQUIRED.

## APPLICATION FOR EXEMPTION FROM AUDIT LONG FORM

NAME OF GOVERNMENT  
ADDRESS

Gateway-UnawEEP Fire Protection District
PO Box 126
42700 Highway 141
Gateway, CO 81522

For the Year Ended  
12/31/2020  
or fiscal year ended:

CONTACT PERSON  
PHONE  
EMAIL  
FAX

### 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:	Robert Ellis, CPA
TITLE	Principal
FIRM NAME (if applicable)	Ellis CPA Firm, PC
ADDRESS	605 25 Rd Ste 200
PHONE	970-241-5040
DATE PREPARED	3/23/2021
RELATIONSHIP TO ENTITY	Independent Certified Public Accountant

#### PREPARER (SIGNATURE REQUIRED)

*Robert Ellis*

4/28/2021

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

If Yes, date filed:

### PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

\* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds	
		Fund*	Fund*		Fund*	Fund*
<b>Assets</b>				<b>Assets</b>		
1-1	Cash & Cash Equivalents	\$ 162,197	\$ -	Cash & Cash Equivalents	\$ -	\$ -
1-2	Investments	\$ -	\$ -	Investments	\$ -	\$ -
1-3	Receivables	\$ 94,927	\$ -	Receivables	\$ -	\$ -
1-4	Due from Other Entities or Funds	\$ -	\$ -	Due from Other Entities or Funds	\$ -	\$ -
	All Other Assets [specify...]			Other Current Assets	\$ -	\$ -
1-5		\$ -	\$ -	<b>Total Current Assets</b>	\$ -	\$ -
1-6		\$ -	\$ -	Capital Assets, net (from Part 6-4)	\$ -	\$ -
1-7		\$ -	\$ -	Other Long Term Assets [specify...]	\$ -	\$ -
1-8		\$ -	\$ -		\$ -	\$ -
1-9		\$ -	\$ -		\$ -	\$ -
1-10		\$ -	\$ -		\$ -	\$ -
1-11	(add lines 1-1 through 1-10) <b>TOTAL ASSETS</b>	\$ 257,124	\$ -	(add lines 1-1 through 1-10) <b>TOTAL ASSETS</b>	\$ -	\$ -
1-12	<b>TOTAL DEFERRED OUTFLOWS OF RESOURCES</b>	\$ -	\$ -	<b>TOTAL DEFERRED OUTFLOWS OF RESOURCES</b>	\$ -	\$ -
1-13	<b>TOTAL ASSETS AND DEFERRED OUTFLOWS</b>	\$ 257,124	\$ -	<b>TOTAL ASSETS AND DEFERRED OUTFLOWS</b>	\$ -	\$ -
<b>Liabilities</b>				<b>Liabilities</b>		
1-14	Accounts Payable	\$ -	\$ -	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	\$ -	\$ -

Please use this space to provide explanation of any items on this page

1-18	All Other Current Liabilities	\$	-	\$	-	All Other Current Liabilities	\$	-	\$	-
1-19	<b>TOTAL CURRENT LIABILITIES</b>	\$	-	\$	-	<b>TOTAL CURRENT LIABILITIES</b>	\$	-	\$	-
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) <b>TOTAL LIABILITIES</b>	\$	-	\$	-	(add lines 1-19 through 1-27) <b>TOTAL LIABILITIES</b>	\$	-	\$	-
1-29	<b>TOTAL DEFERRED INFLOWS OF RESOURCES</b>	\$	94,927	\$	-	<b>TOTAL DEFERRED INFLOWS OF RESOURCES</b>	\$	-	\$	-
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 [specify...]	\$	-	\$	-	Restricted	\$	-	\$	-
1-35	Unassigned:	\$	162,197	\$	-	Undesignated/Unreserved/Unrestricted	\$	-	\$	-
1-36	Add lines 1-30 through 1-35 This total should be the same as line 3-33 <b>TOTAL FUND BALANCE</b>	\$	162,197	\$	-	Add lines 1-30 through 1-35 This total should be the same as line 3-33 <b>TOTAL NET POSITION</b>	\$	-	\$	-
1-37	Add lines 1-28, 1-29 and 1-36 This total should be the same as line 1-13 <b>TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND BALANCE</b>	\$	257,124	\$	-	Add lines 1-28, 1-29 and 1-36 This total should be the same as line 1-13 <b>TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET POSITION</b>	\$	-	\$	-

**PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES**

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds					
		Fund*	Fund*		Fund*	Fund*				
<b>Tax Revenue</b>				<b>Tax Revenue</b>						
2-1	Property [include mills levied in Question 10-6]	\$	112,752	\$	-	Property [include mills levied in Question 10-6]	\$	-	\$	-
2-2	Specific Ownership	\$	12,223	\$	-	Specific Ownership	\$	-	\$	-
2-3	Sales and Use Tax	\$	2,749	\$	-	Sales and Use Tax	\$	-	\$	-
2-4	Other Tax Revenue [specify...]:	\$	618	\$	-	Other Tax Revenue [specify...]:	\$	-	\$	-
2-5		\$	-	\$	-		\$	-	\$	-
2-6		\$	-	\$	-		\$	-	\$	-
2-7		\$	-	\$	-		\$	-	\$	-
2-8	Add lines 2-1 through 2-7 <b>TOTAL TAX REVENUE</b>	\$	128,342	\$	-	Add lines 2-1 through 2-7 <b>TOTAL TAX REVENUE</b>	\$	-	\$	-
2-9	Licenses and Permits	\$	-	\$	-	Licenses and Permits	\$	-	\$	-
2-10	Highway Users Tax Funds (HUTF)	\$	-	\$	-	Highway Users Tax Funds (HUTF)	\$	-	\$	-
2-11	Conservation Trust Funds (Lottery)	\$	-	\$	-	Conservation Trust Funds (Lottery)	\$	-	\$	-
2-12	Community Development Block Grant	\$	-	\$	-	Community Development Block Grant	\$	-	\$	-
2-13	Fire & Police Pension	\$	-	\$	-	Fire & Police Pension	\$	-	\$	-
2-14	Grants	\$	200	\$	-	Grants	\$	-	\$	-
2-15	Donations	\$	10,433	\$	-	Donations	\$	-	\$	-
2-16	Charges for Sales and Services	\$	179,134	\$	-	Charges for Sales and Services	\$	-	\$	-
2-17	Rental Income	\$	-	\$	-	Rental Income	\$	-	\$	-
2-18	Fines and Forfeits	\$	-	\$	-	Fines and Forfeits	\$	-	\$	-
2-19	Interest/Investment Income	\$	-	\$	-	Interest/Investment Income	\$	-	\$	-
2-20	Tap Fees	\$	-	\$	-	Tap Fees	\$	-	\$	-
2-21	Proceeds from Sale of Capital Assets	\$	-	\$	-	Proceeds from Sale of Capital Assets	\$	-	\$	-

Please use this space to provide explanation of any items on this page

2-22	All Other [specify...]:	\$	1,640	\$	-	All Other [specify...]:	\$	-	\$	-	
2-23		\$	-	\$	-		\$	-	\$	-	
2-24	<b>Add lines 2-8 through 2-23 TOTAL REVENUES</b>	\$	319,749	\$	-	<b>Add lines 2-8 through 2-23 TOTAL REVENUES</b>	\$	-	\$	-	
<b>Other Financing Sources</b>						<b>Other Financing Sources</b>					
2-25	Debt Proceeds	\$	-	\$	-	Debt Proceeds	\$	-	\$	-	
2-26	Developer Advances	\$	-	\$	-	Developer Advances	\$	-	\$	-	
2-27	Other [specify...]:	\$	-	\$	-	Other [specify...]:	\$	-	\$	-	
2-28	<b>Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES</b>	\$	-	\$	-	<b>Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES</b>	\$	-	\$	-	
2-29	<b>Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES</b>	\$	319,749	\$	-	<b>Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES</b>	\$	-	\$	-	
										<b>GRAND TOTALS</b>	
										\$	319,749

