

**APPLICATION FOR EXEMPTION FROM AUDIT
LONG FORM**

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

NAME OF GOVERNMENT ADDRESS	ARKANSAS VALLEY AMBULANCE DISTRICT 7995 E. PRENTICE AVENUE, SUITE 103E GREENWOOD VILLAGE, CO 80111
CONTACT PERSON PHONE EMAIL	PHYLLIS BROWN 303-381-4960 pbrown@crsfcolorado.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:	DIANE RODRIGUEZ
TITLE	DISTRICT ACCOUNTANT
FIRM NAME (if applicable)	COMMUNITY RESOURCE SERVICES OF COLORADO
ADDRESS	7995 E. PRENTICE AVENUE, SUITE 103E, GREENWOOD VILLAGE, CO 80111
PHONE	303-381-4960
DATE PREPARED	3/17/23
RELATIONSHIP TO ENTITY	DISTRICT ACCOUNTANT

PREPARER (SIGNATURE REQUIRED)

Diane Rodriguez

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		Capital Fund	Description	Proprietary/Fiduciary Funds		
		General Fund	Capital Fund			Fund*	Fund*	
Assets								
1-1	Cash & Cash Equivalents	\$ 315,340	\$ 62,297		Cash & Cash Equivalents	\$ -	\$ -	
1-2	Investments	\$ -	\$ -		Investments	\$ -	\$ -	
1-3	Receivables	\$ 239,634	\$ -		Receivables	\$ -	\$ -	
1-4	Due from Other Entities or Funds	\$ -	\$ -		Due from Other Entities or Funds	\$ -	\$ -	
1-5	Property Tax Receivable	\$ -	\$ -		Other Current Assets [specify...]	\$ -	\$ -	
	All Other Assets [specify...]							
1-6	Lease Receivable (as Lessor)	\$ -	\$ -		Total Current Assets	\$ -	\$ -	
1-7		\$ -	\$ -		(from Part 6-4)	\$ -	\$ -	
1-8		\$ -	\$ -		Capital & Right to Use Assets, net	\$ -	\$ -	
1-9		\$ -	\$ -		Other Long Term Assets [specify...]	\$ -	\$ -	
1-10		\$ -	\$ -			\$ -	\$ -	
1-11		\$ -	\$ -			\$ -	\$ -	
	TOTAL ASSETS	\$ 554,974	\$ 62,297		TOTAL ASSETS	\$ -	\$ -	
Deferred Outflows of Resources:								
1-12	[specify...]	\$ -	\$ -		[specify...]	\$ -	\$ -	
1-13	[specify...]	\$ -	\$ -		[specify...]	\$ -	\$ -	
1-14		\$ -	\$ -		(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS	\$ -	\$ -	
1-15		\$ 554,974	\$ 62,297		TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ -	\$ -	
Liabilities								
1-16	Accounts Payable	\$ 10,781	\$ -		Liabilities	\$ -	\$ -	
1-17	Accrued Payroll and Related Liabilities	\$ -	\$ -		Accounts Payable	\$ -	\$ -	
1-18	Unearned Property Tax Revenue	\$ -	\$ -		Accrued Payroll and Related Liabilities	\$ -	\$ -	
1-19	Due to Other Entities or Funds	\$ -	\$ -		Accrued Interest Payable	\$ -	\$ -	
1-20	All Other Current Liabilities	\$ 4,004	\$ -		Due to Other Entities or Funds	\$ -	\$ -	
	TOTAL CURRENT LIABILITIES	\$ 14,785	\$ -		All Other Current Liabilities	\$ -	\$ -	
1-21		\$ -	\$ -		(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	\$ -	\$ -	
1-22	All Other Liabilities [specify...]	\$ -	\$ -		Proprietary Debt Outstanding	\$ -	\$ -	
1-23		\$ -	\$ -		(from Part 4-4)	\$ -	\$ -	
1-24		\$ -	\$ -		Other Liabilities [specify...]	\$ -	\$ -	
1-25		\$ -	\$ -			\$ -	\$ -	
1-26		\$ -	\$ -			\$ -	\$ -	
1-27		\$ 14,785	\$ -		TOTAL LIABILITIES	\$ -	\$ -	
Deferred Inflows of Resources:								
1-28	Deferred Property Taxes	\$ 234,285	\$ -		Deferred Inflows of Resources	\$ -	\$ -	
1-29	Lease related (as lessor)	\$ -	\$ -		Pension/OPEB Related	\$ -	\$ -	
1-30		\$ 234,285	\$ -		Other [specify...]	\$ -	\$ -	
	TOTAL DEFERRED INFLOWS	\$ 234,285	\$ -		(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	\$ -	\$ -	
Fund Balance								
1-31	Nonspendable Prepaid	\$ -	\$ -		Net Position	\$ -	\$ -	
1-32	Nonspendable Inventory	\$ -	\$ -		Net Investment in Capital Assets	\$ -	\$ -	
1-33	Restricted [specify...] TABOR	\$ 8,400	\$ 1,100		Emergency Reserves	\$ -	\$ -	
1-34	Committed [specify...]	\$ -	\$ -		Other Designations/Reserves	\$ -	\$ -	
1-35	Assigned [specify...]	\$ -	\$ -		Restricted	\$ -	\$ -	
1-36	Unassigned:	\$ 297,504	\$ 61,197		Undesignated/Unreserved/Unrestricted	\$ -	\$ -	
1-37		\$ -	\$ -		(add lines 1-31 through 1-36)	\$ -	\$ -	
	TOTAL FUND BALANCE	\$ 305,904	\$ 62,297		This total should be the same as line 3-33	\$ -	\$ -	
1-38		\$ -	\$ -		TOTAL NET POSITION	\$ -	\$ -	
		\$ -	\$ -		(add lines 1-27, 1-30 and 1-37)	\$ -	\$ -	
	TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND BALANCE	\$ 554,974	\$ 62,297		This total should be the same as line 1-15	\$ -	\$ -	
		\$ -	\$ -		TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET POSITION	\$ -	\$ -	

