

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT ADDRESS	Four Mile Ranch Metropolitan District No.4 c/o Fritsche Law LLC 3900 E. Mexico Ave., Suite 300 Denver, CO 80210
CONTACT PERSON	Joan M. Fritsche
PHONE	719-991-4444
EMAIL	joan@fritschelaw.com
FAX	

For the Year Ended
12/31/21
or fiscal year ended:

PART 1 - CERTIFICATION OF PREPARER

I certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to the best of my knowledge.

NAME:	Leslie Monroe
TITLE	District Accountant
FIRM NAME (if applicable)	Accounting Associates, LLC
ADDRESS	PO Box 1892, Gypsum, CO 81637
PHONE	970-379-2729
DATE PREPARED	03/11/2022

PREPARER (SIGNATURE REQUIRED)

<p>DocuSigned by: <small>EE6E16GBED5249F...</small></p>		
<p>Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types</p>	<p>GOVERNMENTAL <small>(MODIFIED ACCRUAL BASIS)</small></p> <p style="text-align: center;"><input checked="" type="checkbox"/></p>	<p>PROPRIETARY <small>(CASH OR BUDGETARY BASIS)</small></p> <p style="text-align: center;"><input type="checkbox"/></p>

PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

Line#	Description	Round to nearest Dollar	Please use this space to provide any necessary explanations
2-1	Taxes: Property (report mills levied in Question 10-6)	\$ -	Please use this space to provide any necessary explanations 2021 tax revenues not released to District until 2022
2-2	Specific ownership	\$ -	
2-3	Sales and use	\$ -	
2-4	Other (specify):	\$ -	
2-5	Licenses and permits	\$ -	
2-6	Intergovernmental: Grants	\$ -	
2-7	Conservation Trust Funds (Lottery)	\$ -	
2-8	Highway Users Tax Funds (HUTF)	\$ -	
2-9	Other (specify):	\$ -	
2-10	Charges for services	\$ -	
2-11	Fines and forfeits	\$ -	
2-12	Special assessments	\$ -	
2-13	Investment income	\$ -	
2-14	Charges for utility services	\$ -	
2-15	Debt proceeds (should agree with line 4-4, column 2)	\$ -	
2-16	Lease proceeds	\$ -	
2-17	Developer Advances received (should agree with line 4-4)	\$ -	
2-18	Proceeds from sale of capital assets	\$ -	
2-19	Fire and police pension	\$ -	
2-20	Donations	\$ -	
2-21	Other (specify): Contribution	\$ 2,010	
2-22		\$ -	
2-23		\$ -	
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE	\$ 2,010	

PART 3 - EXPENDITURES/EXPENSES

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

Line#	Description	Round to nearest Dollar	Please use this space to provide any necessary explanations
3-1	Administrative	\$ -	Please use this space to provide any necessary explanations
3-2	Salaries	\$ -	
3-3	Payroll taxes	\$ -	
3-4	Contract services	\$ -	
3-5	Employee benefits	\$ -	
3-6	Insurance	\$ -	
3-7	Accounting and legal fees		
3-8	Repair and maintenance	\$ -	
3-9	Supplies		
3-10	Utilities and telephone	\$ -	
3-11	Fire/Police	\$ -	
3-12	Streets and highways	\$ -	
3-13	Public health	\$ -	
3-14	Capital outlay	\$ -	
3-15	Utility operations	\$ -	
3-16	Culture and recreation	\$ -	
3-17	Debt service principal (should agree with Part 4)	\$ -	
3-18	Debt service interest	\$ -	
3-19	Repayment of Developer Advance Principal (should agree with line 4-4)	\$ -	
3-20	Repayment of Developer Advance Interest	\$ -	
3-21	Contribution to pension plan (should agree to line 7-2)	\$ -	
3-22	Contribution to Fire & Police Pension Assoc. (should agree to line 7-2)	\$ -	
3-23	Other (specify):		
3-24		\$ -	
3-25		\$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES/EXPENSES	\$ -	

If TOTAL REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER than \$100,000 - **STOP**. You may not use this form. Please use the "Application for Exemption from Audit - LONG FORM".

