

# APPLICATION FOR EXEMPTION FROM AUDIT

## SHORT FORM

NAME OF GOVERNMENT  
ADDRESS

FRONT RANGE AIRPARK METROPOLITAN DISTRICT NO. 2
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>				
Courtney Linney	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) <b>TOTAL REVENUES</b>	\$ -	

## 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) <b>TOTAL EXPENDITURES/EXPENSES</b>	\$ -	

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, <b>MUST</b> 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, <b>MUST</b> 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>			
<b>General obligation bonds</b>	\$ -	\$ -	\$ -
<b>Revenue bonds</b>	\$ -	\$ -	\$ -
<b>Notes/Loans</b>	\$ -	\$ -	\$ -
<b>Lease &amp; SBITA** Liabilities [GASB 87 &amp; 96]</b>	\$ -	\$ -	\$ -
<b>Developer Advances</b>	\$ -	\$ -	\$ -
<b>Other (specify):</b>	\$ -	\$ -	\$ -
<b>TOTAL</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 as of its fiscal year-end? How much? <span style="float: right; border: 1px solid black; padding: 2px;">\$ 634,835,344.00</span> Date the debt was authorized: <span style="float: right; border: 1px solid black; padding: 2px;">11/5/2024</span>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>NEW</b> 4-6 Is the authorized but unissued debt further limited by the entity's most recent Service Plan? If yes: How much? <span style="float: right; border: 1px solid black; padding: 2px;">\$ -</span> Date of the most recent Service Plan: <span style="float: right; border: 1px solid black; padding: 2px;"></span>	<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? <span style="float: right; border: 1px solid black; padding: 2px;">\$ -</span>	<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? <span style="float: right; border: 1px solid black; padding: 2px;">\$ -</span>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4-9 Does the entity have any lease agreements? If yes: What is being leased? <span style="float: right; border: 1px solid black; padding: 2px;"></span> What is the original date of the lease? <span style="float: right; border: 1px solid black; padding: 2px;"></span> Number of years of lease? <span style="float: right; border: 1px solid black; padding: 2px;"></span> Is the lease subject to annual appropriation? <span style="float: right; border: 1px solid black; padding: 2px;"></span> What are the annual lease payments? <span style="float: right; border: 1px solid black; padding: 2px;">\$ -</span>	<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	\$ -	
<b>TOTAL CASH DEPOSITS</b>		\$ -
5-3 Investments (if investment is a mutual fund, please list underlying investments):		
	\$ -	
	\$ -	
	\$ -	
	\$ -	
<b>TOTAL INVESTMENTS</b>		\$ -
<b>TOTAL CASH AND INVESTMENTS</b>		\$ -

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>	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

\*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.):	\$ -
<b>TOTAL</b>	<b>\$ -</b>

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		<input style="width: 90%; border: none;" type="text" value="-"/>
General/other mills		<input style="width: 90%; border: none;" type="text" value="-"/>
<b>Total mills</b>		<input style="width: 90%; border: none;" type="text" value="-"/>

- |   |                          |                          |                                     |
|---|--------------------------|--------------------------|-------------------------------------|
|   | 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 <b>NO</b> , 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
<b>Name</b> Francis Nemecek	<b>Status</b> signed	<b>Viewed At</b> 07/09/2025 05:52 PM EDT
<b>Email</b> al@jmc-assets.com	<b>Multi-factor Digital Fingerprint Checksum</b> 4f53cda18c2baa0c0354bb5f9a3ecbe5ed12ab4d8e11ba873c2f11161202b945	<b>Identity Authenticated At</b> 07/09/2025 05:57 PM EDT
<b>Components</b> 26	<b>IP Address</b> 54.144.112.110	<b>Signed At</b> 07/09/2025 05:57 PM EDT
	<b>Device</b> Microsoft Edge via Windows	
	<b>Typed Signature</b> 	
	<b>Signature Reference ID</b> 15F5C388	
	<b>Typed Signature</b> 	
	<b>Signature Reference ID</b> 3DDB53A3	
	<b>Typed Signature</b> 	
	<b>Signature Reference ID</b> 1DC37161	
	<b>Typed Signature</b> 	
	<b>Signature Reference ID</b> EC10B57A	
	<b>Typed Signature</b> 	
	<b>Signature Reference ID</b> 348AE73C	
	<b>Typed Signature</b> 	
	<b>Signature Reference ID</b> 15AED20A	
	<b>Typed Signature</b> 	

**Signature Reference ID**  
17AB3EDB

**Typed Signature**

*Francis Nemecek*

**Signature Reference ID**  
E3EE8462

**Typed Signature**

*Francis Nemecek*

**Signature Reference ID**  
F001E666

**Typed Signature**

*Francis Nemecek*

**Signature Reference ID**  
412D6CCB

**Typed Signature**

*Francis Nemecek*

**Signature Reference ID**  
0612BA35

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*Francis Nemecek*

**Signature Reference ID**  
0E4BA44E

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*Francis Nemecek*

**Signature Reference ID**  
0E984D68

**Typed Signature**

*Francis Nemecek*

**Signature Reference ID**  
11F8D1A5

**Typed Signature**

*Francis Nemecek*

**Signature Reference ID**  
81E22369

**Typed Signature**

*Francis Nemecek*

**Signature Reference ID**  
2179A8C7

**Typed Signature**

*Francis Nemecek*

**Signature Reference ID**  
3F1D4D02

**Typed Signature**

*Francis Nemecek*

**Signature Reference ID**  
DABC2C9C

**Typed Signature**

*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**  
4f53cda18c2baa0c0354bb5f9a3ecbe5ed12ab4d8e11ba873c2f11161202b945

