

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT
ADDRESS

FRONT RANGE AIRPARK METROPOLITAN DISTRICT NO. 1
C/O SPENCER FANE LLP
1700 LINCOLN STREET, STE. 2000
DENVER, CO 80203
DAVID O'LEARY, ESQ.
303-839-3800
DOLEARY@SPENCERFANE.COM

For the Year Ended
12/31/24
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

COURTNEY LINNEY
PARALEGAL
SPENCER FANE LLP
1700 LINCOLN STREET, STE. 2000, DENVER, CO 80203
303-839-3778

PREPARER <u>(SIGNATURE REQUIRED)</u>	DATE PREPARED <small>(No exemption shall be granted prior to the close of said fiscal year)</small>				
<i>Courtney Linney</i>	3/27/2025				
Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; padding: 2px;">GOVERNMENTAL <small>(MODIFIED ACCRUAL BASIS)</small></th> <th style="width: 50%; padding: 2px;">PROPRIETARY <small>(CASH OR BUDGETARY BASIS)</small></th> </tr> <tr> <td style="text-align: center; padding: 2px;"><input checked="" type="checkbox"/></td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> </table>	GOVERNMENTAL <small>(MODIFIED ACCRUAL BASIS)</small>	PROPRIETARY <small>(CASH OR BUDGETARY BASIS)</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	
2-1	Taxes: Property (report mills levied in question 10-7)	\$ -	Please use this space to provide any necessary explanations
2-2	Specific ownership	\$ -	
2-3	Sales and use	\$ -	
2-4	Other (specify):	\$ -	
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	\$ -	
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	\$ -	

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	
3-1	Administrative	\$ -	Please use this space to provide any necessary explanations
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):	\$ -	
3-24		\$ -	
3-25		\$ -	
3-26		\$ -	
3-27		\$ -	
3-28	(add lines 3-1 through 3-27) TOTAL EXPENDITURES/EXPENSES	\$ -	

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? <i>(If 'No' is checked, skip to question 4-5)</i> <i>(If 'Yes' is checked, please attach a copy of the entity's debt repayment schedule)</i>	<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; 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; margin-top: 5px;"></div>	<input type="checkbox"/>	<input type="checkbox"/>	
4-4 Please complete the following debt schedule, if applicable: <small>(please only include principal amounts) (enter all amounts as positive numbers)</small>			
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? How much? \$ 634,835,344.00 Date the debt was authorized: 11/5/2024	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
NEW 4-6 Is the authorized but unissued debt further limited by the entity's most recent Service Plan? If yes: How much? \$ - Date of the most recent Service Plan: 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4-7 Does the entity intend to issue debt within the next calendar year? If yes: How much? \$ -	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4-8 Does the entity have debt that has been refinanced that it is still responsible for? If yes: What is the amount outstanding? \$ -	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4-9 Does the entity have any lease agreements? 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? What are the annual lease payments? \$ -	<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	\$ -	
5-2 Certificates of deposit	\$ -	
TOTAL CASH DEPOSITS		\$ -
5-3 Investments (if investment is a mutual fund, please list underlying investments):		
	\$ -	
	\$ -	
	\$ -	
	\$ -	
TOTAL INVESTMENTS		\$ -
TOTAL CASH AND INVESTMENTS		\$ -

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 checked="" type="checkbox"/>

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

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

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 <i>(Please enter a negative, or credit, balance)</i>	\$ -	\$ -	\$ -	\$ -
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

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)]?

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.

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:

- 10-2 Has the entity changed its name in the past or current year?

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

- 10-3 Is the entity a metropolitan district?

10-4 Please indicate what services the entity provides:

- 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:

- 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:

- 10-7 Does the entity have a certified mill levy?

