

APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

NAME OF GOVERNMENT
ADDRESS

CM-RETAC
PO BOX 5055
FRISCO, CO 80443
RICHARD CORNELIUS
970-340-7037
RCORNELIUS@ROARINGFORKFIRE.ORG

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:
TITLE
FIRM NAME (if applicable)
ADDRESS
PHONE
DATE PREPARED
RELATIONSHIP TO ENTITY

TERESIA A SWIFT
CPA
SWIFT, SNOW & ASSOCIATES, LLC
PO BOX 5630, FRISCO, CO 80443
970-668-5850
1/23/2021

PREPARER (SIGNATURE REQUIRED)

Teresa A. Swift 1-23-21

Has the entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status during the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-104 (3), C.R.S.]

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

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		Fund*	Fund*		Fund*	Fund*	
Assets				Assets			
1-1	Cash & Cash Equivalents	\$ -	\$ -	Cash & Cash Equivalents	\$ 104,374	\$ -	
1-2	Investments	\$ -	\$ -	Investments	\$ -	\$ -	
1-3	Receivables	\$ -	\$ -	Receivables	\$ -	\$ -	
1-4	Due from Other Entities or Funds	\$ -	\$ -	Due from Other Entities or Funds	\$ -	\$ -	
	All Other Assets [specify...]			Other Current Assets	\$ -	\$ -	
1-5		\$ -	\$ -				
1-6		\$ -	\$ -	Total Current Assets	\$ 104,374	\$ -	
1-7		\$ -	\$ -	Capital Assets, net (from Part 6-4)	\$ -	\$ -	
1-8		\$ -	\$ -	Other Long Term Assets [specify...]	\$ -	\$ -	
1-9		\$ -	\$ -		\$ -	\$ -	
1-10		\$ -	\$ -		\$ -	\$ -	
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS	\$ -	\$ -	(add lines 1-1 through 1-10) TOTAL ASSETS	\$ 104,374	\$ -	
1-12	TOTAL DEFERRED OUTFLOWS OF RESOURCES	\$ -	\$ -	TOTAL DEFERRED OUTFLOWS OF RESOURCES	\$ -	\$ -	
1-13	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ -	\$ -	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ 104,374	\$ -	
Liabilities				Liabilities			
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	\$ -	\$ -	
1-18	All Other Current Liabilities	\$ -	\$ -	All Other Current Liabilities	\$ -	\$ -	
1-19	TOTAL CURRENT LIABILITIES	\$ -	\$ -	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	\$ -	\$ -	(add lines 1-19 through 1-27) TOTAL LIABILITIES	\$ -	\$ -	
1-29	TOTAL DEFERRED INFLOWS OF RESOURCES	\$ -	\$ -	TOTAL DEFERRED INFLOWS OF RESOURCES	\$ -	\$ -	
Fund Balance				Net Position			
1-30	Nonspendable Prepaid	\$ -	\$ -	Net Investment in Capital Assets	\$ -	\$ -	
1-31	Nonspendable Inventory	\$ -	\$ -				
1-32	Restricted [specify...]	\$ -	\$ -	Emergency Reserves	\$ -	\$ -	
1-33	Committed [specify...]	\$ -	\$ -	Other Designations/Reserves	\$ -	\$ -	
1-34	Assigned [specify...]	\$ -	\$ -	Restricted	\$ -	\$ -	
1-35	Unassigned:	\$ -	\$ -	Undesignated/Unreserved/Unrestricted	\$ 104,374	\$ -	
1-36	Add lines 1-30 through 1-35 This total should be the same as line 3-33 TOTAL FUND BALANCE	\$ -	\$ -	Add lines 1-30 through 1-35 This total should be the same as line 3-33 TOTAL NET POSITION	\$ 104,374	\$ -	
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	\$ -	\$ -	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	\$ 104,374	\$ -	

