

APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

NAME OF GOVERNMENT ADDRESS

Cherry Hills North Metropolitan District
PO Box 3110
Parker, CO 80134

For the Year Ended
12/31/2022
or fiscal year ended:

CONTACT PERSON
PHONE
EMAIL

Darcy Beard
303-594-5488
d.beardcpa@outlook.com

CERTIFICATION OF PREPARER

I certify that I am an independent accountant with knowledge of governmental accounting and that the information in the Application is complete and accurate to the best of my knowledge. I am aware that the Audit Law requires that a person independent of the entity complete the application if revenues or expenditure are at least \$100,000 but not more than \$750,000, and that independent means someone who is separate from the entity.

NAME:

Kyle Beard

TITLE

CPA

FIRM NAME (if applicable)

18132 House Finch Ln. Parker, CO 80134

ADDRESS

PHONE

303-877-2063

DATE PREPARED

2/27/2023

RELATIONSHIP TO ENTITY

Independent Contractor

PREPARER SIGNATURE (REQUIRED)

Has the entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status 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.]

YES NO

If Yes, date filed:

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Indicate Name of Fund
NOTE: Attach additional sheets as necessary.

| Line # | Description | Governmental Funds | | Proprietary/Fiduciary Funds | Fund* |
|---------------------------------|--|--------------------|-------|-----------------------------|-------|
| | | Fund* | Fund* | | |
| Assets | | | | | |
| 1-1 | Cash & Cash Equivalents | \$ - | \$ - | \$ - | |
| 1-2 | Investments | \$ - | \$ - | \$ 17,870 | |
| 1-3 | Receivables | \$ - | \$ - | \$ 519,755 | |
| 1-4 | Due from Other Entities or Funds | \$ - | \$ - | \$ 553 | |
| 1-5 | Property Tax Receivable | \$ - | \$ - | \$ - | |
| | All Other Assets [specify...] | \$ - | \$ - | \$ - | |
| 1-6 | Lease Receivable (as Lessor) | \$ - | \$ - | \$ 3,383 | |
| 1-7 | | \$ - | \$ - | \$ 541,561 | |
| 1-8 | | \$ - | \$ - | \$ 107,767 | |
| 1-9 | | \$ - | \$ - | \$ - | |
| 1-10 | | \$ - | \$ - | \$ - | |
| 1-11 | | \$ - | \$ - | \$ 649,328 | |
| | TOTAL ASSETS | \$ - | \$ - | \$ - | |
| Deferred Outflows of Resources: | | | | | |
| 1-12 | [specify...] | \$ - | \$ - | \$ 116,509 | |
| 1-13 | [specify...] | \$ - | \$ - | \$ - | |
| 1-14 | | \$ - | \$ - | \$ 116,509 | |
| 1-15 | | \$ - | \$ - | \$ 765,837 | |
| | TOTAL DEFERRED OUTFLOWS | \$ - | \$ - | \$ - | |
| | TOTAL ASSETS AND DEFERRED OUTFLOWS | \$ - | \$ - | \$ - | |
| Liabilities | | | | | |
| 1-16 | Accounts Payable | \$ - | \$ - | \$ - | |
| 1-17 | Accrued Payroll and Related Liabilities | \$ - | \$ - | \$ - | |
| 1-18 | Unearned Property Tax Revenue | \$ - | \$ - | \$ - | |
| 1-19 | Due to Other Entities or Funds | \$ - | \$ - | \$ - | |
| 1-20 | All Other Current Liabilities | \$ - | \$ - | \$ - | |
| 1-21 | | \$ - | \$ - | \$ - | |
| 1-22 | | \$ - | \$ - | \$ - | |
| 1-23 | | \$ - | \$ - | \$ - | |
| 1-24 | | \$ - | \$ - | \$ - | |
| 1-25 | | \$ - | \$ - | \$ - | |
| 1-26 | | \$ - | \$ - | \$ - | |
| 1-27 | | \$ - | \$ - | \$ - | |
| | TOTAL LIABILITIES | \$ - | \$ - | \$ - | |
| Deferred Inflows of Resources: | | | | | |
| 1-28 | Deferred Property Taxes | \$ - | \$ - | \$ - | |
| 1-29 | Lease related (as lessor) | \$ - | \$ - | \$ 116,509 | |
| 1-30 | | \$ - | \$ - | \$ 116,509 | |
| | TOTAL DEFERRED INFLOWS | \$ - | \$ - | \$ - | |
| Fund Balance | | | | | |
| 1-31 | Nonspendable Prepaid | \$ - | \$ - | \$ - | |
| 1-32 | Nonspendable Inventory | \$ - | \$ - | \$ - | |
| 1-33 | Restricted [specify...] | \$ - | \$ - | \$ 7,000 | |
| 1-34 | Committed [specify...] | \$ - | \$ - | \$ - | |
| 1-35 | Assigned [specify...] | \$ - | \$ - | \$ - | |
| 1-36 | Unassigned: | \$ - | \$ - | \$ 642,328 | |
| 1-37 | | \$ - | \$ - | \$ - | |
| | TOTAL FUND BALANCE | \$ - | \$ - | \$ - | |
| 1-38 | | \$ - | \$ - | \$ 649,328 | |
| | TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND BALANCE | \$ - | \$ - | \$ 765,837 | |