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 |
|---|--------------------------|--------------------------|-------------------------------------|
| 10-8 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 type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

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

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:	Francis Nemecek _____
	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 <u>Francis Nemecek</u> _____
	My term expires: May 2027 _____	Date <u>03/27/2025</u> _____
Board Member 2	Board Member's Name:	Leah Ramsey _____
	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 <u>Leah Ramsey</u> _____
	My term expires: May 2027 _____	Date <u>03/27/2025</u> _____
Board Member 3	Board Member's Name:	David Windfeldt _____
	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 <u>David Windfeldt</u> _____
	My term expires: May, 2025 _____	Date <u>03/27/2025</u> _____
Board Member 4	Board Member's Name:	_____ _____
	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: _____	Date _____ _____
Board Member 5	Board Member's Name:	_____ _____
	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: _____	Date _____ _____
Board Member 6	Board Member's Name:	_____ _____
	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: _____	Date _____ _____
Board Member 7	Board Member's Name:	_____ _____
	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: _____	Date _____ _____

**RESOLUTION APPROVING THE EXEMPTIONS FROM AUDIT
FOR FISCAL YEAR 2024 FOR THE
FRONT RANGE AIRPARK METROPOLITAN DISTRICT NOS. 1-5
(revenues or expenditures did not exceed \$100,000)
(Pursuant to Section 29-1-604, C.R.S.)**

WHEREAS, the Board of Directors of the Front Range Airpark Metropolitan District Nos. 1-5 (collectively, the "Districts") wishes to claim exemption from the audit requirements of Section 29-1-603, C.R.S.; and

WHEREAS, Section 29-1-604, C.R.S., states that any local government where neither revenues nor expenditures exceed seven hundred and fifty thousand dollars may, with the approval of the State Auditor, be exempt from the provisions of Section 29-1-603, C.R.S.; and

WHEREAS, neither revenues nor expenditures for the Districts exceeded \$100,000 for fiscal year 2024; and

WHEREAS, an application for exemption from audit for each of the Districts has been prepared by a person skilled in governmental accounting; and

WHEREAS, said applications for exemption from audit have been completed in accordance with regulations issued by the State Auditor.

NOW THEREFORE, be it resolved by the Board of Directors of the Front Range Airpark Metropolitan District Nos. 1-5, 2024, the applications have been personally reviewed and are hereby approved by a majority of the Board of Directors of the Districts; that those members of the Board have signified their approval by signing below; and that this resolution shall be attached to, and shall become a part of the applications for exemption from audit of the Districts for fiscal year ended December 31, 2024.

ADOPTED this 27th day of March, 2025.

FRONT RANGE AIRPARK
METROPOLITAN DISTRICT NOS. 1-5

By: Francis Nemecek
President

ATTEST:
Leah Ramsey
Secretary

<u>Board Member Name</u>	<u>Term Expires</u>	<u>Signature</u>
Francis A. Nemecek	2027	<i>Francis Nemecek</i>
Leah Ramsey	2027	<i>Leah Ramsey</i>
David Windfeldt	2027	<i>David Windfeldt</i>

SIGNATURE CERTIFICATE



REFERENCE NUMBER

70937233-253A-426D-8F0B-815FF4B0F136

TRANSACTION DETAILS

Reference Number
70937233-253A-426D-8F0B-815FF4B0F136

Transaction Type
Signature Request

Sent At
07/07/2025 07:24 PM EDT

Executed At
07/09/2025 05:57 PM EDT

Identity Method
email

Distribution Method
email

Signed Checksum
9f6eebf214062edb2d6951771eccfe8f917910604f12052af6733eb2d53bdbe3

Signer Sequencing
Disabled

Document Passcode
Disabled

DOCUMENT DETAILS

Document Name
Front Range Airpark MD Nos. 1-5 - Organizational Documents for Signature (Email 2 of 2)

Filename
2025-03-27_Org_Meeting_Packet_-_FRAMD1-5_-_Execution_Copy_Part1.pdf

Pages
96 pages

Content Type
application/pdf

File Size
1.05 MB

Original Checksum
7b4f5b0039c1cd520e5b350aa3365de330e962270ed678f3e888e0f53bb85f5d