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		Fund*	Fund*		Fund*	Fund*	
Tax Revenue				Tax Revenue			
2-1	Property [include mills levied in Question 10-6]	\$ -	\$ -	Property [include mills levied in Question 10-6]	\$ -	\$ -	
2-2	Specific Ownership	\$ -	\$ -	Specific Ownership	\$ -	\$ -	
2-3	Sales and Use Tax	\$ -	\$ -	Sales and Use Tax	\$ -	\$ -	
2-4	Other Tax Revenue [specify...]:	\$ -	\$ -	Other Tax Revenue [specify...]:	\$ -	\$ -	
2-5		\$ -	\$ -		\$ -	\$ -	
2-6		\$ -	\$ -		\$ -	\$ -	
2-7		\$ -	\$ -		\$ -	\$ -	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ -	\$ -	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ -	\$ -	
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	\$ -	\$ -	Grants	\$ 221,953	\$ -	
2-15	Donations	\$ -	\$ -	Donations	\$ -	\$ -	
2-16	Charges for Sales and Services	\$ -	\$ -	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	\$ 5	\$ -	
2-20	Tap Fees	\$ -	\$ -	Tap Fees	\$ -	\$ -	
2-21	Proceeds from Sale of Capital Assets	\$ -	\$ -	Proceeds from Sale of Capital Assets	\$ -	\$ -	
2-22	All Other [specify...]:	\$ -	\$ -	All Other Credit Card Rebate	\$ 127	\$ -	
2-23		\$ -	\$ -		\$ -	\$ -	
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ -	\$ -	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ 222,085	\$ -	
Other Financing Sources				Other Financing Sources			
2-25	Debt Proceeds	\$ -	\$ -	Debt Proceeds	\$ -	\$ -	
2-26	Developer Advances	\$ -	\$ -	Developer Advances	\$ -	\$ -	
2-27	Other [specify...]:	\$ -	\$ -	Other [specify...]:	\$ -	\$ -	
2-28	Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES	\$ -	\$ -	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	\$ -	\$ -	Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ 222,085	\$ -	GRAND TOTALS
					\$ 222,085	\$ -	\$ 222,085

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*	
	Expenditures			Expenses			
3-1	General Government	\$ -	\$ -	General Operating & Administrative	\$ 8,133	\$ -	
3-2	Judicial	\$ -	\$ -	Salaries	\$ -	\$ -	
3-3	Law Enforcement	\$ -	\$ -	Payroll Taxes	\$ -	\$ -	
3-4	Fire	\$ -	\$ -	Contract Services	\$ 199,173	\$ -	
3-5	Highways & Streets	\$ -	\$ -	Employee Benefits	\$ -	\$ -	
3-6	Solid Waste	\$ -	\$ -	Insurance	\$ 1,533	\$ -	
3-7	Contributions to Fire & Police Pension Assoc.	\$ -	\$ -	Accounting and Legal Fees	\$ 8,810	\$ -	
3-8	Health	\$ -	\$ -	Repair and Maintenance	\$ -	\$ -	
3-9	Culture and Recreation	\$ -	\$ -	Supplies	\$ 375	\$ -	
3-10	Transfers to other districts	\$ -	\$ -	Utilities	\$ -	\$ -	
3-11	Other [specify...]:	\$ -	\$ -	Contributions to Fire & Police Pension Assoc.	\$ -	\$ -	
3-12		\$ -	\$ -	Other Regional Funding	\$ 7,250	\$ -	
3-13		\$ -	\$ -	Special Projects	\$ 2,384	\$ -	
3-14	Capital Outlay	\$ -	\$ -	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	\$ -	\$ -	Add lines 3-1 through 3-21	\$ 227,658	\$ -	GRAND TOTAL
	TOTAL EXPENDITURES	\$ -	\$ -	TOTAL EXPENSES	\$ 227,658	\$ -	\$ 227,658
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)	\$ -	\$ -	(Line 3-26, plus line 3-27, less line 3-24, less line 3-25)	\$ -	\$ -	
	TOTAL TRANSFERS AND OTHER EXPENDITURES	\$ -	\$ -	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	\$ -	\$ -	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	\$ (5,573)	\$ -	
3-31	Fund Balance, January 1 from December 31 prior year report	\$ -	\$ -	Net Position, January 1 from December 31 prior year report	\$ 109,947	\$ -	
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.	\$ -	\$ -	Net Position, December 31 Line 3-30 plus line 3-31 This total should be the same as line 1-36.	\$ 104,374	\$ -	

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

PART 4 - DEBT OUTSTANDING, ISSUED, AND RETIRED

Please answer the following questions by marking the appropriate boxes.

