

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

| | | |
|---|--|---|
| NAME OF GOVERNMENT ADDRESS CONTACT PERSON PHONE EMAIL | GSF Metropolitan District No. 1 | For the Year Ended 12/31/24 or fiscal year ended: |
| | 121 S Tejon Street | |
| | Suite 1100 | |
| | Colorado Springs, CO 80903 | |
| | Carrie Bartow | |
| | 719-635-0330 | |
| | carrie.bartow@claconnect.com | |

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 | Carrie Bartow |
| | Accountant for the District |
| | CliftonLarsonAllen LLP |
| | 121 S Tejon Street, Suite 1100, Colorado Springs, CO 80903 |
| | 719-635-0330 |

| | |
|--|--|
| PREPARER (SIGNATURE REQUIRED) | DATE PREPARED (No exemption shall be granted prior to the close of said fiscal year) |
| SEE ATTACHED ACCOUNTANT'S COMPILATION REPORT | 2/14/2025 |

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

PART 2 - REVENUES

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 the nearest dollar | Please use this space to provide any necessary explanations |
|--------|--|-----------------------------|---|
| 2-1 | Taxes: Property (report mills levied in question 10-7) | \$ 6,291 | |
| 2-2 | Specific ownership | \$ 663 | |
| 2-3 | Sales and use | \$ - | |
| 2-4 | Other (specify): Backfill SB22-38 / SB23B-001 | \$ 450 | |
| 2-5 | Licenses and permits | \$ - | |
| 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 | \$ 96 | |
| 2-14 | Charges for utility services | \$ - | |
| 2-15 | Debt proceeds (should agree to table 4-4, column 'Issued during year') | \$ - | |
| 2-16 | Lease proceeds | \$ - | |
| 2-17 | Developer Advances received (should agree to table 4-4, column 'Issued during year') | \$ - | |
| 2-18 | Proceeds from sale of capital assets | \$ - | |
| 2-19 | Fire and police pension | \$ - | |
| 2-20 | Donations | \$ - | |
| 2-21 | Other (specify): | \$ - | |
| 2-22 | | \$ - | |
| 2-23 | | \$ - | |
| 2-24 | | \$ - | |
| 2-25 | | \$ - | |
| 2-26 | (add lines 2-1 through 2-25) TOTAL REVENUES | \$ 7,500 | |

PART 3 - EXPENDITURES/EXPENSES

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 the 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 | \$ - | |
| 3-7 | Accounting and legal fees | \$ - | |
| 3-8 | Repair and maintenance | \$ - | |
| 3-9 | Supplies | \$ - | |
| 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 to table 4-4, column 'Retired during year') | \$ - | |
| 3-18 | Debt service interest | \$ - | |
| 3-19 | Repayment of Developer Advance Principal (should agree to table 4-4, column 'Retired during year') | \$ - | |
| 3-20 | Repayment of Developer Advance Interest | \$ - | |
| 3-21 | Contribution to pension plan | \$ - | |
| 3-22 | Contribution to Fire & Police Pension Assoc. | \$ - | |
| 3-23 | Other (specify): County Treasurer's Fee | \$ 94 | |
| 3-24 | Intergovernmental Expenditures to GSF BID | \$ 7,406 | |
| 3-25 | | \$ - | |
| 3-26 | | \$ - | |
| 3-27 | | \$ - | |
| 3-28 | (add lines 3-1 through 3-27) TOTAL EXPENDITURES/EXPENSES | \$ 7,500 | |

If TOTAL REVENUES (Line 2-26) or TOTAL EXPENDITURES (Line 3-28) 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 'No' is checked, skip to question 4-5)
(If 'Yes' is checked, please attach a copy of the entity's debt repayment schedule) Yes No

4-2 Is the debt repayment schedule attached? If no, **MUST** explain below: Yes No

The District has no outstanding debt.

