

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

**NAME OF GOVERNMENT
ADDRESS**

Front Range Passenger Rail District
1800 W. 33rd Ave
Suite 200
Denver, CO 80211
Margaret Henderson
303-779-5710
margaret.henderson@claconnect.com

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

**CONTACT PERSON
PHONE
EMAIL**

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:	Margaret Henderson
TITLE	Accountant for the District
FIRM NAME (if applicable)	CliftonLarsonAllen LLP
ADDRESS	2001 16th St, Suite 1700, Denver, CO 80202
PHONE	303-779-5710

PREPARER (SIGNATURE REQUIRED)	DATE PREPARED <small>(No exemption shall be granted prior to the close of said fiscal year)</small>				
Please see the attached Accountants Compilation Report	7/15/2025				
Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center; padding: 2px;">GOVERNMENTAL <small>(MODIFIED ACCRUAL BASIS)</small></td> <td style="width: 50%; text-align: center; padding: 2px;">PROPRIETARY <small>(CASH OR BUDGETARY BASIS)</small></td> </tr> <tr> <td style="text-align: center; padding: 2px;"><input checked="" type="checkbox"/></td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> </table>	GOVERNMENTAL <small>(MODIFIED ACCRUAL BASIS)</small>	PROPRIETARY <small>(CASH OR BUDGETARY BASIS)</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GOVERNMENTAL <small>(MODIFIED ACCRUAL BASIS)</small>	PROPRIETARY <small>(CASH OR BUDGETARY BASIS)</small>				
<input checked="" type="checkbox"/>	<input type="checkbox"/>				

PART 2 - REVENUES

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 the nearest dollar	Please use this space to provide any necessary explanations
2-1	Taxes: Property (report mills levied in question 10-7)	\$ -	
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 to table 4-4, column 'Issued during year')	\$ -	
2-16	Lease proceeds	\$ -	
2-17	Developer Advances received (should agree to table 4-4, column 'Issued during year')	\$ -	
2-18	Proceeds from sale of capital assets	\$ -	
2-19	Fire and police pension	\$ -	
2-20	Donations	\$ -	
2-21	Other (specify):	\$ -	
2-22		\$ -	
2-23		\$ -	
2-24		\$ -	
2-25		\$ -	
2-26	(add lines 2-1 through 2-25) TOTAL REVENUES	\$ -	

PART 3 - EXPENDITURES/EXPENSES

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 the nearest dollar	Please use this space to provide any necessary explanations
3-1	Administrative	\$ -	
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 to table 4-4, column 'Retired during year')	\$ -	
3-18	Debt service interest	\$ -	
3-19	Repayment of Developer Advance Principal (should agree to table 4-4, column 'Retired during year')	\$ -	
3-20	Repayment of Developer Advance Interest	\$ -	
3-21	Contribution to pension plan	\$ -	
3-22	Contribution to Fire & Police Pension Assoc.	\$ -	
3-23	Other (specify):	\$ -	
3-24		\$ -	
3-25		\$ -	
3-26		\$ -	
3-27		\$ -	
3-28	(add lines 3-1 through 3-27) TOTAL EXPENDITURES/EXPENSES	\$ -	

If TOTAL REVENUES (Line 2-26) or TOTAL EXPENDITURES (Line 3-28) 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? <i>(If 'No' is checked, skip to question 4-5)</i> <i>(If 'Yes' is checked, please attach a copy of the entity's debt repayment schedule)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4-2	Is the debt repayment schedule attached? If no, MUST explain below: <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">N/A</div>	<input type="checkbox"/>	<input type="checkbox"/>
4-3	Is the entity current in its debt service payments? If no, MUST explain below: <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">N/A</div>	<input type="checkbox"/>	<input type="checkbox"/>
4-4	Please complete the following debt schedule, if applicable: <small>(please only include principal amounts) (enter all amounts as positive numbers)</small>		
	General obligation bonds	\$ -	\$ -
	Revenue bonds	\$ -	\$ -
	Notes/Loans	\$ -	\$ -
	Lease & SBITA** Liabilities [GASB 87 & 96]	\$ -	\$ -
	Developer Advances	\$ -	\$ -
	Other (specify):	\$ -	\$ -
	TOTAL	\$ -	\$ -