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds	
		General Fund	Capital Fund		Fund*	Fund*
Tax Revenue						
2-1	Property (include mills levied in Question 10-6)	\$ 236,484	\$ -	Property (include mills levied in Question 10-6)	\$ -	\$ -
2-2	Specific Ownership	\$ 31,192	\$ -	Specific Ownership	\$ -	\$ -
2-3	Sales and Use Tax	\$ -	\$ -	Sales and Use Tax	\$ -	\$ -
2-4	Other Tax Revenue (specify...):	\$ -	\$ -	Other Tax Revenue (specify...):	\$ -	\$ -
2-5		\$ -	\$ -		\$ -	\$ -
2-6		\$ -	\$ -		\$ -	\$ -
2-7		\$ -	\$ -		\$ -	\$ -
2-8	Add lines 2-1 through 2-7	\$ 267,676	\$ -	Add lines 2-1 through 2-7	\$ -	\$ -
	TOTAL TAX REVENUE			TOTAL TAX REVENUE		
2-9	Licenses and Permits	\$ -	\$ -	Licenses and Permits	\$ -	\$ -
2-10	Highway Users Tax Funds (HUTF)	\$ -	\$ -	Highway Users Tax Funds (HUTF)	\$ -	\$ -
2-11	Conservation Trust Funds (Lottery)	\$ -	\$ -	Conservation Trust Funds (Lottery)	\$ -	\$ -
2-12	Community Development Block Grant	\$ -	\$ -	Community Development Block Grant	\$ -	\$ -
2-13	Fire & Police Pension	\$ -	\$ -	Fire & Police Pension	\$ -	\$ -
2-14	Grants	\$ -	\$ -	Grants	\$ -	\$ -
2-15	Donations	\$ 250	\$ -	Donations	\$ -	\$ -
2-16	Charges for Sales and Services	\$ 12,404	\$ -	Charges for Sales and Services	\$ -	\$ -
2-17	Rental Income	\$ -	\$ -	Rental Income	\$ -	\$ -
2-18	Fines and Forfeits	\$ -	\$ -	Fines and Forfeits	\$ -	\$ -
2-19	Interest/Investment Income	\$ 648	\$ -	Interest/Investment Income	\$ -	\$ -
2-20	Tap Fees	\$ -	\$ -	Tap Fees	\$ -	\$ -
2-21	Proceeds from Sale of Capital Assets	\$ -	\$ -	Proceeds from Sale of Capital Assets	\$ -	\$ -
2-22	All Other (specify...): Miscellaneous	\$ 127	\$ -	All Other (specify...):	\$ -	\$ -
2-23		\$ -	\$ -		\$ -	\$ -
2-24	Add lines 2-8 through 2-23	\$ 281,105	\$ -	Add lines 2-8 through 2-23	\$ -	\$ -
	TOTAL REVENUES			TOTAL REVENUES		
Other Financing Sources						
2-25	Debt Proceeds	\$ -	\$ -	Debt Proceeds	\$ -	\$ -
2-26	Lease Proceeds	\$ -	\$ -	Lease Proceeds	\$ -	\$ -
2-27	Developer Advances	\$ -	\$ -	Developer Advances	\$ -	\$ -
2-28	Other (specify...):	\$ -	\$ -	Other (specify...):	\$ -	\$ -
2-29	Add lines 2-25 through 2-28	\$ -	\$ -	Add lines 2-25 through 2-28	\$ -	\$ -
	TOTAL OTHER FINANCING SOURCES			TOTAL OTHER FINANCING SOURCES		
2-30	Add lines 2-24 and 2-29	\$ 281,105	\$ -	Add lines 2-24 and 2-29	\$ -	\$ -
	TOTAL REVENUES AND OTHER FINANCING SOURCES			TOTAL REVENUES AND OTHER FINANCING SOURCES		
GRAND TOTALS					\$ -	\$ 281,105

