

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT
ADDRESS

Town of Vona
PO Box 129
Vona, CO 80861
Sherry Stone
970 664 2444
sherry@plainstet.com
None

For the Year Ended
~~12/31/20~~
or fiscal year ended:

2021

CONTACT PERSON
PHONE
EMAIL
FAX

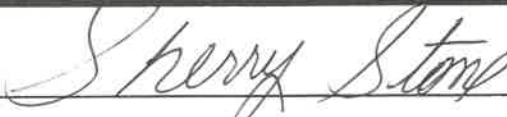
PART 1 - CERTIFICATION OF PREPARER

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

Sherry Stone
Town Clerk
PO Box 129 Vona CO 80861
970 664 2444
March 18, 2022

PREPARER (SIGNATURE REQUIRED)

	GOVERNMENTAL (MODIFIED ACCRUAL BASIS)	PROPRIETARY (CASH OR BUDGETARY BASIS)
Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Effective March 31, 2022 new town clerk is

P

Kelly Edmunds
Town of Vona
PO Box 147
Vona, CO 80861

RECEIVED

APR 01 2022

OFFICE OF
ADMINISTRATIVE COURTS

townofvona@outlook.com

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)	\$ 5718 -	
2-2	Specific ownership	\$ 531 -	
2-3	Sales and use	\$ -	
2-4	Other (specify):	\$ -	
2-5	Licenses and permits	\$ -	
2-6	Intergovernmental: Grants	\$ 49200 -	
2-7	Conservation Trust Funds (Lottery)	\$ 1251 -	
2-8	Highway Users Tax Funds (HUTF)	\$ 9045 -	
2-9	Other (specify): <i>additional</i>	\$ 53 -	
2-10	Charges for services	\$ -	
2-11	Fines and forfeits	\$ -	
2-12	Special assessments	\$ -	
2-13	Investment income	\$ -	
2-14	Charges for utility services <i>water/sewer</i>	\$ 36055 -	
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): <i>interest, franchise fee, rent, refunds, severance tax, mineral lease, cigarette tax, mal insurance, claims</i>	\$ 23775 -	
2-22		\$ -	
2-23		\$ -	
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE	\$	145628

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 <i>ads, assessment fees, clerk bond, bank chgs, benevolent, dues, gas, phone, savings services</i>	\$ 3783 -	
3-2	Salaries	\$ 12000 -	
3-3	Payroll taxes	\$ 954 -	
3-4	Contract services	\$ 6300 -	
3-5	Employee benefits	\$ -	
3-6	Insurance	\$ 5141 -	
3-7	Accounting and legal fees	\$ -	
3-8	Repair and maintenance	\$ 3585 -	
3-9	Supplies	\$ 1567 -	
3-10	Utilities and telephone <i>internet</i>	\$ 8907 -	
3-11	Fire/Police	\$ -	
3-12	Streets and highways <i>Grant, manholes</i>	\$ 49200 -	
3-13	Public health <i>water sample tests, juvco tests</i>	\$ 3892 -	
3-14	Capital outlay <i>Equipment</i>	\$ 2050 -	
3-15	Utility operations	\$ -	
3-16	Culture and recreation	\$ -	
3-17	Debt service principal (should agree with Part 4)	\$ 2403 -	
3-18	Debt service interest	\$ 2605 -	
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	\$	102387

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.

- 4-1 Does the entity have outstanding debt? Yes No
 If Yes, please attach a copy of the entity's Debt Repayment Schedule.
- 4-2 Is the debt repayment schedule attached? If no, MUST explain: Yes No

- 4-3 Is the entity current in its debt service payments? If no, MUST explain: Yes No

4-4 Please complete the following debt schedule, if applicable: (please only include principal amounts)(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	\$ 58503	\$ -	\$ 2403	\$ 56100
Leases	\$ -	\$ -	\$ -	\$ -
Developer Advances	\$ -	\$ -	\$ -	\$ -
Other (specify):	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 58503	\$ -	\$ 2403	\$ 56100

*must tie to prior year ending balance

Please answer the following questions by marking the appropriate boxes.