**Subscription-Based Information Technology Arrangements

*Must agree to prior year-end balance

Please answer the following questions by marking the appropriate boxes.		Yes	No
4-5	Does the entity have any authorized but unissued debt as of its fiscal year-end? How much? \$ - Date the debt was authorized: 	<input type="checkbox"/>	<input checked="" type="checkbox"/>
NEW 4-6	Is the authorized but unissued debt further limited by the entity's most recent Service Plan? If yes: How much? \$ - Date of the most recent Service Plan: 	<input type="checkbox"/>	<input type="checkbox"/>
4-7	Does the entity intend to issue debt within the next calendar year? If yes: How much? \$ -	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4-8	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"/>
4-9	Does the entity have any lease agreements? 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? What are the annual lease payments? \$ -	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Part 4 - Please use this space to provide any explanations/comments or attach separate documentation, if needed

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	\$ -	
5-2	Certificates of deposit	\$ -	
TOTAL CASH DEPOSITS			\$ -
5-3	Investments (if investment is a mutual fund, please list underlying investments):		
	<div style="border: 1px solid black; height: 15px; width: 100%;"></div>	\$ -	
	<div style="border: 1px solid black; height: 15px; width: 100%;"></div>	\$ -	
	<div style="border: 1px solid black; height: 15px; width: 100%;"></div>	\$ -	
	<div style="border: 1px solid black; height: 15px; width: 100%;"></div>	\$ -	
TOTAL INVESTMENTS			\$ -
TOTAL CASH AND INVESTMENTS			\$ -

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 type="checkbox"/>	<input checked="" type="checkbox"/>

Part 5 - If no, MUST use this space to provide any explanations

PART 6 - CAPITAL AND RIGHT-TO-USE ASSETS

Please answer the following questions by marking in the appropriate boxes. Yes No

- 6-1 Does the entity have capital assets? Yes No
(If 'No' is checked, skip the rest of Part 6)
- 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

N/A

Complete the following capital & right-to-use assets table:	Balance - beginning of the year	Additions ^	Deletions	Year-End Balance
Land	\$ -	\$ -	\$ -	\$ -
Buildings	\$ -	\$ -	\$ -	\$ -
Machinery and equipment	\$ -	\$ -	\$ -	\$ -
Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Leased & SBITA Right-to-Use Assets	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ -	\$ -	\$ -	\$ -
Accumulated Depreciation/Amortization <small>(Please enter a negative, or credit, balance)</small>	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -

*Must agree to prior year-end balance
 ^Generally capital asset additions should be reported as capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy

Part 6 - Please use this space to provide any explanations/comments or attach documentation, if needed

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?

Part 7 - 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
 If no, **MUST** explain:

No financial activity during 2021

- 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

No financial activity during 2021

If yes: Please indicate the amount appropriated for each fund separately for the year reported (Please make sure each individual fund's appropriation agrees to how the budget was adopted. Do not combine funds)

Governmental/Proprietary Fund Name	Total Appropriations By Fund

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

Please answer the following question by marking in the appropriate box.