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.

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

Line #	Description	Governmental Funds		Capital Fund	Expenses	Description	Proprietary/Fiduciary Funds		Fund*	Fund*
		General Fund	Capital Fund				Fund*	Fund*		
3-1	Expenditures									
3-1	General Government	\$ 218,320	\$ -		General Operating & Administrative				\$ -	\$ -
3-2	Judicial	\$ -	\$ -		Salaries				\$ -	\$ -
3-3	Law Enforcement	\$ -	\$ -		Payroll Taxes				\$ -	\$ -
3-4	Fire	\$ -	\$ -		Contract Services				\$ -	\$ -
3-5	Highways & Streets	\$ -	\$ -		Employee Benefits				\$ -	\$ -
3-6	Solid Waste	\$ -	\$ -		Insurance				\$ -	\$ -
3-7	Contributions to Fire & Police Pension Assoc.	\$ -	\$ -		Accounting and Legal Fees				\$ -	\$ -
3-8	Health	\$ -	\$ -		Repair and Maintenance				\$ -	\$ -
3-9	Culture and Recreation	\$ -	\$ -		Supplies				\$ -	\$ -
3-10	Transfers to other districts	\$ -	\$ -		Utilities				\$ -	\$ -
3-11	Other [specify...]:	\$ -	\$ -		Contributions to Fire & Police Pension Assoc.				\$ -	\$ -
3-12	County treasurer fees	\$ 7,109	\$ -		Other [specify...]				\$ -	\$ -
3-13		\$ -	\$ -						\$ -	\$ -
3-14	Capital Outlay	\$ -	\$ -	38,272	Capital Outlay				\$ -	\$ -
	Debt Service				Debt Service				\$ -	\$ -
3-15	Principal	\$ -	\$ -		Principal	(should match amount in 4-4)			\$ -	\$ -
3-16	Interest	\$ -	\$ -		Interest				\$ -	\$ -
3-17	Bond Issuance Costs	\$ -	\$ -		Bond Issuance Costs				\$ -	\$ -
3-18	Developer Principal Repayments	\$ -	\$ -		Developer Principal Repayments				\$ -	\$ -
3-19	Developer Interest Repayments	\$ -	\$ -		Developer Interest Repayments				\$ -	\$ -
3-20	All Other [specify...]:	\$ -	\$ -		Developer Interest Repayments				\$ -	\$ -
3-21		\$ -	\$ -		All Other [specify...]:				\$ -	\$ -
3-22		\$ 225,429	\$ 38,272						\$ -	\$ 263,701
					ADD lines 3-1 through 3-21				\$ -	\$ -
					TOTAL EXPENDITURES				\$ -	\$ -
3-23	Interfund Transfers (In)	\$ -	\$ (35,080)		Net Interfund Transfers (In) Out				\$ -	\$ -
3-24	Interfund Transfers Out	\$ 35,080	\$ -		Other [specify...][enter negative for expense]				\$ -	\$ -
3-25	Other Expenditures (Revenues):	\$ -	\$ -		Depreciation/Amortization				\$ -	\$ -
3-26		\$ -	\$ -		Other Financing Sources (Uses)	(from line 2-28)			\$ -	\$ -
3-27		\$ -	\$ -		Capital Outlay	(from line 3-14)			\$ -	\$ -
3-28		\$ -	\$ -		Debt Principal	(from line 3-15, 3-18)			\$ -	\$ -
3-29		\$ -	\$ -						\$ -	\$ -
					(Line 3-27, plus line 3-28, less line 3-26, less line 3-25, plus				\$ -	\$ -
					line 3-24) TOTAL GAAP RECONCILING ITEMS				\$ -	\$ -
3-30	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures	\$ 35,080	\$ (35,080)		Net Increase (Decrease) in Net Position				\$ -	\$ -
					Line 2-29, less line 3-22, plus line 3-29, less line 3-23				\$ -	\$ -
3-31	Fund Balance, January 1 from December 31 prior year report	\$ 20,596	\$ (3,192)		Net Position, January 1 from December 31 prior year report				\$ -	\$ -
3-32	Prior Period Adjustment (MUST explain)	\$ 285,308	\$ 65,489		Prior Period Adjustment (MUST explain)				\$ -	\$ -
3-33	Fund Balance, December 31	\$ -	\$ -		Net Position, December 31				\$ -	\$ -
					Sum of Lines 3-30, 3-31, and 3-32				\$ -	\$ -
					This total should be the same as line 1-37.				\$ -	\$ -

