

ALLENSPARK WATER AND SANITATION DISTRICT

APPLICATION FOR EXEMPTION FROM AUDIT

DECEMBER 31, 2023

## APPLICATION FOR EXEMPTION FROM AUDIT

# LONG FORM

### FOR LOCAL GOVERNMENTS WITH EITHER REVENUES OR EXPENDITURES **MORE THAN \$100,000 BUT NOT MORE THAN \$750,000**

Under the Local Government Audit Law (Section 29-1-601, et seq., C.R.S.) any local government may apply for an exemption from audit if neither revenues nor expenditures exceed \$750,000 for the year.

### EXEMPTIONS FROM AUDIT ARE NOT AUTOMATIC

To qualify for exemption from audit, a local government must complete an Application for Exemption from Audit EACH YEAR and submit it to the Office of the State Auditor (OSA) for approval.

Any preparer of an Application for Exemption from Audit must be an independent accountant with knowledge of governmental accounting.

Approval for an exemption from audit is granted only upon the review by the OSA.

### READ ALL INSTRUCTIONS BEFORE COMPLETING AND SUBMITTING THIS FORM

ALL APPLICATIONS MUST BE FILED WITH THE OSA WITHIN 3 MONTHS AFTER THE ACCOUNTING YEAR-END. FOR EXAMPLE, APPLICATIONS MUST BE RECEIVED BY THE OSA ON OR BEFORE MARCH 31 FOR GOVERNMENTS WITH A DECEMBER 31 YEAR-END. *APPLICATIONS FOR EXEMPTION FROM AUDIT SUBMISSIONS ARE NOT ELIGIBLE FOR AN EXTENSION OF TIME.*

GOVERNMENTAL ACTIVITY SHOULD BE REPORTED ON THE MODIFIED ACCRUAL BASIS

PROPRIETARY ACTIVITY SHOULD BE REPORTED ON A BUDGETARY BASIS

**POSTMARK DATES WILL NOT BE ACCEPTED AS PROOF OF SUBMISSION ON OR BEFORE THE STATUTORY DEADLINE**

PRIOR YEAR FORMS ARE OBSOLETE AND WILL NOT BE ACCEPTED.

FOR YOUR REFERENCE, COLORADO REVISED STATUTES CAN BE FOUND AT THIS ADDRESS:

APPLICATIONS SUBMITTED ON FORMS OTHER THAN THOSE PRESCRIBED BY THE OSA WILL NOT BE ACCEPTED.

<http://www.lexisnexis.com/hottopics/Colorado/>

APPLICATIONS MUST BE FULLY AND ACCURATELY COMPLETED.

### CHECKLIST

- Has the preparer signed the application?
- Has the entity corrected all Prior Year Deficiencies as communicated by the OSA?
- Has the application been PERSONALLY reviewed and approved by the governing body?
- Are all sections of the form complete, including responses to all of the questions?
- Did you include any relevant explanations for unusual items in the appropriate spaces at the end of each section?
- Will this application be submitted electronically?
  - If yes, have you read and understand the new Electronic Signature Policy? See new [here](#) policy
  - or--
  - Have you included a resolution?
  - Does the resolution state that the governing body PERSONALLY reviewed and approved the resolution in an open public meeting?
  - Has the resolution been signed by a MAJORITY of the governing body? (See sample resolution.)
- Will this application be submitted via a mail service? (e.g. US Post Office, FedEx, UPS, courier.)
  - If yes, does the application include ORIGINAL INK SIGNATURES from the MAJORITY of the governing body?

Checkout our [web portal](#). Register your account and submit electronic Applications for Exemption From Audit, Extension of Time to File requests, Audited Financial Statements, and more! See the link below.

[Click here to go to the portal](#)

### FILING METHODS

**WEB PORTAL:** Register and submit your Applications at our web portal:

<https://apps.leg.co.gov/osa/lg>

For faster processing the web portal is the preferred method for submission

**MAIL:** Office of the State Auditor  
Local Government Audit Division  
1525 Sherman St., 7th Floor  
Denver, CO 80203

*Please Note: The OSA's email addresses have changed as of December 1, 2023. Please ensure you are using the email address noted below.*

**QUESTIONS?**

Email: [osa.lg@coleg.gov](mailto:osa.lg@coleg.gov) or Phone: 303-869-3000

### IMPORTANT!

All Applications for Exemption from Audit are subject to review and approval by the Office of the State Auditor.