Please use this space to provide explanation of any items on this page

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

| Line # | Description | Governmental Funds | | Proprietary/Fiduciary Funds | |
|---|--|--------------------|-------|-----------------------------|------------|
| | | Fund* | Fund* | Enterprise | Fund* |
| Tax Revenue | | | | | |
| 2-1 | Property (include mills levied in Question 10-6) | \$ - | \$ - | \$ 117,283 | \$ - |
| 2-2 | Specific Ownership | \$ - | \$ - | \$ 6,903 | \$ - |
| 2-3 | Sales and Use Tax | \$ - | \$ - | \$ - | \$ - |
| 2-4 | Other Tax Revenue (specify...): | \$ - | \$ - | \$ - | \$ - |
| 2-5 | | \$ - | \$ - | \$ - | \$ - |
| 2-6 | | \$ - | \$ - | \$ - | \$ - |
| 2-7 | | \$ - | \$ - | \$ - | \$ - |
| 2-8 | Add lines 2-1 through 2-7 | \$ - | \$ - | \$ 124,186 | \$ - |
| TOTAL TAX REVENUE | | | | | |
| 2-9 | Licenses and Permits | \$ - | \$ - | \$ - | \$ - |
| 2-10 | Highway Users Tax Funds (HURF) | \$ - | \$ - | \$ - | \$ - |
| 2-11 | Conservation Trust Funds (Lottery) | \$ - | \$ - | \$ - | \$ - |
| 2-12 | Community Development Block Grant | \$ - | \$ - | \$ - | \$ - |
| 2-13 | Fire & Police Pension | \$ - | \$ - | \$ - | \$ - |
| 2-14 | Grants | \$ - | \$ - | \$ - | \$ - |
| 2-15 | Donations | \$ - | \$ - | \$ - | \$ - |
| 2-16 | Charges for Sales and Services | \$ - | \$ - | \$ - | \$ - |
| 2-17 | Rental Income | \$ - | \$ - | \$ - | \$ - |
| 2-18 | Fines and Forfeits | \$ - | \$ - | \$ - | \$ - |
| 2-19 | Interest/Investment Income | \$ - | \$ - | \$ 9,004 | \$ - |
| 2-20 | Tap Fees | \$ - | \$ - | \$ - | \$ - |
| 2-21 | Proceeds from Sale of Capital Assets | \$ - | \$ - | \$ - | \$ - |
| 2-22 | All Other (specify...): | \$ - | \$ - | \$ - | \$ - |
| 2-23 | | \$ - | \$ - | \$ - | \$ - |
| 2-24 | Add lines 2-8 through 2-23 | \$ - | \$ - | \$ 133,190 | \$ - |
| TOTAL REVENUES | | | | | |
| Other Financing Sources | | | | | |
| 2-25 | Debt Proceeds | \$ - | \$ - | \$ - | \$ - |
| 2-26 | Lease Proceeds | \$ - | \$ - | \$ - | \$ - |
| 2-27 | Developer Advances | \$ - | \$ - | \$ - | \$ - |
| 2-28 | Other (specify...): | \$ - | \$ - | \$ - | \$ - |
| 2-29 | Add lines 2-25 through 2-28 | \$ - | \$ - | \$ - | \$ - |
| TOTAL OTHER FINANCING SOURCES | | | | | |
| 2-30 | Add lines 2-24 and 2-29 | \$ - | \$ - | \$ 133,190 | \$ - |
| TOTAL REVENUES AND OTHER FINANCING SOURCES | | | | | |
| GRAND TOTALS | | | | | |
| | | | | | \$ 133,190 |

IF GRAND TOTAL REVENUES AND OTHER FINANCING SOURCES for all funds (Line 2-29) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

