APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT	Wiley Rural Fire Protection District		For the Year Ended
ADDRESS	PO Box 22		12/31/21
	Wiley, Colorado 81092	Amile	or fiscal year ended:
CONTACT PERSON	Carol Grogan		
PHONE	719-353-1197		
EMAIL	wileyfire22@gmail.com		1
FAX			1
	PART 1 - CERTIFICATIO	N OF PREPARER	
	vernmental accounting and that the informa		ete and accurate, to the best of
my kπowledge.			
NAME:	Gary L. Anderson		
TITLE	CPA		
FIRM NAME (if applicable)	Anderson & Company, P.C CPA's		
ADDRESS	PO Box 1077 201 E Parmenter St	Lamar CO 81052	
PHONE	719-336-7785		
DATE PREPARED	3/25/2022		
PREPARER (SIGNATU	IDE BEALIBED)		
TIVEL MIXELY GIGNATE	JAE REGUIRED)		
Gray An	400		
	lowing financial information is recorded	GOVERNMENTAL (MODIFIED ACCRUAL BASIS)	PROPRIETARY (CASH OR BUDGETARY BASIS)
lusing Governmental or Proprie	tary tung types – – – – – – – – – – – – – – – – – – –	_	_

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
2-1	Taxes:	Property	(report mills levied in Question 10-6)	\$ 67,468	space to provide
2-2		Specific own	ership	\$ -	any necessary
2-3		Sales and us	e	\$ -	explanations
2-4		Other (specif	y):	\$ -	
2-5	Licenses and perm	its		\$ -	
2-6	Intergovernmental:		Grants	\$ -	
2-7			Conservation Trust Funds (Lottery)	\$ -	
2-8			Highway Users Tax Funds (HUTF)	\$ -	1
2-9			Other (specify):	\$ -	
2-10	Charges for service	es		\$ -	
2-11	Fines and forfeits			\$ -	7
2-12	Special assessmen	ıts	Ì	\$ -	Ī
2-13	Investment income			\$ 398	<u> </u>
2-14	Charges for utility:	services		\$ -	7
2-15	Debt proceeds		(should agree with line 4-4, column 2)	\$ -	
2-16	Lease proceeds			\$ -	
2-17	Developer Advance	s received	(should agree with line 4-4)	\$ -	7
2-18	Proceeds from sale	of capital ass	ets	\$ -	7
2-19	Fire and police pen	sion		\$ -	
2-20	Donations			\$ 509	5
2-21	Other (specify):			\$ -	7
2-22				\$ -	7
2-23				\$ -	7
2-24		(add	lines 2-1 through 2-23) TOTAL REVENUE	\$ 68,37	1

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

	interest payments on long-term debt. Financial information will not inc	lude fund equity inform	natio	п.	
Line#	Description			Round to nearest Dollar	Please use this
3-1	Administrative		\$	550	space to provide
3-2	Salaries		\$		any necessary
3-3	Payroll taxes	ſ	\$	-	explanations
3-4	Contract services	{	\$	-	
3-5	Employee benefits		\$	-	
3-6	Insurance		\$	14,348	
3-7	Accounting and legal fees		\$	760	
3-8	Repair and maintenance		\$	11,301	
3-9	Supplies		\$	3,821	
3-10	Utilities and telephone		\$	4,551	
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 (s	hould agree with Part 4)	\$	11,235	
3-18	Debt service interest	[\$	765	
3-19	Repayment of Developer Advance Principal (sh	ould agree with line 4-4)	\$	-	
3-20	Repayment of Developer Advance Interest	į	\$	-	
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)	\$	1,000	
3-23	Other (specify):	[
3-24	equipment fuel		\$	2,054	
3-25			\$	- 4	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDIT	TURES/EXPENSES	\$	50,468	