SIGNERS

SIGNER	E-SIGNATURE	EVENTS
Name Francis Nemecek	Status signed	Viewed At 07/09/2025 05:52 PM EDT
Email al@jmc-assets.com	Multi-factor Digital Fingerprint Checksum 4f53cda18c2baa0c0354bb5f9a3ecbe5ed12ab4d8e11ba873c2f11161202b945	Identity Authenticated At 07/09/2025 05:57 PM EDT
Components 26	IP Address 54.144.112.110	Signed At 07/09/2025 05:57 PM EDT
	Device Microsoft Edge via Windows	
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	Typed Signature 	
	Signature Reference ID 3DDB53A3	
	Typed Signature 	
	Signature Reference ID 1DC37161	
	Typed Signature 	
	Signature Reference ID EC10B57A	
	Typed Signature 	
	Signature Reference ID 348AE73C	
	Typed Signature 	
	Signature Reference ID 15AED20A	
	Typed Signature 	

Signature Reference ID
17AB3EDB

Typed Signature

Francis Nemecek

Signature Reference ID
E3EE8462

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Francis Nemecek

Signature Reference ID
F001E666

Typed Signature

Francis Nemecek

Signature Reference ID
412D6CCB

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Francis Nemecek

Signature Reference ID
0612BA35

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Francis Nemecek

Signature Reference ID
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Francis Nemecek

Signature Reference ID
0E984D68

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Francis Nemecek

Signature Reference ID
11F8D1A5

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Francis Nemecek

Signature Reference ID
81E22369

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Francis Nemecek

Signature Reference ID
2179A8C7

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Francis Nemecek

Signature Reference ID
3F1D4D02

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Signature Reference ID
DABC2C9C

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Francis Nemecek

Signature Reference ID
8A60C52F

Typed Signature

Francis Nemecek

Signature Reference ID
48BF2C1F

Typed Signature

Francis Nemecek

Signature Reference ID
8E005407

SIGNER

Typed Signature

EVENTS

Francis Nemecek

Signature Reference ID
EC3673A9

Typed Signature

Francis Nemecek

Signature Reference ID
54ED2CAD

Typed Signature

Francis Nemecek

Signature Reference ID
9CB2DA25

Typed Signature

Francis Nemecek

Signature Reference ID
45A9A3FF

Name
Leah Ramsey

Email
leah@chelseap.com

Components
26

Status
signed

Multi-factor Digital Fingerprint Checksum
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IP Address
54.144.112.110

Device
Chrome via Windows

Typed Signature

Leah Ramsey

Signature Reference ID
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Leah Ramsey

Signature Reference ID
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Leah Ramsey

Signature Reference ID
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Leah Ramsey

Signature Reference ID
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Leah Ramsey

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Leah Ramsey

Signature Reference ID
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Typed Signature

Leah Ramsey

Signature Reference ID
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Viewed At
07/09/2025 05:34 PM EDT

Identity Authenticated At
07/09/2025 05:48 PM EDT

Signed At
07/09/2025 05:48 PM EDT

Leah Ramsey

Signature Reference ID

67780DA3

Typed Signature

Leah Ramsey

Signature Reference ID

22910104

Typed Signature

Leah Ramsey

Signature Reference ID

83460DF1

Typed Signature

Leah Ramsey

Signature Reference ID

49772241

Typed Signature

Leah Ramsey

Signature Reference ID

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Signature Reference ID

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Leah Ramsey

Signature Reference ID

F4CEB2E9

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Leah Ramsey

Signature Reference ID

40B6295B

Typed Signature

Leah Ramsey

Signature Reference ID

FABFF5F1

Typed Signature

Leah Ramsey



Signature Reference ID





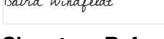

DAB26ECE

Typed Signature

Leah Ramsey

Signature Reference ID

SIGNER	SIGNATURE	EVENTS
	Signature Reference ID E02C1F4C Typed Signature  Signature Reference ID 2C0F1423 Typed Signature  Signature Reference ID 643B2A00	