Please use this space to provide explanation of any items on this page

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PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES

| Line # | Governmental Funds | | Description | Proprietary/Fiduciary Funds | | Please use this space to provide explanation of any items on this page |
|---------------------|--------------------|-------|---|-----------------------------|------------|--|
| | Fund* | Fund* | | Enterprise | Fund* | |
| Expenditures | | | | | | |
| 3-1 | \$ - | \$ - | General Government | \$ 581 | \$ - | |
| 3-2 | \$ - | \$ - | Judicial | \$ - | \$ - | |
| 3-3 | \$ - | \$ - | Law Enforcement | \$ - | \$ - | |
| 3-4 | \$ - | \$ - | Fire | \$ - | \$ - | |
| 3-5 | \$ - | \$ - | Highways & Streets | \$ - | \$ - | |
| 3-6 | \$ - | \$ - | Solid Waste | \$ 1,938 | \$ - | |
| 3-7 | \$ - | \$ - | Contributions to Fire & Police Pension Assoc. | \$ 8,555 | \$ - | |
| 3-8 | \$ - | \$ - | Health | \$ 5,513 | \$ - | |
| 3-9 | \$ - | \$ - | Culture and Recreation | \$ 851 | \$ - | |
| 3-10 | \$ - | \$ - | Transfers to other districts | \$ 1,906 | \$ - | |
| 3-11 | \$ - | \$ - | Other (specify...): | \$ - | \$ - | |
| 3-12 | \$ - | \$ - | | \$ 33,875 | \$ - | |
| 3-13 | \$ - | \$ - | | \$ 2,978 | \$ - | |
| 3-14 | \$ - | \$ - | Capital Outlay | \$ - | \$ - | |
| | | | Debt Service | \$ - | \$ - | |
| 3-15 | \$ - | \$ - | Principal (should match amount in 4-4) | \$ - | \$ - | |
| 3-16 | \$ - | \$ - | Interest | \$ - | \$ - | |
| 3-17 | \$ - | \$ - | Bond Issuance Costs | \$ - | \$ - | |
| 3-18 | \$ - | \$ - | Developer Principal Repayments | \$ - | \$ - | |
| 3-19 | \$ - | \$ - | Developer Interest Repayments | \$ - | \$ - | |
| 3-20 | \$ - | \$ - | All Other (specify...): | \$ 1,760 | \$ - | |
| 3-21 | \$ - | \$ - | | \$ - | \$ - | |
| 3-22 | \$ - | \$ - | Add lines 3-1 through 3-21 | \$ 57,957 | \$ - | GRAND TOTAL |
| 3-23 | \$ - | \$ - | TOTAL EXPENDITURES | \$ - | \$ 57,957 | \$ 57,957 |
| 3-24 | \$ - | \$ - | Interfund Transfers (In) | \$ - | \$ - | |
| 3-25 | \$ - | \$ - | Interfund Transfers (Out) | \$ - | \$ - | |
| 3-26 | \$ - | \$ - | Other Expenditures (Revenues): | \$ 7,497 | \$ - | |
| 3-27 | \$ - | \$ - | Other Financing Sources (Uses) (from line 2-28) | \$ - | \$ - | |
| 3-28 | \$ - | \$ - | Capital Outlay (from line 3-14) | \$ - | \$ - | |
| 3-29 | \$ - | \$ - | Debt Principal (from line 3-16, 3-18) | \$ - | \$ - | |
| 3-30 | \$ - | \$ - | (Add lines 3-23 through 3-28) | \$ (7,497) | \$ - | |
| 3-31 | \$ - | \$ - | TOTAL TRANSFERS AND OTHER EXPENDITURES | \$ - | \$ (7,497) | |
| 3-32 | \$ - | \$ - | Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures | \$ - | \$ - | |
| 3-33 | \$ - | \$ - | Line 2-29, less line 3-22, less line 3-29 | \$ 67,736 | \$ - | |
| 3-34 | \$ - | \$ - | Fund Balance, January 1 from December 31 prior year report | \$ - | \$ - | |
| 3-35 | \$ - | \$ - | Prior Period Adjustment (MUST explain) | \$ 581,592 | \$ - | |
| 3-36 | \$ - | \$ - | Fund Balance, December 31 | \$ - | \$ - | |
| 3-37 | \$ - | \$ - | Sum of Lines 3-30, 3-31, and 3-32 | \$ - | \$ - | |
| 3-38 | \$ - | \$ - | This total should be the same as line 1-37. | \$ 649,328 | \$ - | |

IF GRAND TOTAL EXPENDITURES for all funds (Line 3-22) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

PART 4 - DEBT OUTSTANDING, ISSUED, AND RETIRED

Please answer the following questions by marking the appropriate boxes.