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

The District has no outstanding debt.

| Please complete the following debt schedule, if applicable: (please only include principal amounts) (enter all amounts 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

Please answer the following questions by marking the appropriate boxes. Yes No

4-5 Does the entity have any authorized but unissued debt as of its fiscal year-end? Yes No
 How much? \$ 2,550,000,000.00
 Date the debt was authorized: 11/2/2021

NEW 4-6 Is the authorized but unissued debt further limited by the entity's most recent Service Plan? Yes No
 If yes: How much? \$ 83,100,000.00
 Date of the most recent Service Plan: 3/23/2021

4-7 Does the entity intend to issue debt within the next calendar year? Yes No
 If yes: How much? \$ -

4-8 Does the entity have debt that has been refinanced that it is still responsible for? Yes No
 If yes: What is the amount outstanding? \$ -

4-9 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 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 | \$ - | |
| 5-2 | Certificates of deposit | \$ - | |
| TOTAL CASH DEPOSITS | | | \$ - |

| | | | |
|-----------------------------------|---|--------|--------|
| 5-3 | Investments (if investment is a mutual fund, please list underlying investments): | | |
| | ColoTrust | \$ 943 | |
| | | \$ - | |
| | | \$ - | |
| | | \$ - | |
| TOTAL INVESTMENTS | | | \$ 943 |
| TOTAL CASH AND INVESTMENTS | | | \$ 943 |

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.? Yes No N/A

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

Part 5 - 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?
(If 'No' is checked, skip the rest of Part 6) 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

The District has no capital assets.

| Complete the following capital & right-to-use assets table: | 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 | \$ - | \$ - | \$ - | \$ - |
| Other (explain): | \$ - | \$ - | \$ - | \$ - |
| Accumulated Depreciation/Amortization <small>(Please enter a negative, or credit, balance)</small> | \$ - | \$ - | \$ - | \$ - |
| TOTAL | \$ - | \$ - | \$ - | \$ - |

*Must agree to prior year-end balance
[^]Generally capital asset additions should be reported as capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy

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? Yes No
- 7-2 Does the entity have a volunteer firefighters' pension plan? Yes No

If yes: Who administers the plan?

Indicate the contributions from:

| | |
|----------------------------------|------|
| Tax (property, SO, sales, etc.): | \$ - |
| State contribution amount: | \$ - |
| Other (gifts, donations, etc.): | \$ - |
| TOTAL | \$ - |

What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?

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.? Yes No N/A
 If no, **MUST** explain:

- 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 (Please make sure each individual fund's appropriation agrees to how the budget was adopted. Do not combine funds)

| Governmental/Proprietary Fund Name | Total Appropriations By Fund |
|------------------------------------|------------------------------|
| General Fund | \$10,000.00 |
| | |
| | |
| | |

PART 9 - TAXPAYER'S BILL OF RIGHTS (TABOR)

Please answer the following question by marking in the appropriate box.

| | Yes | No |
|--|-------------------------------------|--------------------------|
| 9-1 Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? <i>Note: An election to exempt the entity from the spending limitations of TABOR does not exempt the entity from the 3 percent emergency reserve requirement. All entities should determine if they meet this requirement of TABOR.</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Part 9 - If no, MUST use this space to provide any explanations

PART 10 - GENERAL INFORMATION

Please answer the following questions by marking in the appropriate boxes.

| | Yes | No | | | | | | |
|--|-------------------------------------|-------------------------------------|--------------------------|--------|--------------------|---------------|--|--|
| 10-1 Is this application for a newly formed governmental entity? If yes: Date of formation: <input style="width: 300px;" 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: Please list the NEW name: <input style="width: 300px;" type="text"/> Please list the PRIOR name: <input style="width: 300px;" type="text"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | | | | | |
| 10-3 Is the entity a metropolitan district? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| 10-4 Please indicate what services the entity provides: <input style="width: 500px; height: 20px;" type="text" value="See notes below"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| 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 style="width: 500px; height: 20px;" type="text" value="See notes below"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| 10-6 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.] If yes: Date filed: <input style="width: 300px;" type="text" value="12/9/2024"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| 10-7 Does the entity have a certified mill levy? If yes: Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts): | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| <table style="margin-left: auto; border-collapse: collapse;"> <tr> <td style="padding-right: 10px;">Bond redemption mills</td> <td style="border: 1px solid black; text-align: center;">-</td> </tr> <tr> <td style="padding-right: 10px;">General/other mills</td> <td style="border: 1px solid black; text-align: center;">11.510</td> </tr> <tr style="background-color: #0056b3; color: white;"> <td style="padding-right: 10px;">Total mills</td> <td style="border: 1px solid black; text-align: center;">11.510</td> </tr> </table> | Bond redemption mills | - | General/other mills | 11.510 | Total mills | 11.510 | | |
| Bond redemption mills | - | | | | | | | |
| General/other mills | 11.510 | | | | | | | |
| Total mills | 11.510 | | | | | | | |
| | Yes | No | N/A | | | | | |
| 10-8 If the entity is a Title 32 Special District formed 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 style="width: 500px; height: 20px;" type="text"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |

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

10-4: Public improvements for streets, parks and recreation , water, sanitary/storm sewer, transportation, mosquito control, safety protection, fire protection, television and relay translation, security and operations and maintenance.
 10-5: The District was formed in conjunction with GSF Metropolitan District No. 2 and GSF Business Improvement District to provide for the above improvements.

PART 11 - GOVERNING BODY APPROVAL

Please answer the following question by marking in the appropriate box.

Yes

No

11-1 If you plan to submit this form electronically, have you read the Electronic Signature Policy?

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signature Policy and Procedure

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 two 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.

| Print or type the names of ALL members of current governing body below. A MAJORITY of the members of the governing body must sign below. | | |
|---|--|--|
| Board Member 1 | Board Member's Name: | Christopher S. Jenkins |
| | I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. | Signature _____ |
| | My term expires: May 2025 | Date _____ |
| Board Member 2 | Board Member's Name: | Delroy Johnson |
| | I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. | Signature <small>Signed by:</small> <i>Delroy Johnson</i> |
| | My term expires: May 2027 | 3/13/2025 <small>57373E398D824FC...</small> |
| Board Member 3 | Board Member's Name: | David D. Jenkins |
| | I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. | Signature <small>Signed by:</small> <i>David D. Jenkins</i> |
| | My term expires: May 2027 | 3/14/2025 <small>3B54775D758F4FF...</small> |
| Board Member 4 | Board Member's Name: | Jeffrey Finn |
| | I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. | Signature _____ |
| | My term expires: May 2027 | Date _____ |
| Board Member 5 | Board Member's Name: | Timothy Seibert |
| | I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. | Signature <small>Signed by:</small> <i>Timothy Seibert</i> |
| | My term expires: May 2025 | 3/12/2025 <small>F9387EC0B99F48F...</small> |
| Board Member 6 | Board Member's Name: | |
| | | |
| Board Member 7 | Board Member's Name: | |
| | | |



CliftonLarsonAllen LLP
claconnect.com

Accountant's Compilation Report

Board of Directors
GSF Metropolitan District No. 1
El Paso County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of GSF Metropolitan District No. 1 as of and for the year ended December 31, 2024, included in the accompanying prescribed form. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the American Institute of Certified Public Accountants. We did not audit or review the financial statements included in the accompanying prescribed form nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the financial statements included in the accompanying prescribed form.

The Application for Exemption from Audit is presented in accordance with the requirements of the Colorado Office of the State Auditor, which differ from accounting principles generally accepted in the United States of America.

This report is intended solely for the information and use of the Colorado Office of the State Auditor and is not intended to be and should not be used by anyone other than this specified party.

We are not independent with respect to GSF Metropolitan District No. 1.

A handwritten signature in cursive script that reads "CliftonLarsonAllen LLP".