YES NO

Please use this space to provide any explanations or comments:

- 4-1 Does the entity have outstanding debt? YES NO
- 4-2 Is the debt repayment schedule attached? If no, MUST explain: YES NO
- 4-3 Is the entity current in its debt service payments? If no, MUST explain: YES NO

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

	Outstanding at beginning of year	Issued during year	Retired during year	Outstanding at year-end
General obligation bonds	\$ -	\$ -	\$ -	\$ -
Revenue bonds	\$ -	\$ -	\$ -	\$ -
Notes/Loans	\$ -	\$ -	\$ -	\$ -
Leases	\$ -	\$ -	\$ -	\$ -
Developer Advances	\$ -	\$ -	\$ -	\$ -
Other (specify):	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -

*must agree to prior year ending balance

Please answer the following questions by marking the appropriate boxes.

YES NO

- 4-5 Does the entity have any authorized, but unissued, debt? YES NO
- If yes: How much? \$ -
- 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	\$ 104,374	
5-2	Certificates of deposit	\$ -	
TOTAL CASH DEPOSITS			\$ 104,374
Investments (if investment is a mutual fund, please list underlying investments):			
5-3		\$ -	
		\$ -	
		\$ -	
		\$ -	
TOTAL INVESTMENTS			\$ -
TOTAL CASH AND INVESTMENTS			\$ 104,374

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?
- 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:

6-3 Complete the following Capital Assets table for GOVERNMENTAL FUNDS:

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

6-4 Complete the following Capital Assets table for PROPRIETARY FUNDS:

	Balance - beginning of the year*	Additions	Deletions	Year-End Balance
Land	\$ -	\$ -	\$ -	\$ -
Buildings	\$ -	\$ -	\$ -	\$ -
Machinery and equipment	\$ 2,505	\$ -	\$ -	\$ 2,505
Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ -	\$ -	\$ -	\$ -
Accumulated Depreciation (Enter a negative, or credit, balance)	\$ (2,505)	\$ -	\$ -	\$ (2,505)
TOTAL	\$ -	\$ -	\$ -	\$ -

*must agree to prior year ending balance

PART 7 - PENSION INFORMATION

Please answer the following question by marking in the appropriate box

YES NO

Please use this space to provide any explanations or comments:

- 7-1 Does the entity have an "old hire" firemen's pension plan?
- 7-2 Does the entity have a volunteer firemen's pension plan?
- If yes: Who administers the plan?

Indicate the contributions from:

Tax (property, SO, sales, etc.):	\$ -
State contribution amount:	\$ -
Other (gifts, donations, etc.):	\$ -
TOTAL	\$ -
What is the monthly benefit paid for 20 years of service per retirees 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

The budget is filed annually with the CDPHE

If yes: Please indicate the amount budgeted for each fund for the year reported

Fund Name	Budgeted Expenditures/Expenses
General FYE 06/30/21	\$ 233,950
	\$ -
	\$ -
	\$ -

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)]? YES NO
- Note: An election to exempt the government from the spending limitations of TABOR does not exempt the

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? YES NO

If yes: Date of formation:

- 10-2 Has the entity changed its name in the past or current year? YES NO

If Yes: NEW name
 PRIOR name

- 10-3 Is the entity a metropolitan district? YES NO

10-4 Please indicate what services the entity provides:

- 10-5 Does the entity have an agreement with another government to provide services? YES NO

If yes: List the name of the other governmental entity and the services provided:
 Consortium of 6 counties in Central CO, EMS, Trauma services under SEMTAC

- 10-6 Does the entity have a certified mill levy? YES NO

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

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

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

OSA USE ONLY

Entity Wide:		General Fund		Governmental Funds		Notes
Unrestricted Cash & Investments	\$ 104,374	Unrestricted Fund Balan	\$ -	Total Tax Revenue	\$ -	
Current Liabilities	\$ -	Total Fund Balance	\$ -	Revenue Paying Debt Service	\$ -	
Deferred Inflow	\$ -	PY Fund Balance	\$ -	Total Revenue	\$ -	
		Total Revenue	\$ -	Total Debt Service Principal	\$ -	
		Total Expenditures	\$ -	Total Debt Service Interest	\$ -	
		Interfund In	\$ -			
Governmental		Interfund Out	\$ -	Enterprise Funds		
Total Cash & Investments	\$ -	Proprietary	\$ -	Net Position	\$ 104,374	
Transfers In	\$ -	Current Assets	\$ 104,374	PY Net Position	\$ 109,947	
Transfers Out	\$ -	Deferred Outflow	\$ -	Government-Wide		
Property Tax	\$ -	Current Liabilities	\$ -	Total Outstanding Debt	\$ -	
Debt Service Principal	\$ -	Deferred Inflow	\$ -	Authorized but Unissued	\$ -	
Total Expenditures	\$ -	Cash & Investments	\$ 104,374	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	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: _____
2	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: _____
3	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: _____
4	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: _____
5	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: _____
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: _____

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

A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR FISCAL YEAR 2020 FOR THE CENTRAL MOUNTAINS REGIONAL EMERGENCY MEDICAL TRAUMA ADVISORY COUNCIL (CM-RETAC) FOR THE STATE OF COLORADO.