Governmental Activity should be reported on the Modified Accrual Basis

Proprietary Activity should be reported on the Cash or Budgetary Basis -- A Budget to GAAP reconciliation is provided in Part 3

Failure to file an application or denial of the request could cause the local government to lose its exemption from audit for that year and the ensuing year.

In that event, AN AUDIT SHALL BE REQUIRED.

# APPLICATION FOR EXEMPTION FROM AUDIT

## LONG FORM

NAME OF GOVERNMENT  
ADDRESS

Allenspark Water and Sanitation District  
PO Box 91

CONTACT PERSON  
PHONE  
EMAIL

Allenspark, CO 80510  
Jen Cook  
303 747-2587  
jen.apwater@gmail.com

For the Year Ended  
12/31/2023  
or fiscal year ended:

### 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:  
TITLE  
FIRM NAME (if applicable)  
ADDRESS  
PHONE  
RELATIONSHIP TO ENTITY

Carl Henderson  
CPA  
Carl Henderson CPA P.C.  
1182 Graves Ave Suite C-3 Estes Park, CO 80517  
970 586-5008  
None

**PREPARER** (SIGNATURE REQUIRED)

**DATE PREPARED**

*Carl Henderson*

*3-8-24*

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		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		Fund*	Fund*		Fund*	Fund*	
<b>Assets</b>				<b>Assets</b>			
1-1	Cash & Cash Equivalents	\$ -	\$ -	Cash & Cash Equivalents	\$ 445,046	\$ -	
1-2	Investments	\$ -	\$ -	Investments	\$ -	\$ -	
1-3	Receivables	\$ -	\$ -	Receivables	\$ 7,759	\$ -	
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...]			Inventory & prepaid	\$ 5,261	\$ -	
1-6	Lease Receivable (as Lessor)	\$ -	\$ -	<b>Total Current Assets</b>	\$ 458,066	\$ -	
1-7		\$ -	\$ -	Capital & Right to Use Assets, net (from Part 6-4)	\$ 327,069	\$ -	
1-8		\$ -	\$ -	Other Long Term Assets [specify...]	\$ -	\$ -	
1-9		\$ -	\$ -		\$ -	\$ -	
1-10		\$ -	\$ -		\$ -	\$ -	
1-11	(add lines 1-1 through 1-10) <b>TOTAL ASSETS</b>	\$ -	\$ -	(add lines 1-1 through 1-10) <b>TOTAL ASSETS</b>	\$ 785,135	\$ -	
<b>Deferred Outflows of Resources:</b>				<b>Deferred Outflows of Resources</b>			
1-12	[specify...]	\$ -	\$ -	[specify...]	\$ -	\$ -	
1-13	[specify...]	\$ -	\$ -	[specify...]	\$ -	\$ -	
1-14	(add lines 1-12 through 1-13) <b>TOTAL DEFERRED OUTFLOWS</b>	\$ -	\$ -	(add lines 1-12 through 1-13) <b>TOTAL DEFERRED OUTFLOWS</b>	\$ -	\$ -	
1-15	<b>TOTAL ASSETS AND DEFERRED OUTFLOWS</b>	\$ -	\$ -	<b>TOTAL ASSETS AND DEFERRED OUTFLOWS</b>	\$ 785,135	\$ -	
<b>Liabilities</b>				<b>Liabilities</b>			
1-16	Accounts Payable	\$ -	\$ -	Accounts Payable	\$ 1,754	\$ -	
1-17	Accrued Payroll and Related Liabilities	\$ -	\$ -	Accrued Payroll and Related Liabilities	\$ 4,234	\$ -	
1-18	Unearned Revenue	\$ -	\$ -	Accrued Interest Payable	\$ -	\$ -	
1-19	Due to Other Entities or Funds	\$ -	\$ -	Due to Other Entities or Funds	\$ -	\$ -	
1-20	All Other Current Liabilities	\$ -	\$ -	All Other Current Liabilities	\$ -	\$ -	
1-21	(add lines 1-16 through 1-20) <b>TOTAL CURRENT LIABILITIES</b>	\$ -	\$ -	(add lines 1-16 through 1-20) <b>TOTAL CURRENT LIABILITIES</b>	\$ 5,988	\$ -	
1-22	All Other Liabilities [specify...]	\$ -	\$ -	Proprietary Debt Outstanding (from Part 4-4)	\$ -	\$ -	
1-23		\$ -	\$ -	Other Liabilities [specify...]:	\$ -	\$ -	
1-24		\$ -	\$ -		\$ -	\$ -	
1-25		\$ -	\$ -		\$ -	\$ -	
1-26		\$ -	\$ -		\$ -	\$ -	
1-27	(add lines 1-21 through 1-26) <b>TOTAL LIABILITIES</b>	\$ -	\$ -	(add lines 1-21 through 1-26) <b>TOTAL LIABILITIES</b>	\$ 5,988	\$ -	
<b>Deferred Inflows of Resources:</b>				<b>Deferred Inflows of Resources</b>			
1-28	Deferred Property Taxes	\$ -	\$ -	Pension/OPEB Related	\$ -	\$ -	
1-29	Lease related (as lessor)	\$ -	\$ -	Other [specify...]	\$ -	\$ -	
1-30	(add lines 1-28 through 1-29) <b>TOTAL DEFERRED INFLOWS</b>	\$ -	\$ -	(add lines 1-28 through 1-29) <b>TOTAL DEFERRED INFLOWS</b>	\$ -	\$ -	
<b>Fund Balance</b>				<b>Net Position</b>			
1-31	Nonspendable Prepaid	\$ -	\$ -	Net Investment in Capital and Right-to Use Assets	\$ 327,069	\$ -	
1-32	Nonspendable Inventory	\$ -	\$ -				
1-33	Restricted [specify...]	\$ -	\$ -	Emergency Reserves	\$ -	\$ -	
1-34	Committed [specify...]	\$ -	\$ -	Other Designations/Reserves	\$ -	\$ -	
1-35	Assigned [specify...]	\$ -	\$ -	Restricted	\$ -	\$ -	
1-36	Unassigned:	\$ -	\$ -	Undesignated/Unreserved/Unrestricted	\$ 452,078	\$ -	
1-37	Add lines 1-31 through 1-36 This total should be the same as line 3-33 <b>TOTAL FUND BALANCE</b>	\$ -	\$ -	Add lines 1-31 through 1-36 This total should be the same as line 3-33 <b>TOTAL NET POSITION</b>	\$ 779,147	\$ -	
1-38	Add lines 1-27, 1-30 and 1-37 This total should be the same as line 1-15 <b>TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND BALANCE</b>	\$ -	\$ -	Add lines 1-27, 1-30 and 1-37 This total should be the same as line 1-15 <b>TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET POSITION</b>	\$ 785,135	\$ -	

**PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES**

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		Fund*	Fund*		Fund*	Fund*	
<b>Tax Revenue</b>				<b>Tax Revenue</b>			
2-1	Property (include mills levied in Question 10-6)	\$ -	\$ -	Property (include mills levied in Question 10-6)	\$ 11,928	\$ -	
2-2	Specific Ownership	\$ -	\$ -	Specific Ownership	\$ 532	\$ -	
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	<b>Add lines 2-1 through 2-7 TOTAL TAX REVENUE</b>	\$ -	\$ -	<b>Add lines 2-1 through 2-7 TOTAL TAX REVENUE</b>	\$ 12,460	\$ -	
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	\$ -	\$ -	Donations	\$ 11,258	\$ -	
2-16	Charges for Sales and Services	\$ -	\$ -	Charges for Sales and Services	\$ 74,758	\$ -	
2-17	Rental Income	\$ -	\$ -	Rental Income	\$ -	\$ -	
2-18	Fines and Forfeits	\$ -	\$ -	Fines and Forfeits	\$ -	\$ -	
2-19	Interest/Investment Income	\$ -	\$ -	Interest/Investment Income	\$ 2,933	\$ -	
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...):	\$ -	\$ -	All Other: Misc	\$ 260	\$ -	
2-23		\$ -	\$ -		\$ -	\$ -	
2-24	<b>Add lines 2-8 through 2-23 TOTAL REVENUES</b>	\$ -	\$ -	<b>Add lines 2-8 through 2-23 TOTAL REVENUES</b>	\$ 101,669	\$ -	
<b>Other Financing Sources</b>				<b>Other Financing Sources</b>			
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	<b>Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES</b>	\$ -	\$ -	<b>Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES</b>	\$ -	\$ -	<b>GRAND TOTALS</b>
2-30	<b>Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES</b>	\$ -	\$ -	<b>Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES</b>	\$ 101,669	\$ -	\$ 101,669