**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/EXPENSES

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page			
		Fund*	Fund*		Fund*	Fund*				
<b>Expenditures</b>				<b>Expenses</b>						
3-1	General Government	\$	-	\$	-	General Operating & Administrative	\$	-	\$	-
3-2	Judicial	\$	-	\$	-	Salaries	\$	-	\$	-
3-3	Law Enforcement	\$	-	\$	-	Payroll Taxes	\$	-	\$	-
3-4	Fire	\$	329,705	\$	-	Contract Services	\$	-	\$	-
3-5	Highways & Streets	\$	-	\$	-	Employee Benefits	\$	-	\$	-
3-6	Solid Waste	\$	-	\$	-	Insurance	\$	-	\$	-
3-7	Contributions to Fire & Police Pension Assoc.	\$	-	\$	-	Accounting and Legal Fees	\$	-	\$	-
3-8	Health	\$	-	\$	-	Repair and Maintenance	\$	-	\$	-
3-9	Culture and Recreation	\$	-	\$	-	Supplies	\$	-	\$	-
3-10	Transfers to other districts	\$	-	\$	-	Utilities	\$	-	\$	-
3-11	Other [specify...]:	\$	-	\$	-	Contributions to Fire & Police Pension Assoc.	\$	-	\$	-
3-12		\$	-	\$	-	Other [specify...]	\$	-	\$	-
3-13		\$	-	\$	-		\$	-	\$	-
3-14	Capital Outlay	\$	-	\$	-	Capital Outlay	\$	-	\$	-
<b>Debt Service</b>				<b>Debt Service</b>						
3-15	Principal	\$	-	\$	-	Principal	\$	-	\$	-
3-16	Interest	\$	-	\$	-	Interest	\$	-	\$	-
3-17	Bond Issuance Costs	\$	-	\$	-	Bond Issuance Costs	\$	-	\$	-
3-18	Developer Principal Repayments	\$	-	\$	-	Developer Principal Repayments	\$	-	\$	-
3-19	Developer Interest Repayments	\$	-	\$	-	Developer Interest Repayments	\$	-	\$	-
3-20	All Other [specify...]:	\$	-	\$	-	All Other [specify...]:	\$	-	\$	-
3-21		\$	-	\$	-		\$	-	\$	-
3-22	<b>Add lines 3-1 through 3-21 TOTAL EXPENDITURES</b>	\$	329,705	\$	-	<b>Add lines 3-1 through 3-21 TOTAL EXPENSES</b>	\$	-	\$	-
3-23	Interfund Transfers (In)	\$	-	\$	-	Net Interfund Transfers (In) Out	\$	-	\$	-
3-24	Interfund Transfers Out	\$	-	\$	-	Other [specify...][enter negative for expense]	\$	-	\$	-
3-25	Other Expenditures (Revenues):	\$	-	\$	-	Depreciation	\$	-	\$	-
3-26		\$	-	\$	-	Other Financing Sources (Uses) (from line 2-28)	\$	-	\$	-
3-27		\$	-	\$	-	Capital Outlay (from line 3-14)	\$	-	\$	-
3-28		\$	-	\$	-	Debt Principal (from line 3-15, 3-18)	\$	-	\$	-
3-29	<b>(Add lines 3-23 through 3-28) TOTAL TRANSFERS AND OTHER EXPENDITURES</b>	\$	-	\$	-	<b>(Line 3-26, plus line 3-27, less line 3-24, less line 3-25) TOTAL GAAP RECONCILING ITEMS</b>	\$	-	\$	-
3-30	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures Line 2-29, less line 3-22, plus line 3-29	\$	(9,956)	\$	-	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	\$	-	\$	-

3-32 - Prior Period Adjustments were due to corrections to the Balance Sheet

3-31	Fund Balance, January 1 from December 31 prior year report	\$ 173,936	\$ -	Net Position, January 1 from December 31 prior year report	\$ -	\$ -
3-32	Prior Period Adjustment (MUST explain)	\$ (1,783)	\$ -	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.	\$ 162,197	\$ -	Net Position, December 31 Line 3-30 plus line 3-31 This total should be the same as line 1-36.	\$ -	\$ -

**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):	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	\$ -	\$ -	\$ -	\$ -

\*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  
 How much? \$ -  
 If yes: Date the debt was authorized: \_\_\_\_\_
- 4-6 Does the entity intend to issue debt within the next calendar year?  YES  NO  
 If yes: How much? \$ -
- 4-7 Does the entity have debt that has been refinanced that it is still responsible for?  YES  NO  
 If yes: What is the amount outstanding? \$ -
- 4-8 Does the entity have any lease agreements?  YES  NO  
 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?  YES  NO  
 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	\$ 162,197	
5-2	Certificates of deposit	\$ -	
<b>TOTAL CASH DEPOSITS</b>			\$ 162,197

Investments (if investment is a mutual fund, please list underlying investments):

5-3		\$ -	
		\$ -	
		\$ -	
		\$ -	
<b>TOTAL INVESTMENTS</b>			\$ -
<b>TOTAL CASH AND INVESTMENTS</b>			\$ 162,197

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.?  YES  NO  N/A
- 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:  YES  NO  N/A

### 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?  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 for GOVERNMENTAL FUNDS:**

	Balance - beginning of the year*	Additions	Deletions	Year-End Balance
Land	\$ -	\$ -	\$ -	\$ -
Buildings	\$ 2,619	\$ -	\$ -	\$ 2,619
Machinery and equipment	\$ 650,348	\$ -	\$ -	\$ 650,348
Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ -	\$ -	\$ -	\$ -
Accumulated Depreciation (Enter a negative, or credit, balance)	\$ (494,024)	\$ (39,983)	\$ -	\$ (534,007)
<b>TOTAL</b>	<b>\$ 158,943</b>	<b>\$ (39,983)</b>	<b>\$ -</b>	<b>\$ 118,960</b>

