

WAVERLY DRAINAGE DISTRICT NO 1

TO: Office of State Auditor
Local Government Audit Division
1525 Sherman St. 7th Fl
Denver, CO 80203

Please see attached our Application for Exemption from Audit. If you have any questions, please call or email at below:

SHARILYN BLAIS, ASST SECTY
719-251-7371
ksblais@prodigy.net

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT ADDRESS

| |
|------------------------------|
| WAVERLY DRAINAGE DISTRICT #1 |
| % SHARILYN BLAIS |
| 287 W ARCHES DR |
| PUEBLO WEST CO 81007 |
| SHARILYN BLAIS |
| 719-251-7373 |
| keblais@prodigy.net |

For the Year Ended
12/31/23
or fiscal year ended:

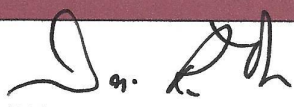
**CONTACT PERSON
PHONE
EMAIL**

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:
TITLE
FIRM NAME (if applicable)
ADDRESS
PHONE**

| |
|---------------------------------|
| DENNIS R. TABOR |
| ACCOUNTANT |
| 3606 MORRIS AVE PUEBLO CO 81008 |
| 719-469-0949 |

| PREPARER (SIGNATURE REQUIRED) | DATE PREPARED | |
|--|--|--|
|  | <p style="font-size: 1.5em;">3/27/24</p> | |
| Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types | GOVERNMENTAL <small>(MODIFIED ACCRUAL BASIS)</small> <input type="checkbox"/> | PROPRIETARY <small>(CASH OR BUDGETARY BASIS)</small> <input type="checkbox"/> |

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) | \$ 33,652 - | |
| 2-2 | Specific ownership | \$ - | |
| 2-3 | Sales and use | \$ - | |
| 2-4 | Other (specify): | \$ - | |
| 2-5 | Licenses and permits | \$ 1,400 - | |
| 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 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 | \$ 182 - | |
| 2-21 | Other (specify): INTEREST | \$ - | |
| 2-22 | | \$ - | |
| 2-23 | | \$ - | |
| 2-24 | (add lines 2-1 through 2-23) TOTAL REVENUE | \$ 35,234 - | |

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 | \$ - | |
| 3-2 | Salaries | \$ - | |
| 3-3 | Payroll taxes | \$ - | |
| 3-4 | Contract services | \$ - | |
| 3-5 | Employee benefits | \$ - | |
| 3-6 | Insurance | \$ 702 - | |
| 3-7 | Accounting and legal fees | \$ 2,125 - | |
| 3-8 | Repair and maintenance | \$ 1,783 - | |
| 3-9 | Supplies | \$ 50 - | |
| 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 with Part 4) | \$ - | |
| 3-18 | Debt service interest | \$ - | |
| 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): OFFICE EXPENSES | \$ 145 | |
| 3-24 | | \$ - | |
| 3-25 | | \$ - | |
| 3-26 | (add lines 3-1 through 3-24) TOTAL EXPENDITURES/EXPENSES | \$ 4,805 - | |

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.

| | Yes | No | | |
|---|----------------------------------|-------------------------------------|---------------------|-------------------------|
| 4-1 Does the entity have outstanding debt? If Yes, please attach a copy of the entity's Debt Repayment Schedule. | <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; height: 20px; width: 100%; margin-top: 5px;"></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; height: 20px; width: 100%; margin-top: 5px;"></div> | | | | |
| 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 | \$ - | \$ - | \$ - | \$ - |
| Lease & SBITA** Liabilities [GASB 87 & 96] | \$ - | \$ - | \$ - | \$ - |
| Developer Advances | \$ - | \$ - | \$ - | \$ - |
| Other (specify): | \$ - | \$ - | \$ - | \$ - |
| TOTAL | \$ - | \$ - | \$ - | \$ - |

**Subscription Based Information Technology Arrangements

*Must agree to prior year-end balance

| | Yes | No |
|--|--------------------------|-------------------------------------|
| 4-5 Does the entity have any authorized, but unissued, debt? If yes: How much? \$ <input style="width: 100px;" type="text" value=" -"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Date the debt was authorized: <input style="width: 100px;" type="text"/> | | |
| 4-6 Does the entity intend to issue debt within the next calendar year? If yes: How much? \$ <input style="width: 100px;" type="text" value=" -"/> | | X |
| 4-7 Does the entity have debt that has been refinanced that it is still responsible for? If yes: What is the amount outstanding? \$ <input style="width: 100px;" type="text" value=" -"/> | | X |
| 4-8 Does the entity have any lease agreements? If yes: What is being leased? <input style="width: 100px;" type="text"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| What is the original date of the lease? <input style="width: 100px;" type="text"/> | | |
| Number of years of lease? <input style="width: 100px;" type="text"/> | | |
| Is the lease subject to annual appropriation? What are the annual lease payments? \$ <input style="width: 100px;" type="text" value=" -"/> | <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 | \$110121- | |
| 5-2 Certificates of deposit | \$ - | |
| Total Cash Deposits | | \$110121- |
| Investments (if investment is a mutual fund, please list underlying investments): | | |
| <input style="width: 100%; height: 20px;" type="text"/> | \$ - | |
| <input style="width: 100%; height: 20px;" type="text"/> | \$ - | |
| <input style="width: 100%; height: 20px;" type="text"/> | \$ - | |
| <input style="width: 100%; height: 20px;" type="text"/> | \$ - | |
| Total Investments | | \$ - |
| Total Cash and Investments | | \$110121- |