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

	PART 4 - DEBT OUTSTANDING	2 1	CCLIED	VNDB		PEN		
	Please answer the following questions by marking the			, AND N	-11			Mar
4-1	Does the entity have outstanding debt?	ahhic	priate boxes.			Yes		No 🗆
	If Yes, please attach a copy of the entity's Debt Repayment S		iule.					_
4-2	Is the debt repayment schedule attached? If no, MUST explai	<u>n:</u>		····	-	Ø.		
	monthly payments = 1,000. 2021 principal applied = 11,234.5			= 765.49				
	12/31/2021 loan balance reconciled to 12/31/2021 bank staten				J	_		_
4-3	Is the entity current in its debt service payments? If no, MUS	Tex	plain:		٦	 ☑		
4-4		1	3					
4-4	Please complete the following debt schedule, if applicable:	Ou	itstanding at	issued during	Ref	ired during	Out	standing at
	(please only include principal amounts)(enter all amount as positive numbers)		of prior year*	year		year		ear-end
	General obligation bonds	\$	-	\$ -	\$		\$	-
	Revenue bonds	\$	-	\$ -	\$	<u> </u>	\$	-
	Notes/Loans	\$	29,749	\$ -	\$	11,235	\$	18,514
	Leases	\$	-	\$ -	\$	-	\$	-
	Developer Advances	\$	-	\$ -	\$	-	\$	
	Other (specify):	\$	-	\$ -	\$	-	\$	-
	TOTAL	\$	29,749	\$ -	\$	11,235	\$	18,514
		*mu	st tie to prior ye	ar ending balance	:	.,		
4-5	Please answer the following questions by marking the appropriate boxes Does the entity have any authorized, but unissued, debt?				_	Yes		No
If ves:	How much?	\$			7			ك
,	Date the debt was authorized:	Ť			1			
4-6	Does the entity intend to issue debt within the next calendar	vear	?					[7]
If yes:	How much?	<u>s</u>	•	_	٦ .	_		_
4-7	Does the entity have debt that has been refinanced that it is s	still r	esponsible i	or?	.J			7
If yes:		\$		-	1	***		_
4-8	Does the entity have any lease agreements?				_			7
If yes:	What is being leased?]			
	What is the original date of the lease?				4			
	Number of years of lease? Is the lease subject to annual appropriation?							
	What are the annual lease payments?	\$			٦ .	Ш		
	Please use this space to provide any		lanations or	comments:				
	, lowed doe the opace to provide any	-71. jei						
	PART 5 - CASH AND	III	VESTM	ENTS				
	Please provide the entity's cash deposit and investment balances.					Amount		Total
5-1	YEAR-END Total of ALL Checking and Savings Accounts				\$	101,100		
5-2	Certificates of deposit				\$	53,112	1	
	Total Cash Deposits					-	\$	154,212
	Investments (if investment is a mutual fund, please list underlying	іпуе	estments):		Ī			
					•		1	
					\$		ł	
5-3					\$	-		
					\$	-		
	Total Investments						\$	_
	Total Cash and Investments				Ī		\$	154,212
	Please answer the following questions by marking in the approp	riate	boxes	Yes		No		N/A
5-4	Are the entity's investments legal in accordance with Section							Ī
	seq., C.R.S.?							ı
5-5	Are the entity's deposits in an eligible (Public Deposit Protec	tion	Act) public	-				
	depository (Section 11-10.5-101, et seq. C.R.S.)?			V				
If no, MI	JST use this space to provide any explanations:							

	PART 6 - CAPIT	ΑL	. ASSET	S			
	Please answer the following questions by marking in the appropriate box	es.			Yes		No
6-1	Does the entity have capital assets?				Ø		
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:				Ø		
]		
6-3		ì	Balance -	Additions (Must			
0-3	Complete the following capital assets table:	be	ginning of the year'	be included in Part 3)	Deletions		Year-End Balance
	Land	\$			\$ -	\$	3,000
	Bulldings	\$	99,906		\$ -	\$	99,906
	Machinery and equipment	\$	297,660	The state of the s	\$ -	\$	297,660
	Furniture and fixtures	\$	9,665	\$ -	\$ -	\$	9,665
	Infrastructure	\$	-	\$ -	\$ -	\$	-
	Construction In Progress (CIP)	\$	<u> </u>	\$ -	\$ -	\$	
	Other (explain):	\$	-	\$ -	\$ -	\$	-
	Accumulated Depreciation	\$ \$	410,231	\$ - \$ -	\$ - \$ -	\$ \$	410,231
	Please use this space to provide any				φ -	ψ	410 ₁ 231
	DADT 7 DENGLON	Т		TION			
	PART 7 - PENSION		FURIVIA	HUN			
7 4	Please answer the following questions by marking in the appropriate box				Yes		No
7-1 7-2	Does the entity have a valuation firefighters' pension plan?						∅
f yes:	Does the entity have a volunteer firefighters' pension plan? Who administers the plan?				<u>₩</u> 1		
ii yes.	•				.]		
	Indicate the contributions from:				7		
	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 re	atiro	an as of ian	,			
	1?		oc as or carr	\$ 100			
	Please use this space to provide any	ext	olanations or	comments:	J		
	PART 8 - BUDGET	N	FORMA'	TION			
	Please answer the following questions by marking in the appropriate box			Yes	No		N/A
8-1	Did the entity file a budget with the Department of Local Affa		or the				
	current year in accordance with Section 29-1-113 C.R.S.?			v			
	<u> </u>]			
8-2	Did the entity pass an appropriations resolution, in accordan	ce \	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	arı	reported:	J			
	Governmental/Proprietary Fund Name		Total Appropria	itions By Fund	I		
	General	\$		61,050			
]		
		1			I		