**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)	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

\*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?  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>	<b>-</b>

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:  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
General Fund	\$ 431,546
	\$ -
	\$ -
	\$ -

**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)]? Note: An election to exempt the government from the spending limitations of TABOR does not exempt the	<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? If yes: Date of formation: <input style="width: 150px; height: 30px;" 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: NEW name <input style="width: 400px; height: 20px;" type="text"/> PRIOR name <input style="width: 400px; height: 20px;" type="text"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10-3 Is the entity a metropolitan district?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10-4 Please indicate what services the entity provides: <input style="width: 450px; height: 20px;" type="text" value="All Hazards Fire and emergency medical services"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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: <input style="width: 450px; height: 20px;" type="text"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10-6 Does the entity have a certified mill levy? If yes: Please provide the number of <u>mills</u> levied for the year reported (do not enter \$ amounts):	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Bond Redemption mills	0.000
General/Other mills	10.000
<b>Total mills</b>	<b>10.000</b>

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 \$	162,197	Unrestricted Fund Balar \$ 162,197	Total Tax Revenue \$ 128,342
Current Liabilities \$	-	Total Fund Balance \$ 162,197	Revenue Paying Debt Service \$ -
Deferred Inflow \$	94,927	PY Fund Balance \$ 173,936	Total Revenue \$ 319,749
		Total Revenue \$ 319,749	Total Debt Service Principal \$ -
		Total Expenditures \$ 329,705	Total Debt Service Interest \$ -
		Interfund In \$ -	
<b>Governmental</b>		<b>Enterprise Funds</b>	
Total Cash & Investments \$	162,197	Interfund Out \$ -	Net Position \$ -
Transfers In \$	-	<b>Proprietary</b>	PY Net Position \$ -
Transfers Out \$	-	- Current Assets \$	<b>Government-Wide</b>
Property Tax \$	112,752	Deferred Outflow \$	- Total Outstanding Debt \$ -
Debt Service Principal \$	-	- Current Liabilities \$	- Authorized but Unissued \$ -
Total Expenditures \$	329,705	Deferred Inflow \$	- Year Authorized \$ 1/0/1900
Total Developer Advances \$	-	- Cash & Investments \$	
Total Developer Repayments \$	-	- Principal Expense \$	

**PART 12 - 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 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 body. By signing, each individual member is certifying they are a duly elected or appointed officer of the local government. Governing members may be verified. Also by signing, the individual 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 members of the governing body below.		A MAJORITY of the members of the governing body must complete and sign in the column below.	
1	<div style="background-color: #0056b3; color: white; padding: 2px;">Full Name</div> <h2 style="margin: 0;">Dean Rickman</h2>	I, <u>Dean Rickman</u> , 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 <u>12/31/2022</u> Date: <u>4/21/2021</u> My term Expires: _____
2	<div style="background-color: #0056b3; color: white; padding: 2px;">Full Name</div> <h2 style="margin: 0;">Victor Scott Prosser</h2>	I, <u>Victor Scott Prosser</u> , 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 <u>04/29/2021</u> Date: <u>4/29/2021</u> My term Expires: _____
3	<div style="background-color: #0056b3; color: white; padding: 2px;">Full Name</div> <h2 style="margin: 0;">Lisa A. Redd</h2>	I, <u>Lisa A. Redd</u> , 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 <u>04/22/2021</u> Date: <u>4/22/2021</u> My term Expires: _____
4	<div style="background-color: #0056b3; color: white; padding: 2px;">Full Name</div>	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: _____
5	<div style="background-color: #0056b3; color: white; padding: 2px;">Full Name</div>	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: _____
6	<div style="background-color: #0056b3; color: white; padding: 2px;">Full Name</div>	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: _____
7	<div style="background-color: #0056b3; color: white; padding: 2px;">Full Name</div>	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: _____

**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.

**RESOLUTION/ORDINANCE FOR EXEMPTION FROM AUDIT**  
 (Pursuant to Section 29-1-604, C.R.S.)

\_\_\_\_\_  
 Mayor/President/Chairman, etc.

ATTEST.