WHEREAS, the Board of Directors of CM-RETAC wishes to claim exemption from the audit requirement 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 five hundred 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 CM-RETAC exceeded \$750,000 for fiscal year 2020; and

WHEREAS, an application for exemption from audit for CM-RETAC has been prepared by Swift, Snow & Associates, LLC, an independent certified public accounting firm, with knowledge of governmental accounting; and

WHEREAS, said application for exemption from audit for CM-RETAC has been completed in accordance with regulation issued by the state auditor.

NOW THEREFORE, be it resolved/ordained by the Board of Directors of the CM-RETAC that the application for exemption from audit for CM-RETAC 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 CM-RETAC; that those member 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 CM-RETAC for the fiscal year ended December 31, 2020.

Adopted the 27th day of January, A.D. 2021



Signature - CM-RETAC CHAIRMAN
James Woodworth

Print Name

ATTEST:

Print Names of
Members of Governing Body:

Josh Hadley

Richard R. Cornelius

Gabriel Muething

Paul C. Mattson

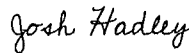
Jeremiah Grantham

Patrick Stanifer

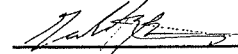
James Bradford

Date
Term
Expires


Signatures:



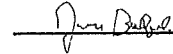
Richard R. Cornelius

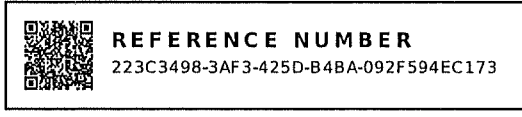


Paul C. Mattson



Patrick Stanifer

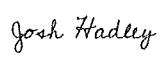
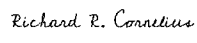
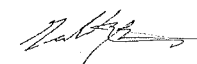


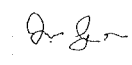


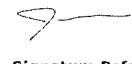
SIGNATURE CERTIFICATE

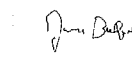
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Reference Number 223C3498-3AF3-425D-B4BA-092F594EC173 Transaction Type Signature Request Sent At 01/29/2021 11:23 EST Executed At 02/26/2021 16:58 EST Identity Method email Distribution Method email Signed Checksum <small>31cef6f1bd7ae260c9245ffcf3dc4040b147a95b9acd1ef24c227c00ca26a1ef</small> Signer Sequencing Disabled Document Passcode Disabled	Document Name 20210129085632404 Filename 20210129085632404.pdf Pages 1 page Content Type application/pdf File Size 14.7 KB Original Checksum <small>5eed3a2e10c0210c625c3756d16e5c0e69a2643e30fcc56b50da1e9a6fe601f56d</small>

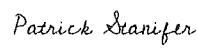
SIGNERS

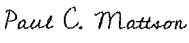
SIGNER	E-SIGNATURE	EVENTS
Name Josh Hadley Email jhadley@chaffeecounty.org Components 2	Status signed Multi-factor Digital Fingerprint Checksum <small>e3b9370f0218355e73a324db45208f05880e6b145283546781524e68a9377613</small> IP Address 174.204.55.231 Device Chrome via Windows Typed Signature  Signature Reference ID AB43F09F	Viewed At 02/26/2021 16:56 EST Identity Authenticated At 02/26/2021 16:58 EST Signed At 02/26/2021 16:58 EST
Name Richard Cornelius Email rcornelius@roaringforkfire.org Components 2	Status signed Multi-factor Digital Fingerprint Checksum <small>a92a6ecdf260e3af0e38c595804fc37146a59a706a580d2ccc73c0eab9df11782</small> IP Address 173.8.251.169 Device Chrome via Windows Typed Signature  Signature Reference ID 41241DF6	Viewed At 02/09/2021 17:45 EST Identity Authenticated At 02/09/2021 17:46 EST Signed At 02/09/2021 17:46 EST
Name Gabe Muething Email gmuething@aspenhospital.org Components 2	Status signed Multi-factor Digital Fingerprint Checksum <small>0d534398fccc814d0220d022cbbabef7e299c433770e0a990dbfb1908af35e0dbd</small> IP Address 65.38.142.237 Device Chrome via Windows Drawn Signature  Signature Reference ID 3B5BB102 Signature Biometric Count 261	Viewed At 02/09/2021 12:32 EST Identity Authenticated At 02/09/2021 12:32 EST Signed At 02/09/2021 12:32 EST