	PART 9 - TAXPAYER'S BILL OF RIGHTS (TAB	OR)	
<u>.</u>	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)]?	2	
	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.		
f no, Ml	JST explain:		
	PART 10 - GENERAL INFORMATION		
	Please answer the following questions by marking in the appropriate boxes.	Yes	No
	Is this application for a newly formed governmental entity?		V
10-1		0	
If yes:	Date of formation:		
10-2	Has the entity changed its name in the past or current year?		J
If yes:	Plance list the NEW name & RDIOD name.		
If yes:	Please list the NEW name & PRIOR name:		
10-3	Is the entity a metropolitan district?		Image: section of the content of the
10-3	Please indicate what services the entity provides:	Ш	ū
	Please multate what services the chury provides.		
10-4	Does the entity have an agreement with another government to provide services?	Ø	
If yes:	List the name of the other governmental entity and the services provided:	۳	L
, 00.	local fire departments		
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?	v	
If yes:	Does the entity have a certified min Levy!	_	_
11 900.	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):		
	Bond Redemption mills		
	General/Other mills		5.000
	Total mills		5.000
	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?	•		

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.

WILEY RURAL FIRE PROTECTION DISTRICT RESOLUTION FOR EXEMPTION FROM AUDIT

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

A RESOLUTION APPROVING AN EXEMPTION FROM AUDIT FOR FISCAL YEAR 2021 FOR THE WILEY RURAL FIRE PROTECTION DISTRICT, State of Colorado.

WHEREAS, the Wiley Rural 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 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 revenues nor expenditures for the Wiley Rural Fire Protection District exceeded \$750,000 for fiscal year 2021; and

WHEREAS, an application for exemption from audit for the Wiley Rural Fire Protection District has been prepared by Gary Anderson CPA, 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 Wiley Rural Fire Protection District governing body that the application for exemption from audit for the Wiley Rural Fire Protection District for the fiscal year ended December 31, 2021, has been personally reviewed and is hereby approved by a majority of the Wiley Rural Fire Protection District governing body; 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 Wiley Rural Fire Protection District for the fiscal year ended December 31, 2021.

ADOPTED THIS 16 day of February	_, A.D. 202 1 .
1 for Jean	Sheil Castra
Mark Grasmick, term expires 2022	Shiela Castanos, term expires 2023
Brand Som	Jackbay
Brandon Grogan, term expires 2023	Joe Wagner, term expires 2023
Carol Grogan, term expires 2023	

\$ 44.549.00 Sum of General Operating mills Subtotal and Lines 3 to

Contact person:

(print)

Daytime

phone:

Title:

mills

Signed: include one copy of this tax entity's completed form when filing the local government's budget by January 31st, per 29-1-113 C.R.S., with the Division of Local Government (DLG), Room 521, 1313 Sherman Street, Denver, CO 80203, Questions? Call DLG at 1303) 864-7720.

If the taxing entity's boundaries include more than one county, you must certify the levies to each county. Use a separate form for each county and certify the same levies uniformly to each county per Article X, Section 3 of the Colorado Constitution. ² Levies must be rounded to three decimal places and revenue must be calculated from the total <u>NET assessed valuation</u> (Line 4 of

County Tax Entity Code		DOLA LGID/SID
CERTIFICATION OF TAX LEVIES	for NON-SCHOOL Go	vernments
TO: County Commissioners of Bont Count		, Colorado.
On behalf of the Wiley Rucal Fire	District	
	(taxing entity) ^A	12
the Governing Brdy	The Control So	and of Director
of the Wiley Rural File	District	
	local government)	
Hereby officially certifies the following mills	1.27 110 00	; ;
to be levied against the taxing entity's GROSS \$ assessed valuation of: GROSS \$	assessed valuation, Line 2 of the Certifica	tion of Valuation Form DLG 57E)
Note: If the assessor certified a NET assessed valuation	120	
(AV) different than the GROSS AV due to a Tax Increment Financing (TIF) Area the tax levies must be	622,110.00	
calculated using the NET AV. The taxing entity's total property tax revenue will be derived from the mill levy USE VAI	assessed valuation, Line 4 of the Certificat LUE FROM FINAL CERTIFICATION	OF VALUATION PROVIDED
multiplied against the NET assessed valuation of:	BY ASSESSOR NO LATER THAN	_
Submitted: Z/v / Z fo (no later than Dec. 15) (mm/dd/yyyy)	r budget/fiscal year	<u>C Z Z</u>
	LEVY ²	REVENUE ²
PURPOSE (see end notes for definitions and examples)	C mills	\$ 18 110.00
1. General Operating Expenses ^H	mins	<u>s. 18,110.00</u>
 <minus> Temporary General Property Tax Credit/ Temporary Mill Levy Rate Reduction¹</minus> 	< > mills	\$ < <u>></u>
	mille	s 18,110.00
SUBTOTAL FOR GENERAL OPERATING:	mills	1011101001
 General Obligation Bonds and Interest^J 	mills	\$
4. Contractual Obligations ^k	mills	\$
5. Capital Expenditures ^L	mills	\$
6. Refunds/Abatements ^M	mills	\$
7. Other ^N (specify):	mills	\$
	mills	\$
TOTAL: Sum of General Operating Subjoral and Lines 3 to 7	5 mills	s 18 110,00
1 O 1 ALI - Subtotal and Lines 3 to 7		
Contact person: (CCC) (CCC)	Daytime phone: $(719)353$	-1197
Signed: (2001)	·	Treasurer