## Certificate Of Completion

Envelope Id: E55F5FD3093D4470A78846A8B9863725	Status: Completed
Subject: Please sign the Application for Exemption from Audit - Gateway Unawweep Fire Protection District	
Source Envelope:	
Document Pages: 9	Signatures: 4
Certificate Pages: 5	Initials: 0
AutoNav: Enabled	Envelope Originator:
Envelopeld Stamping: Enabled	Cady Bell
Time Zone: (UTC-08:00) Pacific Time (US & Canada)	605 25 RD STE 200
	GRAND JUNCTION, CO 81505
	c.bell@elliscpafirm.com
	IP Address: 72.174.165.229

## Record Tracking

Status: Original 3/29/2021 2:32:17 PM	Holder: Cady Bell c.bell@elliscpafirm.com	Location: DocuSign
Status: Original 3/29/2021 2:37:38 PM	Holder: Client Coordinator cc@elliscpafirm.com	Location: DocuSign

## Signer Events

Signer Events	Signature	Timestamp
Dean Rickman drickman@gufd.org Chairman of the Board, GUFD Security Level: Email, Account Authentication (None)	  Signature Adoption: Pre-selected Style Using IP Address: 72.249.227.115	Sent: 4/21/2021 3:05:23 PM Viewed: 4/21/2021 3:27:03 PM Signed: 4/21/2021 3:28:56 PM

### Electronic Record and Signature Disclosure:

Accepted: 12/30/2020 1:40:19 PM  
ID: 81d73b40-4f8f-423b-93aa-27935f5a9a8d

Lisa Redd Iredd@gufd.org Security Level: Email, Account Authentication (None)	  Signature Adoption: Pre-selected Style Using IP Address: 69.146.174.114	Sent: 4/21/2021 3:05:24 PM Viewed: 4/22/2021 7:50:09 AM Signed: 4/22/2021 7:55:19 AM
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### Electronic Record and Signature Disclosure:

Accepted: 4/22/2021 7:50:09 AM  
ID: 35135c5a-f6f2-43ca-bb70-107a41e75062

Robert Ellis re@elliscpafirm.com CEO Security Level: Email, Account Authentication (None)	  Signature Adoption: Pre-selected Style Using IP Address: 69.146.237.250	Sent: 4/21/2021 3:05:24 PM Resent: 4/28/2021 3:19:15 PM Viewed: 4/28/2021 3:22:48 PM Signed: 4/28/2021 3:23:03 PM
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### Electronic Record and Signature Disclosure:

Accepted: 7/12/2016 9:50:12 AM  
ID: bc2d7225-2981-4297-bf3e-71a516912437

Victor Scott Prosser vprosser@gufd.org Security Level: Email, Account Authentication (None)	  Signature Adoption: Drawn on Device Using IP Address: 97.41.128.198 Signed using mobile	Sent: 4/21/2021 3:05:24 PM Resent: 4/28/2021 3:19:15 PM Viewed: 4/29/2021 9:52:53 AM Signed: 4/29/2021 9:54:37 AM
---	--	--

### Electronic Record and Signature Disclosure:

Signer Events	Signature	Timestamp
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Accepted: 4/29/2021 9:52:53 AM  
ID: b3b40402-68cd-4511-805b-af727cb8a6ad

In Person Signer Events	Signature	Timestamp
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Editor Delivery Events	Status	Timestamp
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Agent Delivery Events	Status	Timestamp
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Intermediary Delivery Events	Status	Timestamp
------------------------------	--------	-----------

Certified Delivery Events	Status	Timestamp
---------------------------	--------	-----------

Carbon Copy Events	Status	Timestamp
--------------------	--------	-----------

Client Coordinator  
cc@elliscpafirm.com  
Ellis CPA Firm PC  
Security Level: Email, Account Authentication (None)  
**Electronic Record and Signature Disclosure:**  
Not Offered via DocuSign

**COPIED**

Sent: 4/20/2021 12:25:23 PM  
Resent: 4/21/2021 3:05:23 PM  
Resent: 4/29/2021 9:54:40 AM

Witness Events	Signature	Timestamp
----------------	-----------	-----------

Notary Events	Signature	Timestamp
---------------	-----------	-----------

Envelope Summary Events	Status	Timestamps
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Envelope Sent	Hashed/Encrypted	3/29/2021 2:37:38 PM
Certified Delivered	Security Checked	4/29/2021 9:52:53 AM
Signing Complete	Security Checked	4/29/2021 9:54:37 AM
Completed	Security Checked	4/29/2021 9:54:37 AM

Payment Events	Status	Timestamps
----------------	--------	------------

Electronic Record and Signature Disclosure
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## **ELECTRONIC RECORD AND SIGNATURE DISCLOSURE**

From time to time, Ellis CPA Firm PC (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign, Inc. (DocuSign) electronic signing system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to these terms and conditions, please confirm your agreement by clicking the 'I agree' button at the bottom of this document.

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At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after signing session and, if you elect to create a DocuSign signer account, you may access them for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

### **Withdrawing your consent**

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

### **Consequences of changing your mind**

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. To indicate to us that you are changing your mind, you must withdraw your consent using the DocuSign 'Withdraw Consent' form on the signing page of a DocuSign envelope instead of signing it. This will indicate to us that you have withdrawn your consent to receive required notices and disclosures electronically from us and you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

### **All notices and disclosures will be sent to you electronically**

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures

electronically from us.

