

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT
ADDRESS

Central Conejos Fire Protection District
PO Box 686
Manassa, CO 81141

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

CONTACT PERSON
PHONE
EMAIL
FAX

Kathleen Newell
719-580-5350
newell.km@outlook.com

PART 1 - CERTIFICATION OF PREPARER

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

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

Kathleen Newell
Asst Town Clerk
Town of Manassa
PO Box 130, Manassa, CO 81141
719-843-5207

PREPARER (SIGNATURE REQUIRED)

Kathleen Newell

Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types

GOVERNMENTAL (MODIFIED ACCRUAL BASIS)	PROPRIETARY (CASH OR BUDGETARY BASIS)
<input type="checkbox"/>	<input checked="" type="checkbox"/>

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)	\$ 42,633	
2-2	Specific ownership	\$ 8,300	
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):	\$ -	
2-22	Interest - County Treasurer	\$ 180	
2-23	Interest - Bank	\$ 120	
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE	\$ 51,233	

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	\$ 1,600	
3-2	Salaries	\$ -	
3-3	Payroll taxes	\$ -	
3-4	Contract services	\$ 1,000	
3-5	Employee benefits	\$ -	
3-6	Insurance	\$ 7,600	
3-7	Accounting and legal fees	\$ 1,500	
3-8	Repair and maintenance	\$ 5,000	
3-9	Supplies	\$ -	
3-10	Utilities and telephone	\$ 3,400	
3-11	Fire/Police	\$ 550	
3-12	Streets and highways	\$ -	
3-13	Public health	\$ -	
3-14	Capital outlay	\$ 18,000	
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): Fireman's Fund	\$ 2,400	
3-24	Fuel Expense	\$ 2,000	
3-25	Fire Training	\$ 5,000	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES/EXPENSES	\$ 48,050	

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"/> |

- | | | | |
|-----|--|--------------------------|--------------------------|
| 4-3 | Is the entity current in its debt service payments? If no, MUST explain: | <input type="checkbox"/> | <input type="checkbox"/> |
|-----|--|--------------------------|--------------------------|

Please complete the following debt schedule, if applicable: (please only include principal amounts)(enter all amount as positive numbers)	Outstanding at end of prior year*	Issued during year	Retired during year	Outstanding at year-end
General obligation bonds	\$ -	\$ -	\$ -	\$ -
Revenue bonds	\$ -	\$ -	\$ -	\$ -
Notes/Loans	\$ -	\$ -	\$ -	\$ -
Leases	\$ -	\$ -	\$ -	\$ -
Developer Advances	\$ -	\$ -	\$ -	\$ -
Other (specify):	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -

*must tie to prior year ending balance

- | | | Yes | No |
|-----|--|--------------------------|-------------------------------------|
| 4-5 | Does the entity have any authorized, but unissued, debt? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

If yes:	How much?	\$ -	
	Date the debt was authorized:		

- | | | | |
|-----|---|--------------------------|-------------------------------------|
| 4-6 | Does the entity intend to issue debt within the next calendar year? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
|-----|---|--------------------------|-------------------------------------|

If yes:	How much?	\$ -	
---------	-----------	------	--

- | | | | |
|-----|--|--------------------------|-------------------------------------|
| 4-7 | Does the entity have debt that has been refinanced that it is still responsible for? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
|-----|--|--------------------------|-------------------------------------|

If yes:	What is the amount outstanding?	\$ -	
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- | | | | |
|-----|--|--------------------------|-------------------------------------|
| 4-8 | Does the entity have any lease agreements? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
|-----|--|--------------------------|-------------------------------------|

If yes:	What is being leased?		
	What is the original date of the lease?		
	Number of years of lease?		
	Is the lease subject to annual appropriation?	<input type="checkbox"/>	<input type="checkbox"/>
	What are the annual lease payments?	\$ -	

Please use this space to provide any explanations or comments:

PART 5 - CASH AND INVESTMENTS

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

		Amount	Total
5-1	YEAR-END Total of ALL Checking and Savings Accounts	\$ 204,048	
5-2	Certificates of deposit	\$ 60,147	
	Total Cash Deposits		\$ 264,195
	Investments (if investment is a mutual fund, please list underlying investments):		
		\$ -	
		\$ -	
		\$ -	
		\$ -	
5-3	Total Investments		\$ -
	Total Cash and Investments		\$ 264,195

