

APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

NAME OF GOVERNMENT	SUNSHINE FIRE PROTECTION DISTRICT
ADDRESS	311 COUNTY ROAD 83
	BOULDER, CO 80302
CONTACT PERSON	DAN FISCHER
PHONE	303.440.3658
EMAIL	fischer_dp@outlook.com
FAX	N/A

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

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:	TYRA LITZAU
TITLE	AUDIT DIRECTOR
FIRM NAME (if applicable)	BDO USA, LLP
ADDRESS	2015 CLUBHOUSE DRIVE, SUITE 203, GREELEY, CO 80634
PHONE	970-352-1700
DATE PREPARED	25-Mar-21
RELATIONSHIP TO ENTITY	INDEPENDENT ACCOUNTANT

PREPARER (SIGNATURE REQUIRED)

Tyra Litau

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:
	☐	☒	

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

		Governmental Funds				Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page		
Line #	Description	Fund*	Fund*	Description	Fund*	Fund*				
Assets				Assets						
1-1	Cash & Cash Equivalents	\$	756,598	\$	-	\$	-			
1-2	Investments	\$	-	\$	-	\$	-			
1-3	Receivables	\$	-	\$	-	\$	-			
1-4	Due from Other Entities or Funds	\$	-	\$	-	\$	-			
	All Other Assets [specify...]			Other Current Assets		\$	-			
1-5		\$	-	\$	-	Total Current Assets	\$	-	\$	-
1-6		\$	-	\$	-	Capital Assets, net (from Part 6-4)		\$	-	
1-7		\$	-	\$	-	Other Long Term Assets [specify...]	\$	-	\$	-
1-8		\$	-	\$	-	System Inclusion Fee		\$	-	
1-9		\$	-	\$	-		\$	-	\$	-
1-10		\$	-	\$	-		\$	-	\$	-
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS	\$	756,598	\$	-	(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	\$	756,598	\$	-	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$	-	\$	-
Liabilities				Liabilities						
1-14	Accounts Payable	\$	-	\$	-	Accounts Payable		\$	-	
1-15	Accrued Payroll and Related Liabilities	\$	16,542	\$	-	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	\$	16,542	\$	-	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	\$	16,542	\$	-	(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...] TABOR Emergencies	\$	11,657	\$	-	Emergency Reserves		\$	-	
1-33	Committed [specify...]	\$	-	\$	-	Other Designations/Reserves		\$	-	
1-34	Assigned [specify...]	\$	-	\$	-	Restricted		\$	-	
1-35	Unassigned:	\$	728,399	\$	-	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	\$	740,056	\$	-	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	\$	756,598	\$	-	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

		Governmental Funds				Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
Line #	Description	Fund*	Fund*	Description	Fund*	Fund*		
Tax Revenue				Tax Revenue				
2-1	Property [include mills levied in Question 10-6]	\$	153,750	\$	-	\$	-	
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	\$	153,750	\$	-	\$	-	
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	\$	100	\$	-	\$	-	
2-15	Donations	\$	63,916	\$	-	\$	-	
2-16	Charges for Sales and Services	\$	162,821	\$	-	\$	-	
2-17	Rental Income	\$	-	\$	-	\$	-	
2-18	Fines and Forfeits	\$	-	\$	-	\$	-	
2-19	Interest/Investment Income	\$	6,247	\$	-	\$	-	
2-20	Tap Fees	\$	-	\$	-	\$	-	
2-21	Proceeds from Sale of Capital Assets	\$	-	\$	-	\$	-	
2-22	All Other [specify...]: Insurance income	\$	1,745	\$	-	\$	-	
2-23		\$	-	\$	-	\$	-	
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES	\$	388,579	\$	-	\$	-	
Other Financing Sources				Other Financing Sources			GRAND TOTALS	
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	\$	388,579	\$	-	\$		-
IF GRAND TOTAL REVENUES AND OTHER FINANCING SOURCES for all funds (Line 2-29) are GREATER than \$750,000 <u>STOP</u> . 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*	
	Expenditures			Expenses			
3-1	General Government	\$ 33,636	\$ -	General Operating & Administrative	\$ -	\$ -	
3-2	Judicial	\$ -	\$ -	Salaries	\$ -	\$ -	
3-3	Law Enforcement	\$ -	\$ -	Payroll Taxes	\$ -	\$ -	
3-4	Fire	\$ 243,105	\$ -	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		\$ -	\$ -	Water Purchase	\$ -	\$ -	
3-13		\$ -	\$ -		\$ -	\$ -	
3-14	Capital Outlay	\$ 22,850	\$ -	Capital Outlay	\$ -	\$ -	
	Debt Service			Debt Service			
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	Add lines 3-1 through 3-21 TOTAL EXPENDITURES	\$ 299,591	\$ -	Add lines 3-1 through 3-21 TOTAL EXPENSES	\$ -	\$ -	GRAND TOTAL \$ 299,591
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	(Add lines 3-23 through 3-28) TOTAL TRANSFERS AND OTHER EXPENDITURES	\$ -	\$ -	(Line 3-26, plus line 3-27, less line 3-24, less line 3-25) TOTAL GAAP RECONCILING ITEMS	\$ -	\$ -	
3-30	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures Line 2-29, less line 3-22, plus line 3-29	\$ 88,988	\$ -	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	\$ -	\$ -	
3-31	Fund Balance, January 1 from December 31 prior year report	\$ 651,068	\$ -	Net Position, January 1 from December 31 prior year report	\$ -	\$ -	
3-32	Prior Period Adjustment (MUST explain)	\$ -	\$ -	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.	\$ 740,056	\$ -	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.