**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		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		Fund*	Fund*		Fund*	Fund*	
	<b>Expenditures</b>			<b>Expenses</b>			
3-1	General Government	\$ -	\$ -	General Operating & Administrative	\$ 5,474	\$ -	
3-2	Judicial	\$ -	\$ -	Salaries	\$ 46,084	\$ -	
3-3	Law Enforcement	\$ -	\$ -	Payroll Taxes	\$ 3,618	\$ -	
3-4	Fire	\$ -	\$ -	Contract Services	\$ -	\$ -	
3-5	Highways & Streets	\$ -	\$ -	Employee Benefits	\$ -	\$ -	
3-6	Solid Waste	\$ -	\$ -	Insurance	\$ 4,736	\$ -	
3-7	Contributions to Fire & Police Pension Assoc.	\$ -	\$ -	Accounting and Legal Fees	\$ 4,575	\$ -	
3-8	Health	\$ -	\$ -	Repair and Maintenance	\$ 2,356	\$ -	
3-9	Culture and Recreation	\$ -	\$ -	Supplies	\$ 4,783	\$ -	
3-10	Transfers to other districts	\$ -	\$ -	Utilities	\$ 7,096	\$ -	
3-11	Other [specify...]:	\$ -	\$ -	Contributions to Fire & Police Pension Assoc.	\$ -	\$ -	
3-12		\$ -	\$ -	Other : Office	\$ 5,016	\$ -	
3-13		\$ -	\$ -	Water tests	\$ 2,726	\$ -	
3-14	Capital Outlay	\$ -	\$ -	Capital Outlay	\$ -	\$ -	
	Debt Service			Debt Service			
3-15	Principal (should match amount in 4-4)	\$ -	\$ -	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...]:	\$ -	\$ -	All Other [specify...]:	\$ -	\$ -	
3-21		\$ -	\$ -		\$ -	\$ -	
3-22	<b>Add lines 3-1 through 3-21</b>	\$ -	\$ -	<b>Add lines 3-1 through 3-21</b>	\$ 86,464	\$ -	
	<b>TOTAL EXPENDITURES</b>	\$ -	\$ -	<b>TOTAL EXPENSES</b>	\$ 86,464	\$ -	<b>GRAND TOTAL</b>
3-23	Interfund Transfers (In)	\$ -	\$ -	Net Interfund Transfers (In) Out	\$ -	\$ -	
3-24	Interfund Transfers Out	\$ -	\$ -	Other [specify...][enter negative for expense]	\$ -	\$ -	
3-25	Other Expenditures (Revenues):	\$ -	\$ -	Depreciation/Amortization	\$ 7,562	\$ -	
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	<b>(Add lines 3-23 through 3-28)</b>	\$ -	\$ -	<b>(Line 3-27, plus line 3-28, less line 3-26, less line 3-25, plus line 3-24) TOTAL GAAP RECONCILING ITEMS</b>	\$ (7,562)	\$ -	
	<b>TOTAL TRANSFERS AND OTHER EXPENDITURES</b>	\$ -	\$ -				
3-30	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures Line 2-29, less line 3-22, less line 3-29	\$ -	\$ -	Net Increase (Decrease) in Net Position Line 2-29, less line 3-22, plus line 3-29, less line 3-23	\$ 7,643	\$ -	
3-31	Fund Balance, January 1 from December 31 prior year report	\$ -	\$ -	Net Position, January 1 from December 31 prior year report	\$ 771,504	\$ -	
3-32	Prior Period Adjustment (MUST explain)	\$ -	\$ -	Prior Period Adjustment (MUST explain)	\$ -	\$ -	
3-33	Fund Balance, December 31 Sum of Lines 3-30, 3-31, and 3-32 This total should be the same as line 1-37.	\$ -	\$ -	Net Position, December 31 Sum of Lines 3-30, 3-31, and 3-32 This total should be the same as line 1-37.	\$ 779,147	\$ -	

**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.

	YES	NO	
4-1 Does the entity have outstanding debt?	<input type="checkbox"/>	<input type="checkbox"/>	Please use this space to provide any explanations or comments:
4-2 Is the debt repayment schedule attached? If no, MUST explain: <div style="border: 1px solid black; height: 15px; 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: <div style="border: 1px solid black; height: 15px; width: 100%; margin-top: 5px;"></div>	<input type="checkbox"/>	<input type="checkbox"/>	
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 & SBITA** Liabilities (GASB 87 & 96)	\$ -	\$ -	\$ -	\$ -
Developer Advances	\$ -	\$ -	\$ -	\$ -
Other (specify):	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