- | | | | |
|------------|--|-------------------------------------|--------------------------|
| 9-1 | Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? | Yes | No |
| | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
- Note: An election to exempt the entity from the spending limitations of TABOR does not exempt the entity from the 3 percent emergency reserve requirement. All entities should determine if they meet this requirement of TABOR.*

Part 9 - If no, MUST use this space to provide any explanations

PART 10 - GENERAL INFORMATION

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

- | | | | |
|-------------|--|-------------------------------------|-------------------------------------|
| 10-1 | Is this application for a newly formed governmental entity? | Yes | No |
| | If yes: Date of formation: <input style="width: 300px;" type="text" value="6/30/2021"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 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: <input style="width: 300px;" type="text"/>
Please list the PRIOR name: <input style="width: 300px;" type="text"/> | | |
| 10-3 | Is the entity a metropolitan district? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 10-4 | Please indicate what services the entity provides:
<input style="width: 500px; height: 20px;" type="text" value="Research, develop, construct, operate, and maintain and interconnected rail system within the front range."/> | | |
| 10-5 | Does the entity have an agreement with another government to provide services? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | If yes: List the name of the other governmental entity and the services provided:
<input style="width: 500px; height: 20px;" type="text"/> | | |
| 10-6 | Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> 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.] | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | If yes: Date filed: <input style="width: 200px;" type="text"/> | | |
| 10-7 | Does the entity have a certified mill levy? | <input type="checkbox"/> | <input checked="" 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 | - | |
| | Total mills | - | |
| | | Yes | No |
| 10-8 | If the entity is a Title 32 Special District formed after 7/1/2000, has the entity filed its preceding year annual report with the State Auditor as required under SB 21-262 [Section 32-1-207 C.R.S.]? If NO , please explain. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | District formed in 2021 | <input type="checkbox"/> | <input type="checkbox"/> |

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

PART 11 - GOVERNING BODY APPROVAL

Please answer the following question by marking in the appropriate box.

Yes

No

11-1 If you plan to submit this form electronically, have you read the Electronic Signature Policy?

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signature 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 two 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 or type the names of ALL members of current governing body below.
A MAJORITY of the members of the governing body must sign below.**

<p>Board Member 1</p>	<p>Board Member's Name:</p> <p>I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.</p> <p>My term expires: December, 2025</p>	<p>Deborah Mulvey</p> <p>Signature _____</p> <p>Date _____</p>
<p>Board Member 2</p>	<p>Board Member's Name:</p> <p>I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.</p> <p>My term expires: December, 2025</p>	<p>Chris Nevitt</p> <p>Signed by: <i>Chris Nevitt</i></p> <p>Signature _____ <small>9969112AA40A499...</small></p> <p>Date <u>7/23/2025</u></p>
<p>Board Member 3</p>	<p>Board Member's Name:</p> <p>I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.</p> <p>My term expires: December, 2027</p>	<p>Sarah Nurmela</p> <p>Signed by: <i>Sarah Nurmela</i></p> <p>Signature _____ <small>2524B69AEDB146D...</small></p> <p>Date <u>7/18/2025</u></p>
<p>Board Member 4</p>	<p>Board Member's Name:</p> <p>I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.</p> <p>My term expires: December, 2027</p>	<p>Joan Peck</p> <p>Signature _____</p> <p>Date _____</p>
<p>Board Member 5</p>	<p>Board Member's Name:</p> <p>I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.</p> <p>My term expires: December, 2025</p>	<p>Chelsea Gondeck</p> <p>Signed by: <i>Chelsea Gondeck</i></p> <p>Signature _____ <small>D6C4ACC9A02A47E...</small></p> <p>Date <u>7/21/2025</u></p>
<p>Board Member 6</p>	<p>Board Member's Name:</p> <p>I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.</p> <p>My term expires: December, 2027</p>	<p>Lynette Crow-Iverson</p> <p>Signature _____</p> <p>Date _____</p>
<p>Board Member 7</p>	<p>Board Member's Name:</p> <p>I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.</p> <p>My term expires: December, 2027</p>	<p>Jon Mallo</p> <p>Signed by: <i>Jon Mallo</i></p> <p>Signature _____ <small>622A3AAD5865405...</small></p> <p>Date <u>7/18/2025</u></p>

**Print or type the names of ALL members of current governing body below.
A MAJORITY of the members of the governing body must sign below.**