**How to contact Ellis CPA Firm PC:**

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: [cc@elliscpafirm.com](mailto:cc@elliscpafirm.com)

**To advise Ellis CPA Firm PC of your new e-mail address**

To let us know of a change in your e-mail address where we should send notices and disclosures electronically to you, you must send an email message to us at [cc@elliscpafirm.com](mailto:cc@elliscpafirm.com) and in the body of such request you must state: your previous e-mail address, your new e-mail address. We do not require any other information from you to change your email address..

In addition, you must notify DocuSign, Inc. to arrange for your new email address to be reflected in your DocuSign account by following the process for changing e-mail in the DocuSign system.

**To request paper copies from Ellis CPA Firm PC**

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an e-mail to [cc@elliscpafirm.com](mailto:cc@elliscpafirm.com) and in the body of such request you must state your e-mail address, full name, US Postal address, and telephone number. We will bill you for any fees at that time, if any.

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To inform us that you no longer want to receive future notices and disclosures in electronic format you may:

- i. decline to sign a document from within your DocuSign session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an e-mail to [cc@elliscpafirm.com](mailto:cc@elliscpafirm.com) and in the body of such request you must state your e-mail, full name, US Postal Address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

**Required hardware and software**

Operating Systems:	Windows® 2000, Windows® XP, Windows Vista®; Mac OS® X
Browsers:	Final release versions of Internet Explorer® 6.0 or above (Windows only); Mozilla Firefox 2.0 or above (Windows and Mac); Safari™ 3.0 or above (Mac only)
PDF Reader:	Acrobat® or similar software may be required to view and print PDF files
Screen Resolution:	800 x 600 minimum
Enabled Security Settings:	Allow per session cookies

\*\* These minimum requirements are subject to change. If these requirements change, you will be asked to re-accept the disclosure. Pre-release (e.g. beta) versions of operating systems and browsers are not supported.

**Acknowledging your access and consent to receive materials electronically**

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please verify that you were able to read this electronic disclosure and that you also were able to print on paper or electronically save this page for your future reference and access or that you were able to e-mail this disclosure and consent to an address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format on the terms and conditions described above, please let us know by clicking the 'I agree' button below.

By checking the 'I agree' box, I confirm that:

- I can access and read this Electronic CONSENT TO ELECTRONIC RECEIPT OF ELECTRONIC RECORD AND SIGNATURE DISCLOSURES document; and
- I can print on paper the disclosure or save or send the disclosure to a place where I can print it, for future reference and access; and
- Until or unless I notify Ellis CPA Firm PC as described above, I consent to receive from exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to me by Ellis CPA Firm PC during the course of my relationship with you.

**Subject:**  
Please sign the Application for Exemption  
from Audit - Gateway Unawep Fire  
Protection District

**Document:**  
2020\_long\_form\_10-30-20.pdf

**Document Id:**  
e55f5fd3-093d-4470-a788-46a8b9863725

**Recipients:**  
Dean Rickman, Victor Scott Prosser, Lisa  
Redd, Robert Ellis, Client Coordinator

**Date Sent:**  
3/29/2021 | 03:37:38 pm

**Date Created:**  
3/29/2021 | 03:32:17 pm

**Status Date:**  
4/29/2021 | 10:54:40 am

**Location:**

**Holder:**  
Client Coordinator

**Time Zone:**

Time	User	Action	Activity	Status
3/29/2021   03:32:17 pm	Cady Bell	Registered	The envelope was created by Cady Bell	Created
3/29/2021   03:37:38 pm	Cady Bell	Sent Invitations	Cady Bell sent an invitation to Winfield Miller [gmiller1225@gmail.com Taxpayer]	Sent
3/29/2021   03:37:38 pm		Transfer envelope ownership	Transfer of envelope ownership to Client Coordinator at Ellis CPA Firm PC complete	Sent
4/20/2021   01:22:52 pm	Cassidy Ellis	Correction Initiated	Cassidy Ellis initiated correction	Correct
4/20/2021   01:25:22 pm	Cassidy Ellis	Corrected	Removed recipient Winfield Miller (gmiller1225@gmail.com).	Sent
4/20/2021   01:25:22 pm	Cassidy Ellis	Corrected	Removed recipient Lynn Miller (gmiller1225@gmail.com).	Sent
4/20/2021   01:25:22 pm	Cassidy Ellis	Corrected	Removed recipient Client Coordinator (cc@elliscpafirm.com).	Sent
4/20/2021   01:25:23 pm	Cassidy Ellis	Corrected	Removed recipient Dale McClure (d.mcclure@elliscpafirm.com).	Sent
4/20/2021   01:25:23 pm	Cassidy Ellis	Corrected	Removed recipient Cady Bell (c.bell@elliscpafirm.com).	Sent
4/20/2021   01:25:23 pm	Cassidy Ellis	Corrected	Documents modified	Sent