PART 4 - DEBT OUTSTANDING, ISSUED, AND RETIRED

Please answer the following questions by marking the appropriate boxes.

	Yes	No
4-1 Does the entity have outstanding debt? If Yes, please attach a copy of the entity's Debt Repayment Schedule.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4-2 Is the debt repayment schedule attached? If no, MUST explain:	<input type="checkbox"/>	<input type="checkbox"/>
Service plan authorizing debt is consolidated for Four Mile Ranch Metro Districts No.1,2,3&4. District 1 is the only district that has issued debt. This district has not.		
4-3 Is the entity current in its debt service payments? If no, MUST explain:	<input type="checkbox"/>	<input type="checkbox"/>
4-4 Please complete the following debt schedule, if applicable: (please only include principal amounts)(enter all amount as positive numbers)	Outstanding at end of prior year*	Issued during year
General obligation bonds	\$ -	\$ -
Revenue bonds	\$ -	\$ -
Notes/Loans	\$ -	\$ -
Leases	\$ -	\$ -
Developer Advances	\$ 2,010	\$ 150
Other (specify):	\$ -	\$ -
TOTAL	\$ 2,010	\$ 150

*must tie to prior year ending balance

	Yes	No
4-5 Does the entity have any authorized, but unissued, debt? If yes: How much?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Date the debt was authorized:	09/04/2003	
4-6 Does the entity intend to issue debt within the next calendar year? If yes: How much?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
\$ -		
4-7 Does the entity have debt that has been refinanced that it is still responsible for? If yes: What is the amount outstanding?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
\$ -		
4-8 Does the entity have any lease agreements? If yes: What is being leased?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
What is the original date of the lease?		
Number of years of lease?		
Is the lease subject to annual appropriation?	<input type="checkbox"/>	<input type="checkbox"/>
What are the annual lease payments?	\$ -	

Please use this space to provide any explanations or comments:

PART 5 - CASH AND INVESTMENTS

Please provide the entity's cash deposit and investment balances.

	Amount		Total
5-1 YEAR-END Total of ALL Checking and Savings Accounts	\$ 150		
5-2 Certificates of deposit	\$ -		
Total Cash Deposits			\$ 150
Investments (if investment is a mutual fund, please list underlying investments):			
	\$ -		
	\$ -		
	\$ -		
	\$ -		
Total Investments			\$ -
Total Cash and Investments			\$ 150

Please answer the following questions by marking in the appropriate boxes

	Yes	No	N/A
5-4 Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5-5 Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq. C.R.S.)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If no, MUST use this space to provide any explanations:

PART 6 - CAPITAL ASSETS

Please answer the following questions by marking in the appropriate boxes.

Yes No

- 6-1 Does the entity have capital assets? Yes No
- 6-2 Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.,? If no, MUST explain: Yes No

6-3 Complete the following capital assets table:

	Balance - beginning of the year*	Additions (Must be included in Part 3)	Deletions	Year-End Balance
Land	\$ -	\$ -	\$ -	\$ -
Buildings	\$ -	\$ -	\$ -	\$ -
Machinery and equipment	\$ -	\$ -	\$ -	\$ -
Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ -	\$ -	\$ -	\$ -
Accumulated Depreciation	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -

Please use this space to provide any explanations or comments:

PART 7 - PENSION INFORMATION

Please answer the following questions by marking in the appropriate boxes.

Yes No

- 7-1 Does the entity have an "old hire" firefighters' pension plan? Yes No
- 7-2 Does the entity have a volunteer firefighters' 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.):	\$ -
TOTAL	\$ -
What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?	\$ -

Please use this space to provide any explanations or comments:

PART 8 - BUDGET INFORMATION

Please answer the following questions by marking in the appropriate boxes.