Board Member 8	Board Member's Name:	Tricia Canonico
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: December, 2025	Signed by: <i>Tricia Canonico</i> Signature _____ Date <u>7/21/2025</u>
Board Member 9	Board Member's Name:	Dennis Flores
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: December, 2025	Signature _____ Date _____
Board Member 10	Board Member's Name:	Luis Lopez
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: December, 2027	Signed by: <i>Luis Lopez</i> Signature _____ Date <u>7/22/2025</u>
Board Member 11	Board Member's Name:	Herman Stockinger
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: N/A	DocuSigned by: <i>Herman Stockinger</i> Signature _____ Date <u>7/21/2025</u>
Board Member 12	Board Member's Name:	John Putnam
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: December, 2027	Signed by: <i>John Putnam</i> Signature _____ Date <u>7/18/2025</u>
Board Member 13	Board Member's Name:	Jose Soto
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: December, 2027	Signature _____ Date _____
Board Member 14	Board Member's Name:	Josh Laipply
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: December, 2027	Signed by: <i>Josh Laipply</i> Signature _____ Date <u>7/21/2025</u>

**Print or type the names of ALL members of current governing body below.
A MAJORITY of the members of the governing body must sign below.**

Board Member 15	Board Member's Name:	Sal Pace
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: December, 2027	Signature _____ Date _____
Board Member 16	Board Member's Name:	Daneya Esgar
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: December, 2025	Signature _____ Date _____
Board Member 17	Board Member's Name:	Clair Levy
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: December, 2025	Signed by:  Signature _____ Date 7/18/2025
Board Member 18	Board Member's Name:	_____
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: _____	Signature _____ Date _____
Board Member 19	Board Member's Name:	_____
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: _____	Signature _____ Date _____
Board Member 20	Board Member's Name:	_____
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: _____	Signature _____ Date _____
Board Member 21	Board Member's Name:	_____
	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. My term expires: _____	Signature _____ Date _____



CliftonLarsonAllen LLP
8390 East Crescent Parkway, Suite 300
Greenwood Village, CO 80111
phone 303-779-5710 **fax** 303-779-0348
claconnect.com

Accountant's Compilation Report

Board of Directors
Front Range Passenger Rail District
Multiple Counties, Colorado, Wyoming, and New Mexico

Management is responsible for the accompanying Application for Exemption from Audit of Front Range Passenger Rail District as of and for the year ended December 31, 2021, included in the accompanying prescribed form. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the American Institute of Certified Public Accountants. We did not audit or review the financial statements included in the accompanying prescribed form nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the financial statements included in the accompanying prescribed form.

The Application for Exemption from Audit is presented in accordance with the requirements of the Colorado Office of the State Auditor, which differ from accounting principles generally accepted in the United States of America.

This report is intended solely for the information and use of the Colorado Office of the State Auditor and is not intended to be and should not be used by anyone other than this specified party.

We are not independent with respect to Front Range Passenger Rail District.

CliftonLarsonAllen, LLP

Denver, Colorado
July 15, 2025

Certificate Of Completion

Envelope Id: FF1A1E52-10DE-4EEA-ABFA-D8A7A7D92421
Subject: Complete with Docusign: 00 A1a FRPRD 2021 Audit Exemption.pdf
Client Name: Front Range Passenger Rail District
Client Number: A824619
Source Envelope:
Document Pages: 10
Certificate Pages: 6
AutoNav: Enabled
Envelopeld Stamping: Enabled
Time Zone: (UTC-06:00) Central Time (US & Canada)

Status: Completed
Envelope Originator:
CJ Cook
220 S 6th St Ste 300
Minneapolis, MN 55402-1418
cj.cook@claconnect.com
IP Address: 4.8.249.58

Record Tracking

Status: Original
7/18/2025 10:23:12 AM

Holder: CJ Cook
cj.cook@claconnect.com

Location: DocuSign

Signer Events

Chelsea Gondeck
Chelsea@downtowncs.com
Security Level: Email, Account Authentication
(None)

Signature

Signed by:

D8C4ACC9A02A47E...