\*\*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 [Section 29-1-605(2) C.R.S.]? How much? <span style="float: right;">\$ -</span>	<input type="checkbox"/>	<input type="checkbox"/>	Please use this space to provide any explanations or comments:
If yes: Date the debt was authorized: <span style="float: right;">Date: _____</span>			
4-6 Does the entity intend to issue debt within the next calendar year? How much? <span style="float: right;">\$ -</span>	<input type="checkbox"/>	<input type="checkbox"/>	
4-7 Does the entity have debt that has been refinanced that it is still responsible for? What is the amount outstanding? <span style="float: right;">\$ -</span>	<input type="checkbox"/>	<input type="checkbox"/>	
4-8 Does the entity have any lease agreements? If yes: What is being leased? <span style="float: right;">_____</span>			Please use this space to provide any explanations or comments:
What is the original date of the lease? <span style="float: right;">_____</span>			
Number of years of lease? <span style="float: right;">_____</span>			
Is the lease subject to annual appropriation? What are the annual lease payments? <span style="float: right;">\$ -</span>	<input type="checkbox"/>	<input type="checkbox"/>	

## 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	\$ 445,046		Please use this space to provide any explanations or comments:
5-2 Certificates of deposit	\$ -		
<b>TOTAL CASH DEPOSITS</b>		<b>\$ 445,046</b>	
Investments (if investment is a mutual fund, please list underlying investments):			
5-3	\$ -		Please use this space to provide any explanations or comments:
	\$ -		
	\$ -		
	\$ -		
<b>TOTAL INVESTMENTS</b>		<b>\$ -</b>	
<b>TOTAL CASH AND INVESTMENTS</b>		<b>\$ 445,046</b>	

Please answer the following question by marking in the appropriate box

	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 type="checkbox"/>	Please use this space to provide any explanations or comments:
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: <div style="border: 1px solid black; height: 15px; width: 100%; margin-top: 5px;"></div>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 6 - CAPITAL AND RIGHT-TO-USE ASSETS**

Please answer the following question by marking in the appropriate box YES NO Please use this space to provide any explanations or comments:

- 6-1 Does the entity have capitalized 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

MUST explain:

6-3 Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL 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 & SBITA Right-to-Use Assets	\$ -	\$ -	\$ -	\$ -
Intangible Assets	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ -	\$ -	\$ -	\$ -
Accumulated Amortization Right to Use Assets (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	\$ -	\$ -	\$ -	\$ -

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	\$ 85,723	\$ -	\$ -	\$ 85,723
Buildings	\$ -	\$ -	\$ -	\$ -
Machinery and equipment	\$ 17,178	\$ -	\$ -	\$ 17,178
Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ 771,198	\$ 11,924	\$ -	\$ 783,122
Construction in Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Leased & SBITA Right-to-Use Assets	\$ -	\$ -	\$ -	\$ -
Intangible Assets	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ -	\$ -	\$ -	\$ -
Accumulated Amortization Right to Use Assets (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
Accumulated Depreciation (Enter a negative, or credit, balance)	\$ (551,392)	\$ (7,562)	\$ -	\$ (558,954)
<b>TOTAL</b>	\$ 322,707	\$ 4,362	\$ -	\$ 327,069

\* 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?  YES  NO
- 7-2 Does the entity have a volunteer firefighters' pension plan?  YES  NO
- If yes: Who administers the plan?  YES  NO

Indicate the contributions from:

Tax (property, SO, sales, etc.):	\$ -
State contribution amount:	\$ -
Other (gifts, donations, etc.):	\$ -
<b>TOTAL</b>	\$ -
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		YES	NO	N/A	Please use this space to provide any explanations or comments:
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:	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

Governmental/Proprietary Fund Name	Total Appropriations By Fund
Proprietary fund	\$ 168,550
	\$ -
	\$ -
	\$ -

**PART 9 - TAX PAYER'S BILL OF RIGHTS (TABOR)**

Please answer the following question by marking in the appropriate box		YES	NO	Please use this space to provide any explanations or comments:
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? <small>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.</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