Yes No N/A

- 8-1 Did the entity file a budget with the Department of Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.? Yes No N/A
-
- 8-2 Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: Yes No N/A

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

Governmental/Proprietary Fund Name	Total Appropriations By Fund
General Fund	\$ -

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

Please answer the following question by marking in the appropriate box

Yes No

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 government from the 3 percent emergency reserve requirement. All governments should determine if they meet this requirement of TABOR.

If no, MUST explain:

PART 10 - GENERAL INFORMATION

Please answer the following questions by marking in the appropriate boxes.

Yes No

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: Please list the NEW name & PRIOR name:

10-3 Is the entity a metropolitan district?

Please indicate what services the entity provides:

10-4 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:

10-5 Has the district filed a *Title 32, Article 1 Special District Notice of Inactive Status* during

If yes: Date Filed:

10-6 Does the entity have a certified Mill Levy?

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

Bond Redemption mills	-
General/Other mills	-
Total mills	-

Please use this space to provide any explanations or comments:

PART 11 - GOVERNING BODY APPROVAL

Please answer the following question by marking in the appropriate box		YES	NO
12-1	If you plan to submit this form electronically, have you read the new Electronic Signature Policy?	<input type="checkbox"/>	<input type="checkbox"/>

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

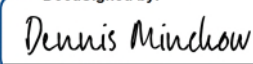
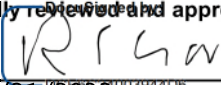
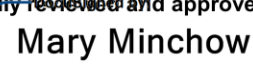
Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as DocuSign or Echosign. Required elements and safeguards are as follows:

- The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.
- The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.
- Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

- 1) Submit the application in hard copy via the US Mail including original signatures.
- 2) Submit the application electronically via email and either,
 - a. Include a copy of an adopted resolution that documents formal approval by the Board, **or**
 - b. Include electronic signatures obtained through a software program such as DocuSign or Echosign in accordance with the requirements noted above.

Print the names of ALL members of current governing body below. Print Board Member's Name		A <u>MAJORITY</u> of the members of the governing body must complete and sign in the column below.
Board Member 1	Dennis Minchow	<p>I, Dennis Minchow, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.</p> <p><small>DocuSigned by:</small>  Signed: _____ <small>3/21/2022</small> Date: _____ My term expires: 2022</p>
Board Member 2	Richard Day	<p>I, Richard Day, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.</p> <p><small>DocuSigned by:</small>  Signed: _____ <small>3/21/2022</small> Date: _____ My term expires: 2022</p>
Board Member 3	Mary Minchow	<p>I, Mary Minchow, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.</p> <p><small>DocuSigned by:</small>  Signed: _____ <small>3/21/2022</small> Date: _____ My term expires: 2022</p>
Board Member 4		
Board Member 5		
Board Member 6		
Board Member 7		

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 2021 FOR THE **Four Mile Ranch Metropolitan District No.4**, STATE OF COLORADO.

WHEREAS, the Board of Directors of Four Mile Ranch Metropolitan District No.4 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 approval of the State Auditor, be exempt from the provision of Section 29-1-603, C.R.S.; and

WHEREAS, neither revenue nor expenditures for Four Mile Ranch Metropolitan District No.4 exceeded \$100,000 for Fiscal Year 2021; and

WHEREAS, an application for exemption from audit for Four Mile Ranch Metropolitan District No.4 has been prepared by Leslie Monroe, a person skilled in governmental accounting; and

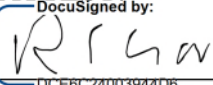
WHEREAS, said application for exemption from audit has been completed in accordance with regulations, issued by the State Auditor.