Signature Adoption: Pre-selected Style
Using IP Address: 66.113.23.236

Timestamp

Sent: 7/18/2025 10:39:13 AM
Viewed: 7/21/2025 3:51:08 PM
Signed: 7/21/2025 3:51:28 PM

Electronic Record and Signature Disclosure:
Accepted: 7/21/2025 3:51:08 PM
ID: da887461-d19f-49af-8c0a-439847d9aa53

Chris Nevitt
chris.nevitt@frprdistrict.com
Security Level: Email, Account Authentication
(None)

Signed by:

9969112AA40A499...

Signature Adoption: Pre-selected Style
Using IP Address: 169.133.2.10

Sent: 7/18/2025 10:39:14 AM
Resent: 7/22/2025 1:08:54 PM
Viewed: 7/23/2025 4:17:00 PM
Signed: 7/23/2025 4:18:43 PM

Electronic Record and Signature Disclosure:
Accepted: 7/23/2025 4:17:00 PM
ID: c7c9b319-0a49-44a0-ba57-6e0b2154d9cc

Claire Levy
clevy@bouldercounty.gov
Chair of the Board of County Commissioners
Boulder County
Security Level: Email, Account Authentication
(None)

Signed by:

325BD1C294674B6...

Signature Adoption: Pre-selected Style
Using IP Address: 65.133.115.26

Sent: 7/18/2025 10:39:14 AM
Viewed: 7/18/2025 10:46:25 AM
Signed: 7/18/2025 10:46:43 AM

Electronic Record and Signature Disclosure:
Accepted: 7/18/2025 10:46:25 AM
ID: 0fa8b4f4-84d2-45c1-beff-d1e7ba1d63a9

Herman Stockinger
herman.stockinger@state.co.us
Deputy Director
Security Level: Email, Account Authentication
(None)

DocuSigned by:

1AD39F0C600B44B...

Signature Adoption: Pre-selected Style
Using IP Address: 165.127.60.132

Sent: 7/18/2025 10:39:15 AM
Viewed: 7/21/2025 9:27:10 AM
Signed: 7/21/2025 9:29:02 AM

Electronic Record and Signature Disclosure:

Signer Events**Signature****Timestamp**

Accepted: 7/21/2025 9:27:10 AM
 ID: 9e3981b9-62ef-4315-ad31-6ce03603a1e8

John Putnam
 jputnam@kaplankirsch.com
 Managing Partner

Security Level: Email, Account Authentication
 (None)

Signed by:

 6A4C3887821344B...

Signature Adoption: Pre-selected Style
 Using IP Address: 209.10.146.36

Sent: 7/18/2025 10:39:16 AM
 Viewed: 7/18/2025 11:13:14 AM
 Signed: 7/18/2025 11:13:48 AM

Electronic Record and Signature Disclosure:

Accepted: 7/18/2025 11:13:14 AM
 ID: 9cd8837d-b7de-4d82-8cf7-3a384ee02f8c

Jon Mallo
 jon.mallo@cityofloveland.org
 Board Chair

Security Level: Email, Account Authentication
 (None)

Signed by:

 622A3AAD5865405...

Signature Adoption: Pre-selected Style
 Using IP Address: 149.106.106.171

Sent: 7/18/2025 10:39:19 AM
 Viewed: 7/18/2025 1:03:35 PM
 Signed: 7/18/2025 1:04:12 PM

Electronic Record and Signature Disclosure:

Accepted: 7/18/2025 1:03:35 PM
 ID: 88444b3e-3288-4f5d-9fcd-e52adb2f118e

Josh Laipply
 josh.laipply@frprdistrict.com

Security Level: Email, Account Authentication
 (None)

Signed by:

 E3EBB8CACF944AC...