Please answer the following questions by marking the appropriate boxes.		YES	NO	Please use this space to provide any explanations or comments:
---	--	-----	----	--

Please use this space to provide any explanations or comments:

- Question 4-1 is "no" so remaining questions 4-2 through 4-4 are not applicable.

- *must agree to prior year ending balance

NO

- ☒

Please provide the entity's cash deposit and investment balances.	AMOUNT	TOTAL	Please use this space to provide any explanations or comments:
---	--------	-------	--

Please use this space to provide any explanations or comments:

- | Category | Percentage |
|-----------|------------|
| Female | 55% |
| Male | 45% |
| Age 18-24 | 30% |
| Age 25-34 | 25% |
| Age 35-44 | 20% |
| Age 45-54 | 15% |
| Age 55-64 | 10% |
| Age 65+ | 5% |
| White | 60% |
| Black | 20% |
| Hispanic | 15% |
| Asian | 5% |
| Other | 5% |

\$	-
\$	756,598

N/A

- ☒

7

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:	☒	☐	☐		
8-2	Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:	☒	☐	☐		
If yes: Please indicate the amount budgeted for each fund for the year reported						
Fund Name		Budgeted Expenditures/Expenses				
General Fund		\$ 402,210				
		\$ -				
		\$ -				
		\$ -				

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 this	☒	☐		

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:					
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:				
Fire protection services					
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:					
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):					
Bond Redemption mills			0.000		
General/Other mills			12.040		
Total mills			12.040		

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	\$	756,598	Unrestricted Fund Balance	\$	728,399	Total Tax Revenue \$ 153,750
Current Liabilities	\$	16,542	Total Fund Balance	\$	740,056	Revenue Paying Debt Service \$ -
Deferred Inflow	\$	-	PY Fund Balance	\$	651,068	Total Revenue \$ 388,579
			Total Revenue	\$	388,579	Total Debt Service Principal \$ -
			Total Expenditures	\$	299,591	Total Debt Service Interest \$ -
			Interfund In	\$	-	
Governmental			Interfund Out	\$	-	Enterprise Funds
Total Cash & Investments	\$	756,598	- Proprietary			Net Position \$ -
Transfers In	\$		- Current Assets	\$		- PY Net Position \$ -
Transfers Out	\$		Deferred Outflow	\$		- Government-Wide
Property Tax	\$	153,750	- Current Liabilities	\$		- Total Outstanding Debt \$ -
Debt Service Principal	\$		Deferred Inflow	\$		- Authorized but Unissued \$ -
Total Expenditures	\$	299,591	- Cash & Investments	\$		- Year Authorized 1/0/1900
Total Developer Advances	\$		- Principal Expense	\$		
Total Developer Repayments	\$					