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

- If yes:
- 4-6 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:
- 4-7 How much? \$ -
- 4-7 Does the entity have debt that has been refinanced that is still responsible for? YES NO
- If yes:
- 4-8 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:

YEAR-END	AMOUNT	TOTAL
5-1 Total of ALL Checking and Savings accounts	\$ 377,637	
5-2 Certificates of deposit	\$ -	
TOTAL CASH DEPOSITS	\$ -	\$ 377,637

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

5-3	\$ -	
	\$ -	
	\$ -	
	\$ -	
TOTAL INVESTMENTS	\$ -	\$ 377,637
TOTAL CASH AND INVESTMENTS	\$ -	\$ 377,637

Please answer the following question by marking in the appropriate box

- 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.)? 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?
 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:

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	\$ 4,750	\$ -	\$ -	\$ 4,750
	Buildings	\$ -	\$ -	\$ -	\$ -
	Machinery and equipment	\$ -	\$ -	\$ -	\$ -
	Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
	Infrastructure	\$ -	\$ -	\$ -	\$ -
	Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
	Leased Right-to-Use Assets	\$ 36,775	\$ 19,554	\$ -	\$ 56,329
	Intangible Assets	\$ -	\$ -	\$ -	\$ -
	Other (explain): Vehicles & Medical Devices	\$ 145,585	\$ 18,718	\$ -	\$ 164,303
	Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ (45,099)	\$ (16,957)	\$ -	\$ (62,056)
	TOTAL	\$ 142,011	\$ 21,315	\$ -	\$ 163,326
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):	\$ -	\$ -	\$ -	\$ -
	Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
	TOTAL	\$ -	\$ -	\$ -	\$ -

* 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

YES NO

Please use this space to provide any explanations or comments:

7-1 Does the entity have an "old hire" firefighters' pension plan?
 7-2 Does the entity have a volunteer firefighters' pension plan?
 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 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 N/A

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

Governmental/Proprietary Fund Name	Total Appropriations By Fund
GENERAL FUND	\$ 405,529
CAPITAL FUND	\$ 420,000
	\$ -
	\$ -

Please use this space to provide any explanations or comments:

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(6)]? 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.

Please use this space to provide any explanations or comments:

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:

AMBULANCE EMERGENCY SERVICES

- 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:

FREMONT COUNTY - EMERGENCY SERVICES

- 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	6.990
Total mills	6.990

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

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.
- 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.

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.		DocuSigned by: A MAJORITY of the members of the governing body must complete and sign in the column below.	
1	Full Name	Signed	Date:
	Thomas Kainz	<i>Thomas Kainz</i> I, Thomas Kainz, 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: 77498017EB60472... My term Expires: May 2025	3/27/2023
	Nicole Lewis	<i>Nicole Lewis</i> I, Nicole Lewis, 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: 77498017EB60472... My term Expires: May 2025	3/27/2023
	Andra Doltan	<i>Andra Doltan</i> I, Andra Doltan, 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: 77498017EB60472... My term Expires: May 2025	3/28/2023
	David Van Nattan	<i>David Van Nattan</i> I, David Van Nattan, 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: 8D1987B32C046F... My term Expires: May 2023	3/27/2023
	David Craft	<i>David Craft</i> I, David Craft, 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: F1BE168408BE4F7... My term Expires: May 2023	3/28/2023
		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: _____	
		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: _____	

Certificate Of Completion

Envelope Id: 9C9486BEFF7D4082A672B499F9D15CCA

Status: Completed

Subject: Audit Exemption 2022 AVAD.pdf

Source Envelope:

Document Pages: 9

Signatures: 5

Envelope Originator:

Certificate Pages: 5

Initials: 0

Kayla Blair

AutoNav: Enabled

kblair@crsofcolorado.com

Envelopeld Stamping: Enabled

IP Address: 96.88.70.121

Time Zone: (UTC-08:00) Pacific Time (US & Canada)

Record Tracking

Status: Original

Holder: Kayla Blair

Location: DocuSign

3/27/2023 1:00:45 PM

kblair@crsofcolorado.com

Signer Events

Signature

Timestamp

Andra Dolton

adolton@avad.care

Security Level: Email, Account Authentication (None)

DocuSigned by:
Andra Dolton
77498017EB60472...