Time	User	Action	Activity	Status
4/20/2021   01:25:23 pm	Cassidy Ellis	Corrected	Added recipient Cassidy Ellis (c.ellis@elliscpafirm.com).	Sent
4/20/2021   01:25:23 pm	Cassidy Ellis	Correction Completed	Cassidy Ellis completed correction	Sent
4/20/2021   01:25:23 pm	Client Coordinator	Sent Invitations	Client Coordinator sent an invitation to Cassidy Ellis [c.ellis@elliscpafirm.com]	Sent
4/21/2021   03:48:35 pm	Client Coordinator	Correction Initiated	Client Coordinator initiated correction	Correct
4/21/2021   04:05:22 pm	Client Coordinator	Corrected	Client Coordinator changed the e-mail address c.ellis@elliscpafirm.com to cc@elliscpafirm.com	Sent
4/21/2021   04:05:22 pm	Client Coordinator	Corrected	Client Coordinator changed the username Cassidy Ellis to Client Coordinator	Sent
4/21/2021   04:05:22 pm	Client Coordinator	Corrected	Documents modified	Sent
4/21/2021   04:05:22 pm	Client Coordinator	Corrected	Recipient Type changed from Signer to CarbonCopy for Client Coordinator	Sent
4/21/2021   04:05:23 pm	Client Coordinator	Corrected	Added recipient Dean Rickman (drickman@gufd.org).	Sent
4/21/2021   04:05:23 pm	Client Coordinator	Corrected	Added recipient Victor Scott Prosser (sprosser@gufd.org).	Sent



Time	User	Action	Activity	Status
4/21/2021   04:05:23 pm	Client Coordinator	Corrected	Added recipient Lisa Redd (lredd@gufd.org).	Sent
4/21/2021   04:05:23 pm	Client Coordinator	Corrected	Added recipient Robert Ellis (re@elliscpafirm.com).	Sent
4/21/2021   04:05:23 pm	Client Coordinator	Correction Completed	Client Coordinator completed correction	Sent
4/21/2021   04:05:24 pm	Client Coordinator	Sent Invitations	Client Coordinator sent an invitation to Client Coordinator [cc@elliscpafirm.com]	Sent
4/21/2021   04:05:24 pm	Client Coordinator	Sent Invitations	Client Coordinator sent an invitation to Dean Rickman [drickman@gufd.org]	Sent
4/21/2021   04:05:24 pm	Client Coordinator	Sent Invitations	Client Coordinator sent an invitation to Victor Scott Prosser [sprosser@gufd.org]	Sent
4/21/2021   04:05:24 pm	Client Coordinator	Sent Invitations	Client Coordinator sent an invitation to Lisa Redd [lredd@gufd.org]	Sent
4/21/2021   04:05:24 pm	Client Coordinator	Sent Invitations	Client Coordinator sent an invitation to Robert Ellis [re@elliscpafirm.com]	Sent
4/21/2021   04:26:48 pm	Dean Rickman	Opened	Dean Rickman opened the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent
4/21/2021   04:27:03 pm	Dean Rickman	Viewed	Dean Rickman viewed the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent

Language	IP	Source
English (us)	69.146.237.250	api
English (us)	69.146.237.250	api
English (us)	69.146.237.250	api
English (us)	69.146.237.250	api
English (us)	69.146.237.250	api
English (us)	69.146.237.250	api
English (us)	69.146.237.250	api
English (us)	69.146.237.250	api
English (us)	69.146.237.250	api
En	72.249.227.115	web
En	72.249.227.115	web

Time	User	Action	Activity	Status
4/21/2021   04:28:56 pm	Dean Rickman	Signed	Dean Rickman signed the envelope	Sent
4/21/2021   04:31:38 pm	Dean Rickman	Viewed	Dean Rickman viewed the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent
4/22/2021   08:49:59 am	Lisa Redd	Opened	Lisa Redd opened the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent
4/22/2021   08:50:10 am	Lisa Redd	Viewed	Lisa Redd viewed the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent
4/22/2021   08:51:30 am	Lisa Redd	Opened	Lisa Redd opened the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent
4/22/2021   08:51:32 am	Lisa Redd	Viewed	Lisa Redd viewed the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent
4/22/2021   08:55:19 am	Lisa Redd	Signed	Lisa Redd signed the envelope	Sent
4/28/2021   04:18:13 pm	Client Coordinator	Correction Initiated	Client Coordinator initiated correction	Correct
4/28/2021   04:18:48 pm	Client Coordinator	Correction Cancelled	Client Coordinator cancelled correction	Sent
4/28/2021   04:19:15 pm	Client Coordinator	Resent	Client Coordinator resent the envelope to Robert Ellis [re@elliscpafirm.com]	Sent