- | | | 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5-5 | Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq. C.R.S.)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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

PART 6 - CAPITAL ASSETS

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

- | | | Yes | No |
|-----|--|-------------------------------------|--------------------------|
| 6-1 | Does the entity have capital assets? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 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: | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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	\$ 21,638	\$ -	\$ -	\$ 21,638
Buildings	\$ 127,301	\$ -	\$ -	\$ 127,301
Machinery and equipment	\$ 100,721	\$ -	\$ -	\$ 100,721
Furniture and fixtures	\$ 525	\$ -	\$ -	\$ 525
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ (185,800)	\$ -	\$ -	\$ (185,800)
Accumulated Depreciation	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 64,385	\$ -	\$ -	\$ 64,385

Please use this space to provide any explanations or comments:

PART 7 - PENSION INFORMATION

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

- | | | Yes | No |
|-----|--|--------------------------|-------------------------------------|
| 7-1 | Does the entity have an "old hire" firemen's pension plan? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7-2 | Does the entity have a volunteer firemen's pension plan? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- 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	\$ -

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.? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | |
| 8-2 | Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | |

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

Fund Name	Budgeted Expenditures/Expenses
Operating Expenses	\$ 30,450
General Expenses	\$ 16,400
Capital Outlay	\$ 50,000

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)]? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent emergency reserve requirement. All governments should determine if they meet this requirement of TABOR. | | |

If no, MUST explain:

PART 10 - GENERAL INFORMATION

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

- | | | Yes | No |
|-------------|---|-------------------------------------|-------------------------------------|
| 10-1 | Is this application for a newly formed governmental entity? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes: | Date of formation: <input style="width: 450px;" type="text"/> | | |
| 10-2 | Has the entity changed its name in the past or current year? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes: | Please list the NEW name & PRIOR name:
<input style="width: 600px;" type="text"/> | | |
| 10-3 | Is the entity a metropolitan district? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | Please indicate what services the entity provides:
<input style="width: 600px;" type="text"/> | | |
| 10-4 | Does the entity have an agreement with another government to provide services? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If yes: | List the name of the other governmental entity and the services provided:
<input style="width: 600px;" type="text"/> | | |
| 10-5 | Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes: | Date Filed: <input style="width: 450px;" type="text"/> | | |
| 10-6 | Does the entity have a certified Mill Levy? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If yes: | Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts): | | |

Bond Redemption mills	-
General/Other mills	4.493
Total mills	4.493

Please use this space to provide any explanations or comments:

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	\$ 21,638	\$ -	\$ -	\$ 21,638
Buildings	\$ 127,301	\$ -	\$ -	\$ 127,301
Machinery and equipment	\$ 100,721	\$ -	\$ -	\$ 100,721
Furniture and fixtures	\$ 525	\$ -	\$ -	\$ 525
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ (185,800)	\$ -	\$ -	\$ (185,800)
Accumulated Depreciation	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 64,385	\$ -	\$ -	\$ 64,385

Please use this space to provide any explanations or comments:

PART 7 - PENSION INFORMATION

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

Yes No

- 7-1 Does the entity have an "old hire" firemen's pension plan? Yes No
- 7-2 Does the entity have a volunteer firemen's pension plan? Yes No

If yes: Who administers the plan?

Indicate the contributions from:

Tax (property, SO, sales, etc.):	\$ -
State contribution amount:	\$ -
Other (gifts, donations, etc.):	\$ -
TOTAL	\$ -

What is the monthly benefit paid for 20 years of service per retiree as of Jan

Please use this space to provide any explanations or comments:

PART 8 - BUDGET INFORMATION

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

Yes No N/A

- 8-1 Did the entity file a budget with the Department of Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.? Yes No N/A

- 8-2 Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: Yes No N/A

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

Fund Name	Budgeted Expenditures/Expenses
Operating Expenses	\$ 30,450
General Expenses	\$ 16,400
Capital Outlay	\$ 50,000

Print the names of ALL members of current governing body below.

A MAJORITY of the members of the governing body must complete and sign in the column below.