Sent: 3/27/2023 1:05:13 PM
Viewed: 3/28/2023 2:15:17 AM
Signed: 3/28/2023 2:15:58 AM

Signature Adoption: Pre-selected Style
Using IP Address: 162.255.156.2
Signed using mobile

Electronic Record and Signature Disclosure:

Accepted: 3/28/2023 2:15:17 AM

ID: 4210fddc-d217-49c0-9eb6-4665abd38b50

David Craft

dcraft@avad.care

Security Level: Email, Account Authentication (None)

DocuSigned by:
David Craft
F1BE169406BE4F7...

Sent: 3/27/2023 1:05:14 PM
Resent: 3/28/2023 9:02:11 AM
Viewed: 3/28/2023 9:20:02 AM
Signed: 3/28/2023 9:20:34 AM

Signature Adoption: Pre-selected Style
Using IP Address: 216.147.121.224

Electronic Record and Signature Disclosure:

Accepted: 3/27/2023 7:16:22 PM

ID: aac4a523-a25e-4c5a-b7e1-f29a02a18603

David Van Nattan

dvan@avad.care

Security Level: Email, Account Authentication (None)

DocuSigned by:
David Van Nattan
BD1987B382C646F...

Sent: 3/27/2023 1:05:14 PM
Viewed: 3/27/2023 3:56:39 PM
Signed: 3/27/2023 3:59:13 PM

Signature Adoption: Pre-selected Style
Using IP Address: 71.211.11.27

Electronic Record and Signature Disclosure:

Accepted: 3/27/2023 3:56:39 PM

ID: 21551d01-7962-43ea-b1d9-04aa7aa46cd5

Nicole Lewis

nlewis@avad.care

Security Level: Email, Account Authentication (None)

DocuSigned by:
Nicole Lewis
28C4A84BDC7240F...


Sent: 3/27/2023 1:05:15 PM
Viewed: 3/27/2023 1:08:10 PM
Signed: 3/27/2023 1:08:44 PM

Signature Adoption: Drawn on Device
Using IP Address: 71.211.22.61
Signed using mobile

Electronic Record and Signature Disclosure:

Accepted: 3/27/2023 1:08:10 PM

ID: b7159f69-ebab-4dd0-b1e6-eba5d78680a0

Signer Events	Signature	Timestamp
Thomas E Kainz tkainz@avad.care Security Level: Email, Account Authentication (None)	 Signature Adoption: Pre-selected Style Using IP Address: 38.109.215.2	Sent: 3/27/2023 1:05:15 PM Viewed: 3/27/2023 3:31:05 PM Signed: 3/27/2023 3:31:38 PM

Electronic Record and Signature Disclosure:
 Accepted: 5/27/2022 8:46:17 AM
 ID: f5c8ea6d-161b-4d55-970c-91eedfeb7fec

In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp

Carbon Copy Events	Status	Timestamp
Diane Rodriguez drodriguez@crsofcolorado.com Security Level: Email, Account Authentication (None)	<div style="border: 2px solid blue; padding: 5px; font-weight: bold; color: blue;">COPIED</div>	Sent: 3/27/2023 1:05:16 PM Viewed: 3/28/2023 9:26:48 AM
Electronic Record and Signature Disclosure: Accepted: 2/23/2023 11:56:47 AM ID: 3559dd28-f659-4571-953c-b383d3c08edd		

Kayla Blair kblair@crsofcolorado.com Security Level: Email, Account Authentication (None)	<div style="border: 2px solid blue; padding: 5px; font-weight: bold; color: blue;">COPIED</div>	Sent: 3/27/2023 1:05:16 PM Resent: 3/28/2023 9:20:37 AM
Electronic Record and Signature Disclosure: Not Offered via DocuSign		

Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	3/27/2023 1:05:16 PM
Certified Delivered	Security Checked	3/27/2023 3:31:05 PM
Signing Complete	Security Checked	3/27/2023 3:31:38 PM
Completed	Security Checked	3/28/2023 9:20:34 AM

Payment Events	Status	Timestamps
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Electronic Record and Signature Disclosure