Colorado Springs, Colorado
February 14, 2025

Certificate Of Completion

| | |
|---|----------------------------|
| Envelope Id: F3CB90D4-7E3F-492C-9FD4-CBAC918F3196 | Status: Completed |
| Subject: Complete with Docusign: GSF MD1 - 2024 Audit Exemption.pdf | |
| Client Name: GSF Metropolitan District No. 1 | |
| Client Number: A127047 | |
| Source Envelope: | |
| Document Pages: 8 | Signatures: 3 |
| Certificate Pages: 5 | Initials: 0 |
| AutoNav: Enabled | Envelope Originator: |
| Envelopeld Stamping: Enabled | Chris Lal |
| Time Zone: (UTC-06:00) Central Time (US & Canada) | 220 S 6th St Ste 300 |
| | Minneapolis, MN 55402-1418 |
| | Chris.Lal@claconnect.com |
| | IP Address: 4.2.161.250 |

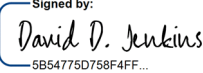
Record Tracking

| | | |
|----------------------|--------------------------|--------------------|
| Status: Original | Holder: Chris Lal | Location: DocuSign |
| 3/12/2025 3:45:34 PM | Chris.Lal@claconnect.com | |

Signer Events

David D. Jenkins
 djenkins@norwood.dev
 v.p.Norwood Ltd manage
 Security Level: Email, Account Authentication (None)

Signature

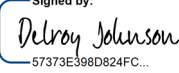
Signed by:

 5B54775D758F4FF...
 Signature Adoption: Pre-selected Style
 Using IP Address: 73.78.186.197

Timestamp

Sent: 3/12/2025 3:48:31 PM
 Viewed: 3/14/2025 8:43:05 AM
 Signed: 3/14/2025 8:43:19 AM

Electronic Record and Signature Disclosure:
 Accepted: 3/14/2025 8:43:05 AM
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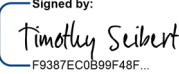
Delroy Johnson
 djohnson@norwood.dev
 Director
 Various Districts
 Security Level: Email, Account Authentication (None)

Signed by:

 57373E398D824FC...
 Signature Adoption: Pre-selected Style
 Using IP Address: 38.75.248.16

Sent: 3/12/2025 3:48:31 PM
 Viewed: 3/13/2025 10:29:32 AM
 Signed: 3/13/2025 10:29:46 AM

Electronic Record and Signature Disclosure:
 Accepted: 3/13/2025 10:29:32 AM
 ID: 4d7e1d76-88a4-4656-9117-f69bc7dd4e2b

Timothy Seibert
 tseibert@norwood.dev
 President
 Security Level: Email, Account Authentication (None)

Signed by:

 F9387EC0B99F48F...
 Signature Adoption: Pre-selected Style
 Using IP Address: 38.75.248.16

Sent: 3/12/2025 3:48:32 PM
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Electronic Record and Signature Disclosure:
 Accepted: 3/12/2025 4:01:50 PM
 ID: a947bc93-2c2e-437a-b02b-5335645ec35b

| 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 |
|----------------------------------|---------------|------------------|
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| Carbon Copy Events | Status | Timestamp |
|---------------------------|---------------|------------------|
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| Witness Events | Signature | Timestamp |
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| Notary Events | Signature | Timestamp |
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| Envelope Summary Events | Status | Timestamps |
|--------------------------------|---------------|-------------------|
|--------------------------------|---------------|-------------------|

| | | |
|---------------------|------------------|----------------------|
| Envelope Sent | Hashed/Encrypted | 3/12/2025 3:48:32 PM |
| Envelope Updated | Security Checked | 3/14/2025 9:13:13 AM |
| Envelope Updated | Security Checked | 3/14/2025 9:13:13 AM |
| Certified Delivered | Security Checked | 3/12/2025 4:01:50 PM |
| Signing Complete | Security Checked | 3/12/2025 4:01:58 PM |
| Completed | Security Checked | 3/14/2025 9:13:13 AM |

| Payment Events | Status | Timestamps |
|-----------------------|---------------|-------------------|
|-----------------------|---------------|-------------------|

| Electronic Record and Signature Disclosure |
|---|
|---|

ELECTRONIC RECORD AND SIGNATURE DISCLOSURE

From time to time, CliftonLarsonAllen LLP (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to this Electronic Record and Signature Disclosure (ERSD), please confirm your agreement by selecting the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

Getting paper copies

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after the signing session and, if you elect to create a DocuSign account, you may access the documents for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

Withdrawing your consent

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

All notices and disclosures will be sent to you electronically

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