Signature Adoption: Pre-selected Style
 Using IP Address: 67.190.121.33
 Signed using mobile


Sent: 7/18/2025 10:39:19 AM
 Viewed: 7/21/2025 9:28:04 AM
 Signed: 7/21/2025 9:40:35 AM

Electronic Record and Signature Disclosure:

Accepted: 7/21/2025 9:28:04 AM
 ID: a16451e1-2dda-4bc3-bd16-da84e722a027

Luis Lopez
 hopsvines@yahoo.com
 Owner

Security Level: Email, Account Authentication
 (None)

Signed by:

 6D102F7A48C242F...

Signature Adoption: Drawn on Device
 Using IP Address:
 2601:284:c100:a7a0:2112:c4e8:c302:45b1
 Signed using mobile

Sent: 7/18/2025 10:39:17 AM
 Resent: 7/22/2025 1:08:57 PM
 Viewed: 7/22/2025 4:30:09 PM
 Signed: 7/22/2025 4:30:52 PM

Electronic Record and Signature Disclosure:

Accepted: 7/22/2025 4:30:09 PM
 ID: d9939666-9509-429a-b4ae-1c4a78f9c5a7

Sarah Nurmela
 snurmela@westminsterco.gov

Security Level: Email, Account Authentication
 (None)

Signed by:


 2524B69AEDB146D...

Signature Adoption: Pre-selected Style
 Using IP Address: 24.8.107.220
 Signed using mobile

Sent: 7/18/2025 10:39:18 AM
 Viewed: 7/18/2025 4:43:20 PM
 Signed: 7/18/2025 4:44:24 PM

Electronic Record and Signature Disclosure:

Accepted: 7/18/2025 4:43:20 PM
 ID: cbe8b6a1-85fb-4c3d-a653-0e62942eeae6

Signer Events	Signature	Timestamp
Tricia Canonico tcanonico@fcgov.com Security Level: Email, Account Authentication (None)	 <p>Signed by: <i>Tricia Canonico</i> 62DC3FCDA7BB4B1...</p> <p>Signature Adoption: Pre-selected Style Using IP Address: 69.61.240.49</p>	Sent: 7/18/2025 10:39:18 AM Viewed: 7/21/2025 8:18:20 AM Signed: 7/21/2025 8:19:08 AM

Electronic Record and Signature Disclosure:
 Accepted: 7/21/2025 8:18:19 AM
 ID: 86858b08-dd8f-4418-bff1-c9c2f707476d

In Person Signer Events	Signature	Timestamp
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Editor Delivery Events	Status	Timestamp
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Agent Delivery Events	Status	Timestamp
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Intermediary Delivery Events	Status	Timestamp
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Certified Delivery Events	Status	Timestamp
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Carbon Copy Events	Status	Timestamp
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Witness Events	Signature	Timestamp
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Notary Events	Signature	Timestamp
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Envelope Summary Events	Status	Timestamps
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Envelope Sent	Hashed/Encrypted	7/18/2025 10:39:20 AM
Envelope Updated	Security Checked	7/23/2025 5:17:43 PM
Envelope Updated	Security Checked	7/23/2025 5:17:43 PM
Envelope Updated	Security Checked	7/23/2025 5:17:43 PM
Envelope Updated	Security Checked	7/23/2025 5:17:43 PM
Envelope Updated	Security Checked	7/23/2025 5:17:43 PM
Envelope Updated	Security Checked	7/23/2025 5:17:43 PM
Envelope Updated	Security Checked	7/23/2025 5:17:43 PM
Certified Delivered	Security Checked	7/21/2025 8:18:20 AM
Signing Complete	Security Checked	7/21/2025 8:19:08 AM
Completed	Security Checked	7/23/2025 5:17:43 PM

Payment Events	Status	Timestamps
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Electronic Record and Signature Disclosure
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