SIGNER	E-SIGNATURE	EVENTS
Name Jeremiah Grantham	Status signed	Viewed At 02/05/2021 11:07 EST
Email jgrantham@svghd.org	Multi-factor Digital Fingerprint Checksum 09cc0ba1379f6e5b448571749e8d6c13bb6a76a8f5e403c934fc57d612e318c33	Identity Authenticated At 02/05/2021 11:07 EST
Components 2	IP Address 65.154.57.226	Signed At 02/05/2021 11:07 EST
	Device Chrome via Windows	
	Drawn Signature 	
	Signature Reference ID 8D596175	
	Signature Biometric Count 196	

Name Jamie Woodworth	Status signed	Viewed At 02/03/2021 10:49 EST
Email jwoodworth@summitfire.org	Multi-factor Digital Fingerprint Checksum 65907db6b67b1e423f983a04c5d9c0f22ae2079fa22e3c2309c7d61e4ea6333	Identity Authenticated At 02/03/2021 10:50 EST
Components 1	IP Address 96.81.55.125	Signed At 02/03/2021 10:50 EST
	Device Chrome via Windows	
	Drawn Signature 	
	Signature Reference ID 33693A3B	
	Signature Biometric Count 58	

Name Jim Bradford	Status signed	Viewed At 02/02/2021 12:21 EST
Email jbradford@ecparamedics.com	Multi-factor Digital Fingerprint Checksum 0003e40fb8815ad65ab7079ca925a62e93b93d772e465e4c798ba9627573a8c3	Identity Authenticated At 02/02/2021 12:23 EST
Components 2	IP Address 50.238.21.210	Signed At 02/02/2021 12:23 EST
	Device Chrome via Windows	
	Drawn Signature 	
	Signature Reference ID C460CD54	
	Signature Biometric Count 573	

Name Patrick Stanifer	Status signed	Viewed At 01/29/2021 12:13 EST
Email patrick.stanifer@hrrmc.net	Multi-factor Digital Fingerprint Checksum 00c836467c4c5915db006c03364f0c620144097e5972c31eeed5c296725464d34	Identity Authenticated At 01/29/2021 12:14 EST
Components 2	IP Address 199.7.99.1	Signed At 01/29/2021 12:14 EST
	Device Chrome via Windows	
	Typed Signature 	
	Signature Reference ID 328C1FE0	

SIGNER	E-SIGNATURE	EVENTS
Name Paul Mattson Email chief@southparkambulance.com Components 2	Status signed Multi-factor Digital Fingerprint Checksum w07c2c2c2c5151079afe029577902fac73320657b5e7fe9ad52b4a390a4 IP Address 69.170.213.71 Device Firefox via Windows Typed Signature  Signature Reference ID D3E2B844	Viewed At 01/29/2021 11:30 EST Identity Authenticated At 01/29/2021 11:31 EST Signed At 01/29/2021 11:31 EST