Include one copy of this tax entity's completed form-when filing the local government's budget by January 31st, per 29-1-113 C.R.S., with the Division of Local Government (DLG), Room 521, 1313 Sherman Street, Denver, CO 80203, Ouestions? Call DLG at (303) 864-7720.

Signed:

¹ If the taxing entity's boundaries include more than one county, you must certify the levies to each county. Use a separate form for each county and certify the same levies uniformly to each county per Article X, Section 3 of the Colorado Constitution. ² Levies must be rounded to three decimal places and revenue must be calculated from the total <u>NET assessed valuation</u> (Line 4 of

<u>Mobile</u> Legacy Bank App Mobi Money (Choice) App Allpoint ATM App

001319 107864-03A WILEY RURAL FIRE PROTECTION DISTRICT PO BOX 22 WILEY CO 81092

PAGE 1

YOUR ACCOUNT TYPE IS: N.O.W. ACCOUNT CHECKING SUMMARY	760.56 10.96 122.96 31 107,573.13 0.12% 31	IECES 9 8,742.25	BALANCE 108,972.09
DEPOSITS / CREDITS ACCOUNT 12/10/21 CUSTOMER DEPOSI 12/13/21 CUSTOMER DEPOSI 12/31/21 INTEREST EARNEI	00N007-560 T	112.51 6 48. 05 10.96	
CHECKS / DEBITS	00N007-560 E 12/29 418 E 12/22 418 E 12/31 418 E 12/02* 20168 E	1 263.43 2 537.00 3 5674.00 3 14.40	CUSTOMER CHE CUSTOMER CHE CUSTOMER CHE MERCHANT POS
DAILY BALANCES ACCOUNT 11/30 108972.09 12/02 108957.6 12/13 108718.25 12/17 107718.2 12/28 106744.63 12/29 106664.6	00N007-560 59 12/03 1079 25 12/22 1071		108070.20 107008.06

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WILEY RURAL FIRE PROTECTION DISTRICT PO BOX 22 WILEY CO 81092

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[TX	TAL FOR THIS PERIOD	TOTAL YEAR-TO-DATE
TOTAL OVERDRAFT FEES	\$0.00	\$0.00
TOTAL RETURNED ITEM FEES	\$0.00	\$0.00

مناعة المعاسسة فيناه فالمناف فينهنه والفاحية في تجويس والمراج والمراج والمراج والمراج والمعاد والمعاد والمعاد والما	و د د در بروس به در در بروس به در در		
AUTOMATIC TRANSACTIONS 12/02/21 672009 Wal-Mart Super Center LAMAR C 12/03/21 CASH CON 578C FPPA CONTR2742075196WILE Y RURAL FPD	DEBIT: 14.4 1000.0	S CREDITS 40 00	
YOUR ACCOUNT TYPE IS: REGULAR SAVINGS SAVINGS SUMMARY	PIECES	0 BALANCE 98.86 98.87	TIB
DEPOSITS / WITHDRAWALS ACCOUNT 00-20-5755 12/31/21 INTEREST PAID		0.01	

	[]	OTAL	FOR	THIS	PERIOD	[TOTA]	YEAR-TO-DATE
TOTAL OVERDRAFT FEES	1			\$0	.00	1	\$0.00
TOTAL RETURNED ITEM FEES	T	<u> </u>		\$0	.00	1	\$0.00



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WILEY RURAL FIRE PROTECTION DISTRICT PO BOX 22 WILEY CO 81092

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TOTAL INTE	01/08/20 12/11/02 REST PAID OANS SUMMA	01/08/22 06/11/22 THIS YEAI ARY ACCOU	10/08/21 12/11/21 R	DATE 03/11/22 01/08/22 03/11/22 274.40	.30% .10%	APY 0.30% 0.30% 0.10%	AMOUNT 19,202.40 30,057.92 3,851.35 53,111.67	
DATE T	RANSACTION	Ų 1		RINCIPAL	INTEREST	OTHER	BALANCE	•
11/30/21 P 12/17/21 P 12/31/21 E	AYMENT	INCE	1000.00-	942.31-	57.69-		19456.39 18514.08 18514.08	7 _B
							Andrew Control of the	