Language	IP	Source
En	72.249.227.115	web
En	72.249.227.115	web
En	69.146.174.114	web
En	69.146.174.114	web
En	69.146.174.114	web
En	69.146.174.114	web
En	69.146.174.114	web
En	69.146.174.114	web
English (us)	69.146.237.250	api
English (us)	69.146.237.250	api
English (us)	69.146.237.250	web

Time	User	Action	Activity	Status
4/28/2021   04:19:15 pm	Client Coordinator	Resent	Client Coordinator resent the envelope to Victor Scott Prosser [sprosser@gufd.org]	Sent
4/28/2021   04:20:07 pm	Robert Ellis	Opened	Robert Ellis opened the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent
4/28/2021   04:20:08 pm	Robert Ellis	Opened	Robert Ellis opened the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent
4/28/2021   04:20:11 pm	Robert Ellis	Opened	Robert Ellis opened the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent
4/28/2021   04:20:12 pm	Robert Ellis	Opened	Robert Ellis opened the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent
4/28/2021   04:20:13 pm	Email URL	Resent Expired Link	New link requested for email sent to re@elliscpafirm.com	Sent
4/28/2021   04:20:15 pm	Robert Ellis	Opened	Robert Ellis opened the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent
4/28/2021   04:22:15 pm	Email URL	Resent Expired Link	New link requested for email sent to re@elliscpafirm.com	Sent
4/28/2021   04:22:42 pm	Robert Ellis	Opened	Robert Ellis opened the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent
4/28/2021   04:22:48 pm	Robert Ellis	Viewed	Robert Ellis viewed the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent

Language	IP	Source
English (us)	69.146.237.250	web
En	69.146.237.250	web
En	69.146.237.250	web
En	69.146.237.250	web
En	69.146.237.250	web
English (us)	69.146.237.250	web
En	69.146.237.250	web
English (us)	69.146.237.250	web
En	69.146.237.250	web
En	69.146.237.250	web

Time	User	Action	Activity	Status
4/28/2021   04:23:03 pm	Robert Ellis	Signed	Robert Ellis signed the envelope	Sent
4/29/2021   10:52:34 am	Victor Scott Prosser	Opened	Victor Scott Prosser opened the envelope [documents: (2020_long_form_10-30-20.pdf)]	Sent
4/29/2021   10:52:54 am	Victor Scott Prosser	Viewed	Victor Scott Prosser viewed the envelope [documents: (2020_long_form_10-30-20.pdf)]	Delivered
4/29/2021   10:54:37 am	Victor Scott Prosser	Signed	Victor Scott Prosser signed the envelope on mobile	Completed
4/29/2021   10:54:39 am	Client Coordinator	Printable Copy Attached to Email	Client Coordinator was sent the document (2020_long_form_10-30-20.pdf) attached to the completed email	Completed
4/29/2021   10:54:40 am	Dean Rickman	Printable Copy Attached to Email	Dean Rickman was sent the document (2020_long_form_10-30-20.pdf) attached to the completed email	Completed
4/29/2021   10:54:40 am	Lisa Redd	Printable Copy Attached to Email	Lisa Redd was sent the document (2020_long_form_10-30-20.pdf) attached to the completed email	Completed
4/29/2021   10:54:41 am	Robert Ellis	Printable Copy Attached to Email	Robert Ellis was sent the document (2020_long_form_10-30-20.pdf) attached to the completed email	Completed
4/29/2021   10:54:41 am	Victor Scott Prosser	Printable Copy Attached to Email	Victor Scott Prosser was sent the document (2020_long_form_10-30-20.pdf) attached to the completed email	Completed
4/29/2021   01:16:37 pm	Lisa Redd	Viewed	Lisa Redd viewed the envelope [documents: (2020_long_form_10-30-20.pdf)]	Completed

Language	IP	Source
En	69.146.237.250	web
En	97.41.128.198	web
En	97.41.128.198	web
En	97.41.128.198	web
English	97.41.128.198	web
English	97.41.128.198	web
English	97.41.128.198	web
English	97.41.128.198	web
English	97.41.128.198	web
En	69.146.174.114	web