Board Member	Print Board Member's Name	I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed _____ Date: _____ My term Expires: _____
Board Member 1	Jacob Ortiz	I <u>Jacob D Ortiz</u> , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed <u>Jacob D Ortiz</u> Date: <u>09-15-2022</u> My term Expires: <u>May 2024</u>
Board Member 2	Ross D. Lopez	I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed <u>Ross D Lopez</u> Date: <u>Dec 13-2022</u> My term Expires: <u>May 2024</u>
Board Member 3	Rodney King	I <u>Rodney King</u> , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed <u>Rodney King</u> Date: <u>12-13-2022</u> My term Expires: <u>May 2024</u>
Board Member 4	Tim King	I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed _____ Date: _____ My term Expires: <u>May 2024</u>
Board Member 5	Doug Bagwell	I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed <u>Doug Bagwell</u> Date: <u>12-13-2022</u> My term Expires: <u>May 2024</u>
Board Member 6		I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed _____ Date: _____ My term Expires: _____
Board Member 7		I _____, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed _____ Date: _____ My term Expires: _____

CENTRAL CONEJOS FIRE PROTECTION DISTRICT
PO Box 686
Manassa, CO 81141

FINANCIAL STATEMENTS
AND INDEPENDENT AUDITOR'S REPORT

DECEMBER 31, 2021

**CENTRAL CONEJOS FIRE PROTECTION DISTRICT
DECEMBER 31, 2021**

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INDEPENDENT AUDITOR'S REPORT

Board of Directors
Central Conejos Fire Protection District
PO Box 686
Manassa, CO 81141

I have examined the accompanying statements of assets and liabilities from cash transactions of Central Conejos Fire Protection District as of December 31, 2021, and the related statement of revenues collected and expenses paid for the year ended. These financial statements are the responsibility of the company's management. My responsibility is to express an opinion on these financial statements based on my audit.

The examination was made in accordance with generally accepted auditing standards. Those standards require that I plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial presentation.

These financial statements were prepared on the basis of cash receipts and disbursements, a comprehensive basis of accounting other than generally accepted accounting principles.

In my opinion, the financial statements referred to above, present fairly, in all material respects, the assets and liabilities arising from cash transactions of Central Conejos Fire Protection District as of December 31, 2021, and its revenues collected and expenses paid during the year then ended.

Respectfully submitted,

Marlo Anderson
Certified Public Accountant
December 13, 2022

CENTRAL CONEJOS FIRE PROTECTION DISTRICT

STATEMENT OF ASSETS AND LIABILITIES ARISING FROM CASH TRANSACTIONS

December 31, 2021

ASSETS:

Current Assets

Cash on Deposit - Checking (Community Banks)	203,511
Certificate of Deposit - Community Banks	45,983
Certificate of Deposit - Community Banks	14,159
Total Current Assets	<u>\$ 263,653</u>

Fixed Assets

Land	21,638
Building	127,301
Machinery & Equipment	100,721
Furniture & Fixtures	525
Accumulated Depreciation	(185,800)
Total Fixed Assets	<u>\$ 64,385</u>

TOTAL ASSETS \$ 328,038

LIABILITIES AND EQUITY

Liabilities

Total Liabilities	<u>\$ 0</u>
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Equity

Opening Balance Equity	110,282
Retained Earnings	217,756
Total Equity	<u>\$ 328,038</u>

TOTAL LIABILITIES AND EQUITY \$ 328,038

CENTRAL CONEJOS FIRE PROTECTION DISTRICT

STATEMENT OF REVENUES COLLECTED AND EXPENSES PAID

For the Period January 1, 2021 to December 31, 2021

Revenues

Property Taxes	39,793
Specific Ownership Tax	7,911
Interest - Treasurer	172
Interest - Bank	212
Miscellaneous	<u>20</u>

TOTAL REVENUES \$ 48,108

Expenses

Communications	457
Equipment	77
Fireman's Fund	2,400
Fuel	262
Insurance	<u>6,880</u>

DIRECT FIRE PROTECTION EXPENSES \$ 10,076

Accounting	1,200
Miscellaneous	335
Repairs & Maintenance	478
Treasurer Fees	1,125
Utilities	<u>2,721</u>