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 type="checkbox"/> |

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? | <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"/> |

| Complete the following capital & right-to-use assets table: | Balance - beginning of the year | Additions (Must be included in Part 3) | Deletions | Year-End Balance |
|--|---------------------------------|--|-------------|-------------------|
| Land | \$ - | \$ - | \$ - | \$ - |
| Buildings | \$ 1,450 - | \$ - | \$ - | \$ 1,450 - |
| Machinery and equipment | \$ 21,455 - | \$ - | \$ - | \$ 21,455 - |
| Furniture and fixtures | \$ - | \$ - | \$ - | \$ - |
| Infrastructure | \$ - | \$ - | \$ - | \$ - |
| Construction In Progress (CIP) | \$ - | \$ - | \$ - | \$ - |
| Leased & SBITA Right-to-Use Assets | \$ - | \$ - | \$ - | \$ - |
| Other (explain): | \$ - | \$ - | \$ - | \$ - |
| Accumulated Depreciation/Amortization (Please enter a negative, or credit, balance) | \$ - | \$ - | \$ - | \$ - |
| TOTAL | \$22,905 - | \$ - | \$ - | \$22,905 - |

*must tie to prior year ending balance

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? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7-2 Does the entity have a volunteer firefighters' pension plan? | | X |

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.? If no, MUST explain: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | |
| 8-2 Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain: | <input checked="" type="checkbox"/> | | |

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

| Governmental/Proprietary Fund Name | Total Appropriations By Fund |
|------------------------------------|------------------------------|
| WAVERLY DRAINAGE DISTRICT #1 | 54,179 |
| | |
| | |

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

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.

If no, MUST explain:

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:

10-2 Has the entity changed its name in the past or current year? Yes No

If yes: Please list the NEW name & PRIOR name:

10-3 Is the entity a metropolitan district? Yes No

Please indicate what services the entity provides:

10-4 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:

10-5 Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during the Yes No

If yes: Date Filed:

10-6 Does the entity have a certified Mill Levy? Yes No

If yes: Please provide the following mills levied for the year reported (do not report \$ amounts):

Bond Redemption mills -

General/Other mills -

Total mills -

Yes

No

N/A

10-7 **NEW 2023!** If the entity is a Title 32 Special District formed on or 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. Yes No N/A

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

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.

| 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 Rodney Tolsma | I <u>Rodney Tolsma</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>3/23/2024</u> My term Expires: <u>03/30/2026</u> | |
| Board Member 2 | Print Board Member's Name RAY Welch | I <u>Ray Welch</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>3/23/2024</u> My term Expires: <u>03/30/2026</u> | |
| Board Member 3 | Print Board Member's Name Gerrit Schneider | I <u>Gerritt Schneider</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>03/23/2024</u> My term Expires: <u>03/30/2026</u> | |
| Board Member 4 | 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 5 | 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 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: _____ | |

RESOLUTION/ORDINANCE FOR EXEMPTION FROM AUDIT

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

A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR FISCAL YEAR 2023 FOR THE WAVERLY DRAINAGE DISTRICT. NO. 1, STATE OF COLORADO.

WHEREAS, THE BOARD OF DIRECTORS OF WAVERLY DRAINAGE DISTRICT NO. 1 wishes to claim exemption from the audit requirements of Section 29-1-603, C.R.S.; and

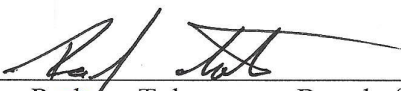
WHEREAS, neither revenues nor expenditures for the WAVERLY DRAINAGE DISTRICT NO. 1 exceeded \$100,000.00 for fiscal year 2023 and

WHEREAS, an application for exemption from audit for WAVERLY DRAINAGE has been prepared by Dennis Tabor , a person skilled in governmental accounting .

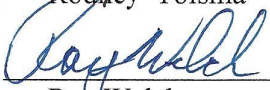
WHEREAS, said application for exemption from audit has been completed in accordance with regulations issued by the state auditor.

NOW THEREFORE, be it resolved/ordained by the BOARD OF DIRECTORS OF THE WAVERLY DRAINAGE DISTRICT NO. 1 that the application for exemption from audit for WAVERLY DRAINAGE DISTRICT NO. 1 for the fiscal year ended December 31, 2023 has been reviewed and is hereby approved by a majority of the BOARD OF DIRECTORS of the WAVERLY DRAINAGE DISTRICT NO. 1; that those members of the BOARD OF DIRECTORS have signified their approval by signing below; and that this resolution shall be attached to, and shall become a part of the application for exemption from audit of the WAVERLY DRAINAGE DISTRICT NO. 1 for the fiscal year ended December 31, 2023

ADOPTED THIS 23RD DAY OF MARCH, 2024 AD.



Rodney Tolsma Board of Director



Ray Welch Board of Director



Gerrit Schneider Board of Director