AUDITS

TIMESTAMP	AUDIT
01/29/2021 11:23 EST	Sarah Cole (sarah@swiftsnow.com) created document '20210129085632404.pdf' on Microsoft Edge via Windows from 70.90.113.41.
01/29/2021 11:23 EST	Jim Bradford (jbradford@ecparamedics.com) was emailed a link to sign.
01/29/2021 11:23 EST	Patrick Stanifer (patrick.stanifer@hrrmc.net) was emailed a link to sign.
01/29/2021 11:23 EST	Paul Mattson (chief@southparkambulance.com) was emailed a link to sign.
01/29/2021 11:23 EST	Gabe Muething (gmuething@aspenhospital.org) was emailed a link to sign.
01/29/2021 11:23 EST	Jeremiah Grantham (jgrantham@svghd.org) was emailed a link to sign.
01/29/2021 11:23 EST	Richard Cornelius (rcornelius@roaringforkfire.org) was emailed a link to sign.
01/29/2021 11:23 EST	Jamie Woodworth (jwoodworth@summitfire.org) was emailed a link to sign.
01/29/2021 11:23 EST	Josh Hadley (jhadley@chaffecounty.org) was emailed a link to sign.
01/29/2021 11:30 EST	Paul Mattson (chief@southparkambulance.com) viewed the document on Firefox via Windows from 69.170.213.71.
01/29/2021 11:31 EST	Paul Mattson (chief@southparkambulance.com) authenticated via email on Firefox via Windows from 69.170.213.71.
01/29/2021 11:31 EST	Paul Mattson (chief@southparkambulance.com) signed the document on Firefox via Windows from 69.170.213.71.
01/29/2021 12:13 EST	Patrick Stanifer (patrick.stanifer@hrrmc.net) viewed the document on Chrome via Windows from 199.7.99.1.
01/29/2021 12:14 EST	Patrick Stanifer (patrick.stanifer@hrrmc.net) authenticated via email on Chrome via Windows from 199.7.99.1.
01/29/2021 12:14 EST	Patrick Stanifer (patrick.stanifer@hrrmc.net) signed the document on Chrome via Windows from 199.7.99.1.
02/02/2021 12:21 EST	Jim Bradford (jbradford@ecparamedics.com) viewed the document on Chrome via Windows from 50.238.21.210.
02/02/2021 12:23 EST	Jim Bradford (jbradford@ecparamedics.com) authenticated via email on Chrome via Windows from 50.238.21.210.
02/02/2021 12:23 EST	Jim Bradford (jbradford@ecparamedics.com) signed the document on Chrome via Windows from 50.238.21.210.
02/02/2021 17:20 EST	Gabe Muething (gmuething@aspenhospital.org) viewed the document on Chrome via Windows from 107.1.179.254.
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02/02/2021 17:22 EST	Gabe Muething (gmuething@aspenhospital.org) viewed the document on Internet Explorer via Windows from 108.62.206.75.
02/03/2021 10:22 EST	Jamie Woodworth (jwoodworth@summitfire.org) was emailed a reminder.
02/03/2021 10:22 EST	Josh Hadley (jhadley@chaffecounty.org) was emailed a reminder.
02/03/2021 10:22 EST	Richard Cornelius (rcornelius@roaringforkfire.org) was emailed a reminder.
02/03/2021 10:22 EST	Gabe Muething (gmuething@aspenhospital.org) was emailed a reminder.
02/03/2021 10:22 EST	Jeremiah Grantham (jgrantham@svghd.org) was emailed a reminder.
02/03/2021 10:49 EST	Jamie Woodworth (jwoodworth@summitfire.org) viewed the document on Chrome via Windows from 96.81.55.125.
02/03/2021 10:50 EST	Jamie Woodworth (jwoodworth@summitfire.org) authenticated via email on Chrome via Windows from 96.81.55.125.
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02/09/2021 12:32 EST	Gabe Muething (gmuething@aspenhospital.org) viewed the document on Chrome via Windows from 65.38.142.237.
02/09/2021 12:32 EST	Gabe Muething (gmuething@aspenhospital.org) viewed the document on Chrome via Windows from 107.22.83.234.
02/09/2021 12:32 EST	Gabe Muething (gmuething@aspenhospital.org) authenticated via email on Chrome via Windows from 65.38.142.237.
02/09/2021 12:32 EST	Gabe Muething (gmuething@aspenhospital.org) signed the document on Chrome via Windows from 65.38.142.237.
02/09/2021 12:34 EST	Josh Hadley (jhadley@chaffecounty.org) was emailed a reminder.

TIMESTAMP**AUDIT**

02/09/2021 12:34 EST

Richard Cornelius (rcornelius@roaringforkfire.org) was emailed a reminder.

02/09/2021 17:45 EST

Richard Cornelius (rcornelius@roaringforkfire.org) viewed the document on Chrome via Windows from 173.8.251.169.

02/09/2021 17:46 EST

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02/09/2021 17:46 EST

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02/11/2021 17:35 EST

Josh Hadley (jhadley@chaffeecounty.org) was emailed a reminder.

02/22/2021 13:33 EST

Josh Hadley (jhadley@chaffeecounty.org) was emailed a reminder.

02/26/2021 16:56 EST

Josh Hadley (jhadley@chaffeecounty.org) viewed the document on Chrome via Windows from 174.204.55.231.

02/26/2021 16:58 EST

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02/26/2021 16:58 EST

Josh Hadley (jhadley@chaffeecounty.org) signed the document on Chrome via Windows from 174.204.55.231.