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?		☒	☐

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	Full Name Alan Kirton	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: May 2022 DocuSigned by: Alan Kirton E610C4D27F1948D4...	
2	Full Name Daniel Fischer	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: May 2023 DocuSigned by: Daniel Fischer 8D70B183F35461...	
3	Full Name Jean Gatz	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: May 2022 DocuSigned by: Jean Gatz 4B8E5D0E740B41B...	
4	Full Name Cathleen Shoenfeld	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: May 2023 DocuSigned by: Cathleen Shoenfeld 3FAB08F3343F435...	
5	Full Name Dick Smith	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: May 2023 DocuSigned by: Richard L. Smith E64C0E7F1A2CAAA...	
6	Full 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. Signed _____ Date: _____ My term Expires: _____	
7	Full 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. 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.)

A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR YEAR 20XX FOR THE (name of government), STATE OF COLORADO.

WHEREAS, the (governing body) of (name of government) 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 exceed 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

[Choose 1 or 2 below, whichever is applicable]

(1) WHEREAS, neither revenue nor expenditures for (name of government) exceeded \$100,000 for Year 20XX; and WHEREAS, an application for exemption from audit for (name of government) has been prepared by (name of individual), a person skilled in governmental accounting; and

OR

(2) WHEREAS, neither revenues nor expenditures for (name of government) exceeded \$750,000 for Year 20XX; and WHEREAS, an application for exemption from audit for (name of government) has been prepared by (name of individual or firm), an 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, ordained by the (governing body) of the (name of government) that the application for exemption from audit for (name of government) for the year ended _____, 20XX, has been personally reviewed and is hereby approved by a majority of the (governing body) of the (name of government); 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 the (name of government) for the year ended _____, 20XX.

ADOPTED THIS ____ day of _____, A.D. 20XX.

Mayor/President/Chairman, etc.

ATTEST:

Town Clerk, Secretary, etc.

Type or Print Names of Members of Governing Body	Date Term Expires	Signature
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

RESOLUTION FOR EXEMPTION FROM AUDIT

(Pursuant to Section 29-1-604, C.R.S.)

A RESOLUTION APPROVING AN EXEMPTION FROM AUDIT FOR FISCAL YEAR 2020 FOR THE **SUNSHINE FIRE PROTECTION DISTRICT**, STATE OF COLORADO.

WHEREAS, the Board of Directors of SUNSHINE FIRE PROTECTION DISTRICT 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 exceed seven hundred 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

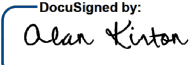
WHEREAS, neither revenues nor expenditures for SUNSHINE FIRE PROTECTION DISTRICT exceeded \$750,000 for Fiscal Year 2020; and

WHEREAS, an application for exemption from audit for SUNSHINE FIRE PROTECTION DISTRICT has been prepared by BDO USA, LLP, an 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 the SUNSHINE FIRE PROTECTION DISTRICT that the application for exemption from audit for SUNSHINE FIRE PROTECTION DISTRICT for the Fiscal Year ended December 31, 2020, has been personally reviewed and is hereby approved by a majority of the Board of Directors of the SUNSHINE FIRE PROTECTION DISTRICT; that those members of the Board of Directors have signified their approval by signing below; and that this resolution shall be attached to, and shall become a part of, the application for exemption from audit of the SUNSHINE FIRE PROTECTION DISTRICT for the fiscal year ended December 31, 2020.

ADOPTED THIS _____, A.D. 2021

DocuSigned by:

E410E4D27F194B4...
Alan Kinton, Chairman

ATTEST:

DocuSigned by:

4BDE550E7AD0A10...
Jean Gatza, Secretary

Type or Print Names of Members of Governing Body	Date Term Expires	Signature
ALAN KINTON	May, 2022	DocuSigned by: Alan Kinton E410E4D27F194B4...
DANIEL FISCHER	May, 2023	DocuSigned by: Daniel Fischer 6E515B185E554B1...
JEAN GATZA	May, 2022	DocuSigned by: Jean Gatzka 46BE550EF40B410...
CATHLEEN SHOENFELD	May, 2023	DocuSigned by: Cathleen Shoenfeld 3FA969F9343F435...
DICK SMITH	May, 2023	DocuSigned by: Richard L. Smith E4AD4EEE1A524AA...