GENERAL EXPENSES \$ 5,859

TOTAL EXPENSES \$ 15,935

Revenues Over (Under) Expenses \$ 32,173

CENTRAL CONEJOS FIRE PROTECTION DISTRICT

STATEMENT OF REVENUES COLLECTED AND EXPENSES PAID

For the Years Ended December 31, 2020 & December 31, 2021

	2020	2021
<u>Revenues</u>		
Property Taxes	39,154	39,793
Specific Ownership Tax	8,654	7,911
Interest - Treasurer	233	172
Interest - Bank	309	212
Miscellaneous	5,469	20
	<u> </u>	<u> </u>
TOTAL REVENUES	\$ 53,819	\$ 48,108
<u>Expenses</u>		
Communications	443	457
Equipment	3,298	77
Fireman's Fund	2,400	2,400
Fuel	429	262
Insurance	6,884	6,880
	<u> </u>	<u> </u>
DIRECT FIRE PROTECTION EXPENSES	\$ 13,454	\$ 10,076
Accounting	1,500	1,200
Miscellaneous	308	335
Repairs & Maintenance	7,616	478
Treasurer Fee	1,182	1,125
Utilities	2,243	2,721
	<u> </u>	<u> </u>
GENERAL EXPENSES	\$ 12,849	\$ 5,859
TOTAL EXPENSES	\$ 26,303	\$ 15,935
<u>Revenues Over (Under) Expenses</u>	\$ 27,516	\$ 32,173

CENTRAL CONEJOS FIRE PROTECTION DISTRICT

STATEMENT OF BUDGET - PROPOSED AND ACTUAL

For the Year Ended December 31, 2021

	PROPOSED	ACTUAL	VARIANCE
Property Taxes	39,872	39,793	79
Specific Ownership Tax	8,000	7,911	89
Interest-Treasurer	180	172	8
Interest-Bank	120	212	(92)
Miscellaneous Income	-	20	(20)
Transfer from Fund Balance	50,000	-	50,000
TOTAL REVENUES	<u>\$ 98,172</u>	<u>\$ 48,108</u>	<u>\$ 50,064</u>
Communications	500	457	43
Equipment	18,000	77	17,923
Fireman's Fund	2,400	2,400	-
Fuel	2,000	262	1,738
Insurance	7,600	6,880	720
Accounting	1,500	1,200	300
Fire Training	5,000	-	5,000
Furniture & Equipment	-	-	-
Miscellaneous Expense	1,000	335	665
Repairs & Maintenance	5,000	478	4,522
Treasurer Fees	1,600	1,125	475
Utilities	3,400	2,721	679
Capital Outlay	50,000	-	50,000
TOTAL EXPENSES	<u>\$ 98,000</u>	<u>\$ 15,935</u>	<u>\$ 82,065</u>
NET INCOME OR (LOSS)	<u>\$ 172</u>	<u>\$ 32,173</u>	

Central Conejos Fire Protection District
Resolution/Ordinance for Exemption from Audit
(Pursuant to Section 29-1-604, C.R.S.)
Resolution/Ordinance approving an exemption from audit for the fiscal year 2021 for
The Central Conejos Fire Protection District, State of Colorado

WHEREAS, the Board of Directors of Central Conejos Fire Protection District wishes to claim exemption from 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

WHEREAS, neither revenue nor expenditures for Central Conejos Fire Protection District exceeded one hundred thousand dollars (\$100,000) for the fiscal year 2021; and

WHEREAS, an application for exemption from audit for Central Conejos Fire Protection District has been prepared by Kathleen Newell, 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 the Central Conejos Fire Protection District that the application for exemption from audit for the Central Conejos Fire Protection District for the fiscal year ended December 31, 2021, has been personally reviewed and is hereby approved by the majority of the Board of Directors of the Central Conejos 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 part of the application for exemption from audit of the Central Conejos Fire Protection District for the fiscal year ended December 31, 2021.

ADOPTED THIS 15TH DAY OF SEPTEMBER, A.D., 2022



President / Chairman



Secretary

<u>Members of the Governing Body</u>	<u>Date Term Expires</u>	<u>Signature</u>
Jacob Ortiz	May 2024	
Ross D. Lopez	May 2024	
Rodney King	May 2022	
Tim King	May 2022	_____
Doug Bagwell	May 2022	