**PART 10 - GENERAL INFORMATION**

Please answer the following question by marking in the appropriate box		YES	NO	Please use this space to provide any explanations or comments:					
10-1	Is this application for a newly formed governmental entity? If yes: Date of formation: <input type="text"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
10-2	Has the entity changed its name in the past or current year? If Yes: NEW name <input type="text"/> PRIOR name <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>						
10-3	Is the entity a metropolitan district?	<input type="checkbox"/>	<input type="checkbox"/>						
10-4	Please indicate what services the entity provides: <input type="text"/>								
10-5	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: <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>						
10-6	Does the entity have a certified mill levy? If yes: Please provide the number of <u>mills</u> levied for the year reported (do not enter \$ amounts):	<input type="checkbox"/>	<input type="checkbox"/>						
	<table border="1"> <tbody> <tr> <td>Bond Redemption mills</td> <td>0.000</td> </tr> <tr> <td>General/Other mills</td> <td>3.989</td> </tr> <tr> <td><b>Total mills</b></td> <td><b>3.989</b></td> </tr> </tbody> </table>	Bond Redemption mills	0.000	General/Other mills		3.989	<b>Total mills</b>	<b>3.989</b>	
Bond Redemption mills	0.000								
General/Other mills	3.989								
<b>Total mills</b>	<b>3.989</b>								
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. <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>					

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.

A MAJORITY of the members of the governing body must complete and sign in the column below.

	Full Name	
1	Ron Holan	I, <u>Ronald Holan</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: _____ My term Expires: <u>2025</u>
2	Richard Sullivan	I, <u>Richard Sullivan</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>[Signature]</u> Date: <u>4/29/2024</u> My term Expires: <u>2027</u>
3	Susan Lewkow	I, <u>Susan Lewkow</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>[Signature]</u> Date: <u>4/29/2024</u> My term Expires: <u>2027</u>
4	Michael Bushue	I, <u>Michael Bushue</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>[Signature]</u> Date: <u>4/26/2024</u> My term Expires: <u>2027</u>
5	Robert Vinson	I, <u>Robert Vinson</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>[Signature]</u> Date: <u>4/27/2024</u> My term Expires: <u>2025</u>
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: _____

Allenspark Water and Sanitation District  
Comparative Statement of Assets, Liabilities and Net Assets  
December 31, 2023 and 2022

	<b>Assets</b>	<u>2023</u>	<u>2022</u>
<b>Current</b>			
Cash and cash equivalents		\$ 445,046	\$ 442,878
Accounts receivable		7,759	6,061
Accounts receivable, taxes		12,290	11,587
Inventory		4,010	4,269
Prepaid expenses		<u>1,251</u>	<u>1,631</u>
Total current assets		<u>470,356</u>	<u>466,426</u>
<b>Other</b>			
Utility plant in service		<u>327,069</u>	<u>322,707</u>
Total noncurrent assets		<u>327,069</u>	<u>322,707</u>
Total assets		<u><u>\$ 797,425</u></u>	<u><u>\$ 789,133</u></u>
	<b>Liabilities</b>		
<b>Current Liabilities</b>			
Accounts payable		\$ 1,755	\$ 2,380
Accrued expenses payable		4,234	3,664
Deferred revenue		<u>12,290</u>	<u>11,587</u>
Total current liabilities		<u>18,279</u>	<u>17,631</u>
	<b>Net Assets</b>		
Invested in capital assets, net of related debt		327,069	322,707
Unrestricted net assets			
Designated net assets		272,624	237,124
Undesignated net assets		<u>179,453</u>	<u>211,671</u>
Total net assets		<u>779,146</u>	<u>771,502</u>
Total liabilities and net assets		<u><u>\$ 797,425</u></u>	<u><u>\$ 789,133</u></u>

No assurances are provided on these financial statements

Allenspark Water and Sanitation District  
 Comparative Statement of Revenues, Expenses and Net Assets  
 For the Years Ended December 31, 2023 and 2022

	<u>2023</u>	<u>2022</u>
<b>Operating Revenues</b>		
Charge for services	\$ <u>86,016</u>	\$ <u>81,466</u>
<b>Operating Expenses</b>		
Treatment	48,893	52,218
Administrative	<u>45,133</u>	<u>40,575</u>
Total operating expenses	<u>94,026</u>	<u>92,793</u>
<b>Operating income</b>	<u>(8,010)</u>	<u>(11,327)</u>
<b>Nonoperating Revenues</b>		
Miscellaneous income	3,193	554
Tax revenues	<u>12,461</u>	<u>11,348</u>
Total nonoperating revenues	<u>15,654</u>	<u>11,902</u>
<b>Increase in net assets</b>	7,644	575
Total net assets - beginning	<u>771,502</u>	<u>770,927</u>
Total net assets - ending	<u><u>\$ 779,146</u></u>	<u><u>\$ 771,502</u></u>