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

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	\$ 216899	
5-2 Certificates of deposit	\$ 84521	
Total Cash Deposits		\$ 301420
Investments (if investment is a mutual fund, please list underlying investments):		
_____	\$ -	
_____	\$ -	
_____	\$ -	
_____	\$ -	
Total Investments		\$ -
Total Cash and Investments		\$ 301420

Please answer the following questions by marking in the appropriate boxes

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

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:

Complete the following capital assets table:	Balance - beginning of the year*	Additions (Must be included in Part 3)	Deletions	Year-End Balance
Land	\$ 341732	\$ -	\$ -	\$ 341732
Buildings	\$ 280500	\$ -	\$ -	\$ 280500
Machinery and equipment	\$ 26498	\$ 2050	\$ -	\$ 28548
Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ -	\$ -	\$ -	\$ -
Accumulated Depreciation	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 648730	\$ 2050	\$ -	\$ 650780

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 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:

Fund Name	Budgeted Expenditures/Expenses
General Fund	7666-
Sewer Fund	12188-
Street FUND	7610-
Water FUND	32927-

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)]?

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.

Yes

No

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 the year?

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

	-
17.998	-
17.998	-

Please use this space to provide any explanations or comments:

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 1	Print Board Member's Name <u>James Habbe II</u>	I <u>James Hubbell</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>[Signature]</u> Date: <u>3-28-22</u> My term Expires: <u>2024</u>
Board Member 2	Print Board Member's Name <u>Kelly Edmunds</u>	I <u>Kelly Edmunds</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>[Signature]</u> Date: <u>3-28-22</u> My term Expires: <u>2024</u>
Board Member 3	Print Board Member's Name <u>Collin Clapper</u>	I <u>Collin Clapper</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>[Signature]</u> Date: <u>3-28-22</u> My term Expires: <u>2024</u>
Board Member 4	Print Board Member's Name <u>Chuck Clapper</u>	I <u>Chuck Helderman</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>[Signature]</u> Date: <u>3-28-22</u> My term Expires: <u>2022</u>
Board Member 5	Print Board Member's Name <u>Dillon Tanner</u>	I <u>Dillon Tanner</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>[Signature]</u> Date: <u>3-28-22</u> My term Expires: <u>2024</u>
Board Member 6	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 7	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: _____

Year	Jan 1	Jul 1	Year	Jan 1	Jul 1
1999	400.00	500.00	2019	1,100.00	1,100.00
2000	500.00	500.00	2020	1,100.00	1,200.00
2001	500.00	500.00	2021	1,200.00	1,200.00
2002	500.00	500.00	2022	1,200.00	1,300.00
2003	500.00	500.00	2023	1,300.00	1,300.00
2004	600.00	600.00	2024	1,400.00	1,400.00
2005	600.00	600.00	2025	1,400.00	1,400.00
2006	600.00	600.00	2026	1,500.00	1,500.00
2007	600.00	700.00	2027	1,500.00	1,600.00
2008	700.00	700.00	2028	1,600.00	1,700.00
2009	700.00	700.00	2029	1,700.00	1,700.00
2010	700.00	700.00	2030	1,800.00	1,800.00
2011	800.00	800.00	2031	1,800.00	1,900.00
2012	800.00	800.00	2032	1,900.00	2,000.00
2013	800.00	900.00	2033	2,000.00	2,100.00
2014	900.00	900.00	2034	2,100.00	2,200.00
2015	900.00	900.00	2035	2,200.00	2,300.00
2016	1,000.00	1,000.00	2036	2,300.00	2,400.00

January 1 2017
July 1 2017

1,000.00
1,200.00

January 1 2035
July 1 2035

2,400.00
500.00

January 1 2018
July 1 2018

1,100.00
1,100.00

January 1 2018
July 1 2018

1,100.00
1,200.00