Please use this space to provide any explanations or comments:

4-1 Does the entity have outstanding debt? YES NO

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)

| | Outstanding at beginning of year* | Issued during year | Retired during year | Outstanding at year-end |
|--------------------------|-----------------------------------|--------------------|---------------------|-------------------------|
| General obligation bonds | \$ - | \$ - | \$ - | \$ - |
| Revenue bonds | \$ - | \$ - | \$ - | \$ - |
| Notes/Loans | \$ - | \$ - | \$ - | \$ - |
| Lease Liabilities | \$ - | \$ - | \$ - | \$ - |
| Developer Advances | \$ - | \$ - | \$ - | \$ - |
| Other (specify): | \$ - | \$ - | \$ - | \$ - |
| TOTAL | \$ - | \$ - | \$ - | \$ - |

*must agree to prior year ending balance

4-5 Please answer the following questions by marking the appropriate boxes.

4-5 Does the entity have any authorized, but unissued, debt [Section 29-1-605(2) C.R.S.]? YES NO

If /yes: How much? \$ -

4-6 Does the debt was authorized: 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? \$ -

PART 5 - CASH AND INVESTMENTS

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

Please use this space to provide any explanations or comments:

5-1 YEAR-END Total of ALL Checking and Savings accounts

| | AMOUNT | TOTAL |
|----------------------------|------------------|-------|
| Certificates of deposit | \$ 17,870 | |
| TOTAL CASH DEPOSITS | \$ 17,870 | |

Investments (if investment is a mutual fund, please list underlying investments):

5-3 ColoTrust Plus

| | | |
|-----------------------------------|-------------------|--|
| \$ 519,755 | | |
| \$ - | | |
| \$ - | | |
| \$ - | | |
| TOTAL INVESTMENTS | \$ 519,755 | |
| TOTAL CASH AND INVESTMENTS | \$ 537,625 | |

5-4 Are the entity's investments legal in accordance with Section 24-75-601, et. seq., C.R.S.? YES NO

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.)? If no, MUST explain: YES NO

PART 6 - CAPITAL AND RIGHT-TO-USE ASSETS

Please answer the following question by marking in the appropriate box

Please use this space to provide any explanations or comments:

| | | |
|--|-------------------------------------|--------------------------|
| | YES | NO |
| 6-1 Does the entity have capitalized 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 & Right-To-Use Assets table for GOVERNMENTAL FUNDS: | Balance - beginning of the year 1 | Additions ² | Deletions | Year-End Balance |
|--|-----------------------------------|------------------------|-------------|------------------|
| Land | \$ - | \$ - | \$ - | \$ - |
| Buildings | \$ - | \$ - | \$ - | \$ - |
| Machinery and equipment | \$ - | \$ - | \$ - | \$ - |
| Furniture and fixtures | \$ - | \$ - | \$ - | \$ - |
| Infrastructure | \$ - | \$ - | \$ - | \$ - |
| Construction In Progress (CIP) | \$ - | \$ - | \$ - | \$ - |
| Leased Right-to-Use Assets | \$ - | \$ - | \$ - | \$ - |
| Intangible Assets | \$ - | \$ - | \$ - | \$ - |
| Other (explain): | \$ - | \$ - | \$ - | \$ - |
| Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance) | \$ - | \$ - | \$ - | \$ - |
| Accumulated Depreciation (Enter a negative, or credit, balance) | \$ - | \$ - | \$ - | \$ - |
| TOTAL | \$ - | \$ - | \$ - | \$ - |

6-4

| Complete the following Capital & Right-To-Use Assets table for PROPRIETARY FUNDS: | Balance - beginning of the year | Additions | Deletions | Year-End Balance |
|--|---------------------------------|-------------------|-------------|-------------------|
| Land | \$ - | \$ - | \$ - | \$ - |
| Buildings | \$ - | \$ - | \$ - | \$ - |
| Machinery and equipment | \$ - | \$ - | \$ - | \$ - |
| Furniture and fixtures | \$ - | \$ - | \$ - | \$ - |
| Infrastructure | \$ - | \$ - | \$ - | \$ - |
| Construction In Progress (CIP) | \$ - | \$ - | \$ - | \$ - |
| Leased Right-to-Use Assets | \$ - | \$ - | \$ - | \$ - |
| Intangible Assets | \$ - | \$ - | \$ - | \$ - |
| Other (explain): Property and Equipment | \$ 294,267 | \$ - | \$ - | \$ 294,267 |
| Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance) | \$ (179,003) | \$ (7,497) | \$ - | \$ (186,500) |
| Accumulated Depreciation (Enter a negative, or credit, balance) | \$ - | \$ - | \$ - | \$ - |
| TOTAL | \$ 115,264 | \$ (7,497) | \$ - | \$ 107,767 |