Tel: 970-352-1700
Fax: 970-352-1708
www.bdo.com

2015 Clubhouse Drive, Suite 203
Greeley, CO 80634

Independent Accountant's Compilation Report

Board of Directors
Sunshine Fire Protection District
Boulder, Colorado

Management is responsible for the application for exemption from audit of the Sunshine Fire Protection District (the "District") as of December 31, 2020 included in the accompanying prescribed form in accordance with the Colorado state statute section 29-1-604, C.R.S. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the American Institute of Certified Public Accountants. We did not audit or review the application for exemption from audit included in the accompanying prescribed form, nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the application for exemption from audit included in the accompanying prescribed form.

The application for exemption from audit included in the accompanying prescribed form is presented in accordance with the requirements of Colorado state statute section 29-1-604, C.R.S., and is not intended to be a complete presentation of the District's assets and liabilities.

This report is intended solely for the information and use of Board of directors and management of the District and is not intended to be and should not be used by anyone other than these specified parties.

BDO USA, LLP

March 25, 2021

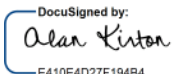
Certificate Of Completion

Envelope Id: 595B6212B3754555988356252CF901A1	Status: Completed
Subject: Please DocuSign: Sunshine Fire Protection District_Audit Exemption_12.31.2020.pdf	
BDO Office Location: Denver	
GFR Client Number: n/a	
Document Type: MSA/SA/SOW/Engagement Document	
Source Envelope:	
Document Pages: 14	Signatures: 12
Certificate Pages: 5	Initials: 0
AutoNav: Enabled	Envelope Originator:
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Electronic Record and Signature Disclosure:
 Accepted: 3/27/2021 7:42:40 AM
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Daniel Fischer fischer_dp@outlook.com Security Level: Email, Account Authentication (None)	 DocuSigned by: Daniel Fischer 0E515B185F554B1... Signature Adoption: Pre-selected Style Using IP Address: 174.29.193.197	Sent: 3/27/2021 7:49:04 AM Viewed: 3/27/2021 10:25:41 AM Signed: 3/27/2021 10:26:34 AM
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Jean Gatza jeangatza@yahoo.com Security Level: Email, Account Authentication (None)	 DocuSigned by: Jean Gatza 40BE550EF40B410... Signature Adoption: Pre-selected Style Using IP Address: 97.118.9.8	Sent: 3/27/2021 10:26:36 AM Viewed: 3/29/2021 10:21:46 AM Signed: 3/29/2021 10:23:13 AM
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 ID: 9cb7e412-c507-4213-a7f0-56e0f9647177

Cathleen Shoenfeld cathyshoenfeld@yahoo.com Security Level: Email, Account Authentication (None)	 DocuSigned by: Cathleen Shoenfeld 3FA060F0343F436... Signature Adoption: Pre-selected Style Using IP Address: 50.207.105.82	Sent: 3/29/2021 10:23:15 AM Viewed: 3/30/2021 7:45:04 PM Signed: 3/30/2021 7:49:06 PM
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Richard L. Smith recjsmith@aol.com Security Level: Email, Account Authentication (None)	 Signature Adoption: Pre-selected Style Using IP Address: 72.42.77.232	Sent: 3/30/2021 7:49:08 PM Viewed: 3/30/2021 8:02:20 PM Signed: 3/30/2021 8:04:42 PM
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In Person Signer Events	Signature	Timestamp
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PJ Burris pburris@bdo.com BDO USA, LLP Security Level: Email, Account Authentication (None)		Sent: 3/26/2021 4:03:40 PM Viewed: 3/26/2021 4:03:40 PM Signed: 3/26/2021 4:03:40 PM
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Tyra Litzau tlitzau@bdo.com BDO USA LLP Security Level: Email, Account Authentication (None)		Sent: 3/30/2021 8:04:44 PM Viewed: 3/30/2021 8:10:37 PM
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Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
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Certified Delivered	Security Checked	3/30/2021 8:02:20 PM
Signing Complete	Security Checked	3/30/2021 8:04:42 PM
Completed	Security Checked	3/30/2021 8:04:44 PM
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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

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