No assurances are provided on these financial statements

Allenspark Water and Sanitation District  
Comparative Schedule of Treatment and Administrative Expenses  
For the Years Ended December 31, 2023 and 2022

	<b>TREATMENT</b>	<u>2023</u>	<u>2022</u>
<b>Payroll</b>			
Salaries		\$ 20,273	\$ 24,754
Payroll taxes		<u>1,592</u>	<u>2,035</u>
		21,865	26,789
<b>Other</b>			
Depreciation		7,562	7,826
Operating supplies		4,783	2,365
Repairs and maintenance		2,356	4,724
Utilities		7,096	5,891
Vehicle		2,505	2,296
Water tests and permits		<u>2,726</u>	<u>2,327</u>
<b>Total collection expenses</b>		<u><b>\$ 48,893</b></u>	<u><b>\$ 52,218</b></u>
<b>ADMINISTRATIVE</b>			
<b>Payroll</b>			
Salaries		\$ 25,811	\$ 22,506
Payroll taxes		<u>2,026</u>	<u>1,878</u>
		27,837	24,384
<b>Other</b>			
Insurance		4,735	3,715
Legal and professional		4,575	4,461
Miscellaneous		2,789	3,846
Office		3,817	4,006
Rent		1,200	-
Treasurers fee		<u>180</u>	<u>163</u>
<b>Total administrative expenses</b>		<u><b>\$ 45,133</b></u>	<u><b>\$ 40,575</b></u>

No assurances are provided on these financial statements

Allenspark Water and Sanitation District  
Schedule of Revenues, Expenses and Other Budgeted Items  
For the Year Ended December 31, 2023

	<u>Budget</u>	<u>Actual</u>	Variance Favorable (Unfavor- able)
<b>Revenue</b>			
Operating revenues	\$ 83,500	\$ 86,016	\$ 2,516
<b>Expenses</b>			
Treatment	53,364	41,331	12,033
Administration	57,686	45,133	12,553
Total expenses	<u>111,050</u>	<u>86,464</u>	<u>24,586</u>
<b>Operating income</b>	<u>(27,550)</u>	<u>(448)</u>	<u>27,102</u>
<b>Nonoperating revenues (expenses)</b>			
Interest income	50	3,193	3,143
Taxes	11,588	12,461	873
Other	495	-	(495)
Increase in net assets	<u>12,133</u>	<u>15,654</u>	<u>3,521</u>
<b>Net income</b>	<u>(15,417)</u>	<u>15,206</u>	<u>30,623</u>
<b>Other budgeted items</b>			
Non-expense			
Purchase/construction of fixed assets	57,500	5,859	51,641
Transfer to (from) reserves	<u>(22,000)</u>	<u>9,400</u>	<u>(31,400)</u>
	<u>35,500</u>	<u>15,259</u>	<u>20,241</u>
<b>Net income including other budgeted items</b>	<u>\$ (50,917)</u>	<u>\$ (53)</u>	<u>\$ 50,864</u>

No assurances are provided on these financial statements

Allenspark Water and Sanitation District  
Schedule of Treatment and Administrative Expenses  
For the Year Ended December 31, 2023

			Variance Favorable (Unfavor- able)
<b>TREATMENT</b>			
<b>Payroll</b>	<u>Budget</u>	<u>Actual</u>	
Salaries	\$ 25,872	\$ 20,273	\$ 5,599
Payroll taxes	<u>2,042</u>	<u>1,592</u>	<u>450</u>
	27,914	21,865	6,049
<b>Other</b>			
Operating supplies	8,800	4,783	4,017
Repairs and maintenance	7,000	2,356	4,644
Utilities	7,300	7,096	204
Vehicle	-	2,505	(2,505)
Water tests and permits	<u>2,350</u>	<u>2,726</u>	<u>(376)</u>
Total treatment expenses	<u>\$ 53,364</u>	<u>\$ 41,331</u>	<u>\$ 12,033</u>
<b>ADMINISTRATIVE</b>			
<b>Payroll</b>			
Salaries	\$ 32,928	\$ 25,811	\$ 7,117
Payroll taxes	<u>2,598</u>	<u>2,026</u>	<u>572</u>
	35,526	27,837	7,689
<b>Other</b>			
Insurance	6,020	4,735	1,285
Legal and professional	6,350	4,575	1,775
Miscellaneous	5,590	2,789	2,801
Office supplies	4,200	3,817	383
Rent	-	1,200	(1,200)
Treasurers fee	<u>-</u>	<u>180</u>	<u>(180)</u>
Total administrative expenses	<u>\$ 57,686</u>	<u>\$ 45,133</u>	<u>\$ 12,553</u>