Name David Windfeldt Email david@theprivateco.com Components 7	Status signed Multi-factor Digital Fingerprint Checksum 4f53cda18c2baa0c0354bb5f9a3ecbe5ed12ab4d8e11ba873c2f11161202b945 IP Address 52.45.54.47 Device Microsoft Edge via Windows Typed Signature  Signature Reference ID E02C1F4C Typed Signature  Signature Reference ID 5B8EC734 Typed Signature  Signature Reference ID 7C18A272 Typed Signature  Signature Reference ID 7A575639 Typed Signature  Signature Reference ID 07969303 Typed Signature  Signature Reference ID 7E2DAE09 Typed Signature  Signature Reference ID 3F5A2946	Viewed At 07/07/2025 07:31 PM EDT Identity Authenticated At 07/07/2025 07:34 PM EDT Signed At 07/07/2025 07:34 PM EDT
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AUDITS

TIMESTAMP	AUDIT
07/07/2025 07:24 PM EDT	Courtney Linney (clinney@spencerfane.com) created document '2025-03-27_Org_Meeting_Packet_-_FRAMD1-5_-_Execution_Copy_Part1.pdf' on Chrome via Windows from 174.16.158.29.
07/07/2025 07:24 PM EDT	David Windfeldt (david@theprivateco.com) was emailed a link to sign.
07/07/2025 07:24 PM EDT	Francis Nemecek (al@jmc-assets.com) was emailed a link to sign.
07/07/2025 07:24 PM EDT	Leah Ramsey (leah@chelseap.com) was emailed a link to sign.
07/07/2025 07:31 PM EDT	David Windfeldt (david@theprivateco.com) viewed the document on Microsoft Edge via Windows from 54.144.112.110.
07/07/2025 07:34 PM EDT	David Windfeldt (david@theprivateco.com) authenticated via email on Microsoft Edge via Windows from 52.45.54.47.
07/07/2025 07:34 PM EDT	David Windfeldt (david@theprivateco.com) signed the document on Microsoft Edge via Windows from 52.45.54.47.
07/09/2025 05:34 PM EDT	Leah Ramsey (leah@chelseap.com) viewed the document on Chrome via Windows from 54.144.112.110.
07/09/2025 05:48 PM EDT	Leah Ramsey (leah@chelseap.com) authenticated via email on Chrome via Windows from 54.144.112.110.
07/09/2025 05:48 PM EDT	Leah Ramsey (leah@chelseap.com) signed the document on Chrome via Windows from 54.144.112.110.

TIMESTAMP	AUDIT
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REFERENCE NUMBER

5930C383-B169-4081-A075-87FA53067CF2

TRANSACTION DETAILS

Reference Number

5930C383-B169-4081-A075-87FA53067CF2

Transaction Type

Signature Request

Sent At

09/09/2025 01:10 PM EDT

Executed At

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Identity Method

email

Distribution Method

email

Signed Checksum

8c762b6399370430bfb43a4fbdfb401a239769486ec83e2a592e839735d8d948

Signer Sequencing

Disabled

Document Passcode

Disabled

DOCUMENT DETAILS

Document Name

FRAMD Audit Exemptions

Filename

FRAMD_Audit_Exemptions.pdf

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File Size

421 KB

Original Checksum

b45da66dc74767b1274a2b42668ebaa1672838ab464e1efc1d53130a18af0fa8

SIGNERS

SIGNER	E-SIGNATURE	EVENTS
Name Courtney Linney	Status signed	Viewed At 09/09/2025 01:10 PM EDT
Email clinney@spencerfane.com	Multi-factor Digital Fingerprint Checksum b5e88ffd7cbca6e45b1144c0ebc082b6bb89cf093fd7e812b4c3deb5d6102bb3	Identity Authenticated At 09/09/2025 01:10 PM EDT
Components 5	IP Address 38.142.162.227	Signed At 09/09/2025 01:10 PM EDT
	Device Chrome via Windows	
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