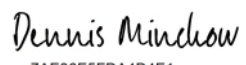
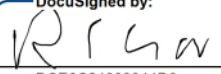
NOW THEREFORE, be it resolved/ordained by the Board of Directors of the Four Mile Ranch Metropolitan District No.4 that the application for exemption from audit for the Four Mile Ranch Metropolitan District No.4 for the Fiscal Year ended December 31, 2021, has been personally reviewed and is hereby approved by a majority of the Board of Directors of the Four Mile Ranch Metropolitan District No.4; 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 Four Mile Ranch Metropolitan District No.4 for the fiscal year ended December 31, 2021.

ADOPTED THIS 14TH day of March, A.D. 2022.

DocuSigned by:

7AE30E5FDA4D4E1...
Dennis Minchow, President

ATTEST:
DocuSigned by:

DCE6C24003944D6
Richard Day, Secretary

Board Members	Term Expires	Signature
Dennis Minchow	2022	<small>DocuSigned by:</small>  <small>7AE30E5FDA4D4E1...</small>
Richard Day	2022	<small>DocuSigned by:</small>  <small>DCE6C24003944D6</small>
Mary Minchow	2022	Mary Minchow <small>7D36DBE43DC9490...</small>

Certificate Of Completion

Envelope Id: 6F5D8C92AF094309B60C19BD23BBF084	Status: Completed
Subject: Please DocuSign: 220320.DOCUSIGN.Four Mile Metro District No. 4 Application for Exemption from ...	
Source Envelope:	
Document Pages: 10	Signatures: 9
Certificate Pages: 2	Initials: 0
AutoNav: Enabled	Envelope Originator: Leslie Monroe leslie.monroe.0@gmail.com
Envelope Stamping: Enabled	IP Address: 24.4.245.67
Time Zone: (UTC-08:00) Pacific Time (US & Canada)	


Record Tracking

Status: Original 3/21/2022 10:24:39 AM	Holder: Leslie Monroe leslie.monroe.0@gmail.com	Location: DocuSign
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Signer Events

Dennis Minchow
minchow.d@comcast.net
Security Level: Email, Account Authentication (None)

Signature

DocuSigned by:

7AE36E5FDA4D4E1...


Signature Adoption: Pre-selected Style
Using IP Address: 65.118.177.233

Timestamp

Sent: 3/21/2022 10:29:40 AM
Viewed: 3/21/2022 12:13:23 PM
Signed: 3/21/2022 12:13:47 PM

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

Leslie Monroe
leslie.monroe.0@gmail.com
Security Level: Email, Account Authentication (None)

DocuSigned by:

EE6E16CBED5249F...

Signature Adoption: Pre-selected Style
Using IP Address: 24.4.245.67

Sent: 3/21/2022 10:29:40 AM
Viewed: 3/21/2022 10:29:57 AM
Signed: 3/21/2022 10:30:06 AM

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

Mary Minchow
chow45@comcast.net
Security Level: Email, Account Authentication (None)

DocuSigned by:

7D36DBE43DC9490...

Signature Adoption: Pre-selected Style
Using IP Address: 65.118.177.233
Signed using mobile

Sent: 3/21/2022 10:29:40 AM
Viewed: 3/21/2022 11:52:41 AM
Signed: 3/21/2022 11:53:40 AM

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

Ricky Day
rday32@gmail.com
Security Level: Email, Account Authentication (None)

DocuSigned by:

DCE6C24003944D6...

Signature Adoption: Drawn on Device
Using IP Address: 69.144.254.78
Signed using mobile

Sent: 3/21/2022 10:29:41 AM
Viewed: 3/21/2022 12:20:02 PM
Signed: 3/21/2022 12:20:30 PM

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

In Person Signer Events

Signature

Timestamp

Editor Delivery Events

Status

Timestamp

Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	3/21/2022 10:29:41 AM
Certified Delivered	Security Checked	3/21/2022 12:20:02 PM
Signing Complete	Security Checked	3/21/2022 12:20:30 PM
Completed	Security Checked	3/21/2022 12:20:30 PM
Payment Events	Status	Timestamps