No assurances are provided on these financial statements

**Certificate Of Completion**

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Source Envelope:	
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Certificate Pages: 6	Initials: 0
AutoNav: Enabled	Envelope Originator:
Enveloped Stamping: Enabled	Jennifer Cook
Time Zone: (UTC-08:00) Pacific Time (US & Canada)	jen.apwater@gmail.com
	IP Address: 172.242.88.209

**Record Tracking**

Status: Original	Holder: Jennifer Cook	Location: DocuSign
4/26/2024 12:20:30 PM	jen.apwater@gmail.com	

**Signer Events**

Mike  
 m.bushue@yahoo.com  
 Security Level: Email, Account Authentication (None)

**Signature**

DocuSigned by:  
  
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 Signature Adoption: Pre-selected Style  
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 Viewed: 4/26/2024 8:29:29 PM  
 Signed: 4/26/2024 8:42:34 PM  
 Freeform Signing

**Electronic Record and Signature Disclosure:**  
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 ID: 64800222-2335-46f3-a25a-ce5163e4e2ac


Rick  
 rick.sullivan1@gmail.com  
 Security Level: Email, Account Authentication (None)

DocuSigned by:  
  
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 Signature Adoption: Drawn on Device  
 Using IP Address: 164.47.74.3  
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**Electronic Record and Signature Disclosure:**  
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 ID: 2aa859fb-6f3e-4e47-aadb-7292cb1505e1

Robbie  
 saltair92@yahoo.com  
 Security Level: Email, Account Authentication (None)

DocuSigned by:  
  
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 Signature Adoption: Pre-selected Style  
 Using IP Address: 70.59.6.230

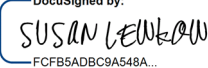
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 ID: b88b3a60-0ec8-4d07-a9ce-39c5d81db7e7


Ron  
 holan.ron@gmail.com  
 Security Level: Email, Account Authentication (None)

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 Resent: 4/26/2024 7:42:06 PM  
 Resent: 4/29/2024 10:33:08 AM

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Signer Events	Signature	Timestamp
<p>SUSAN LEWKOW  lewkowsu@yahoo.com  Security Level: Email, Account Authentication (None)</p>	<p>DocuSigned by:    FCFB5ADBC9A548A...</p> <p>Signature Adoption: Pre-selected Style  Using IP Address: 169.197.23.148</p>	<p>Sent: 4/26/2024 12:24:24 PM  Resent: 4/26/2024 12:32:29 PM  Resent: 4/26/2024 12:36:24 PM  Resent: 4/26/2024 12:40:01 PM  Resent: 4/26/2024 12:44:57 PM  Resent: 4/26/2024 12:49:08 PM  Resent: 4/26/2024 1:55:16 PM  Resent: 4/26/2024 7:42:06 PM  Resent: 4/29/2024 10:33:08 AM  Viewed: 4/29/2024 10:37:57 AM  Signed: 4/29/2024 10:38:20 AM</p>

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In Person Signer Events	Signature	Timestamp
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<b>Agent Delivery Events</b>	<b>Status</b>	<b>Timestamp</b>
<b>Intermediary Delivery Events</b>	<b>Status</b>	<b>Timestamp</b>
<b>Certified Delivery Events</b>	<b>Status</b>	<b>Timestamp</b>
<b>Carbon Copy Events</b>	<b>Status</b>	<b>Timestamp</b>
<p>Jennifer Cook  jen.apwater@gmail.com  Security Level: Email, Account Authentication (None)</p>		<p>Sent: 4/26/2024 1:55:16 PM  Resent: 4/26/2024 5:36:56 PM  Viewed: 4/26/2024 7:55:13 PM</p>
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Certified Delivered	Security Checked	4/29/2024 10:37:57 AM
Signing Complete	Security Checked	4/29/2024 10:38:20 AM

<b>Payment Events</b>	<b>Status</b>	<b>Timestamps</b>
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**Electronic Record and Signature Disclosure**