* Must agree to prior year-end balance

- Generally capital asset additions should be reported at capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy

PART 7 - PENSION INFORMATION

Please use this space to provide any explanations or comments:

| | | |
|--|--------------------------|-------------------------------------|
| | YES | NO |
| 7-1 Does the entity have an "old hire" firefighters' pension plan? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7-2 Does the entity have a volunteer firefighters' pension plan? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes: Who administers the plan? | <input type="checkbox"/> | <input type="checkbox"/> |

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 8 - BUDGET INFORMATION

Please answer the following question by marking in the appropriate box

- 8-1 Did the entity file a current year budget with the Department of Local Affairs, in accordance with Section 29-1-113 C.R.S.? If no, MUST explain: 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

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

| Governmental/Proprietary Fund Name | Total Appropriations By Fund |
|------------------------------------|------------------------------|
| Enterprise | \$ 226,502 |
| | \$ - |
| | \$ - |
| | \$ - |

PART 9 - TAX PAYER'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

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.

PART 10 - GENERAL INFORMATION

Please answer the following question by marking in the appropriate box

- 10-1 Is this application for a newly formed governmental entity? YES NO

If yes: Date of formation:

- 10-2 Has the entity changed its name in the past or current year? YES NO

If Yes: NEW name

PRIOR name

- 10-3 Is the entity a metropolitan district? YES NO

- 10-4 Please indicate what services the entity provides: YES NO

- 10-5 Does the entity have an agreement with another government to provide services? YES NO

If yes: List the name of the other governmental entity and the services provided:

- 10-6 Does the entity have a certified mill levy? YES NO

If yes: Please provide the number of mills levied for the year reported (do not enter \$ amounts):

| | |
|-----------------------|--------------|
| Bond Redemption mills | 0.000 |
| General/Other mills | 8.281 |
| Total mills | 8.281 |

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

OSA USE ONLY

| Entity Wide: | | General Fund | Governmental Funds | Notes |
|---------------------------------|----|--------------|------------------------------|----------|
| Unrestricted Cash & Investments | \$ | 537,625 | Total Tax Revenue | \$ - |
| Current Liabilities | \$ | - | Revenue Paying Debt Service | \$ - |
| Deferred Inflow | \$ | 116,509 | Total Revenue | \$ - |
| | | | Total Debt Service Principal | \$ - |
| | | | Total Debt Service Interest | \$ - |
| Governmental | | | | |
| Total Cash & Investments | \$ | | Enterprise Funds | |
| Transfers In | \$ | | Net Position | 649,328 |
| Transfers Out | \$ | | PY Net Position | 561,592 |
| Property Tax | \$ | | Government-Wide | |
| Debt Service Principal | \$ | | Total Outstanding Debt | |
| Total Expenditures | \$ | | Authorized but Unissued | |
| Total Developer Advances | \$ | | 537,625 Year Authorized | |
| Total Developer Repayments | \$ | | | 1/0/1900 |

PART 12 - 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 Procedures

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.
 - 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.

Below is the certification and approval of the governing body. By signing, each individual member is certifying they are a duly elected or appointed officer of the local government. Governing members may be verified. Also by signing, the individual member certifies that this Application for Exemption from Audit has been prepared consistent with Section 29-1-604, C.R.S., which states that a governmental agency with revenue and expenditures of \$750,000 or less must have an application prepared by an independent accountant with knowledge of governmental accounting, completed to the best of their knowledge and is accurate and true. Use additional pages if needed.

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

| | Full Name | |
|---|-----------------------|--|
| 1 | Harold Roberts | I, _____, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed _____ My term Expires: _____ |
| 2 | Daniel Conway | I, <u>Daniel M Conway 5/16/23</u> , attest that 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>Daniel M Conway</u> Date: <u>5/16/23</u> My term Expires: _____ |
| 3 | Geoff Landry | I, <u>Geoff Landry</u> , attest that 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: <u>5/16/23</u> My term Expires: _____ |
| 4 | Keith Blerman | I, _____, attest that 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: <u>5/16/23</u> My term Expires: _____ |
| 5 | | I, _____, attest that 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: _____ |
| 6 | | I, _____, attest that 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: _____ |
| 7 | | I, _____, attest that 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: _____ |