**IP Address**  
54.144.112.110

**Device**  
Chrome via Windows

**Typed Signature**

Leah Ramsey

**Signature Reference ID**  
D1754184

**Typed Signature**

Leah Ramsey

**Signature Reference ID**  
780298C6

**Typed Signature**

Leah Ramsey

**Signature Reference ID**  
A5E07FE4

**Typed Signature**

Leah Ramsey

**Signature Reference ID**  
9FBDE570

**Typed Signature**

Leah Ramsey

**Signature Reference ID**  
57ABD17F

**Typed Signature**

Leah Ramsey

**Signature Reference ID**  
C77050E6

**Typed Signature**

Leah Ramsey

**Signature Reference ID**  
0D9CFB1F

**Typed Signature**

Leah Ramsey

**Signature Reference ID**  
57FBF34D

**Typed Signature**

Leah Ramsey

**Signature Reference ID**  
58A38A4A

**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**

26F6EB9D

**Typed Signature**

*Leah Ramsey*

**Signature Reference ID**

2970251A

**Typed Signature**

*Leah Ramsey*

**Signature Reference ID**

D8251350

**Typed Signature**

*Leah Ramsey*

**Signature Reference ID**

4ABD8E7C

**Typed Signature**

*Leah Ramsey*

**Signature Reference ID**

8E3B169F

**Typed Signature**

*Leah Ramsey*

**Signature Reference ID**

703EC67D

**Typed Signature**

*Leah Ramsey*

**Signature Reference ID**

F4CEB2E9

**Typed Signature**

*Leah Ramsey*

**Signature Reference ID**

40B6295B

**Typed Signature**

*Leah Ramsey*

**Signature Reference ID**

FABFF5F1

**Typed Signature**

*Leah Ramsey*



**Signature Reference ID**





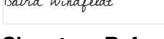

DAB26ECE

**Typed Signature**

*Leah Ramsey*

**Signature Reference ID**

SIGNER	SIGNATURE	EVENTS
	<b>Signature Reference ID</b> E02C1F4C <b>Typed Signature</b>  <b>Signature Reference ID</b> 2C0F1423 <b>Typed Signature</b>  <b>Signature Reference ID</b> 643B2A00	

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

<b>TIMESTAMP</b>	<b>AUDIT</b>
07/09/2025 05:52 PM EDT	Francis Nemecek (al@jmc-assets.com) viewed the document on Microsoft Edge via Windows from 52.45.54.47.
07/09/2025 05:57 PM EDT	Francis Nemecek (al@jmc-assets.com) authenticated via email on Microsoft Edge via Windows from 54.144.112.110.
07/09/2025 05:57 PM EDT	Francis Nemecek (al@jmc-assets.com) signed the document on Microsoft Edge via Windows from 54.144.112.110.

# SIGNATURE CERTIFICATE



## 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**

09/09/2025 01:10 PM EDT

**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

**Pages**

42 pages

**Content Type**

application/pdf

**File Size**

421 KB

**Original Checksum**

b45da66dc74767b1274a2b42668ebaa1672838ab464e1efc1d53130a18af0fa8

## SIGNERS

SIGNER	E-SIGNATURE	EVENTS
<b>Name</b> Courtney Linney	<b>Status</b> signed	<b>Viewed At</b> 09/09/2025 01:10 PM EDT
<b>Email</b> clinney@spencerfane.com	<b>Multi-factor Digital Fingerprint Checksum</b> b5e88ffd7cbca6e45b1144c0ebc082b6bb89cf093fd7e812b4c3deb5d6102bb3	<b>Identity Authenticated At</b> 09/09/2025 01:10 PM EDT
<b>Components</b> 5	<b>IP Address</b> 38.142.162.227	<b>Signed At</b> 09/09/2025 01:10 PM EDT
	<b>Device</b> Chrome via Windows	
	<b>Typed Signature</b> 	
	<b>Signature Reference ID</b> 9FC5D2A5	

## AUDITS

TIMESTAMP	AUDIT
09/09/2025 01:10 PM EDT	Courtney Linney (clinney@spencerfane.com) created document 'FRAMD_Audit_Exemptions.pdf' on Chrome via Windows from 38.142.162.227.
09/09/2025 01:10 PM EDT	Courtney Linney (clinney@spencerfane.com) was emailed a link to sign.
09/09/2025 01:10 PM EDT	Courtney Linney (clinney@spencerfane.com) viewed the document on Chrome via Windows from 38.142.162.227.
09/09/2025 01:10 PM EDT	Courtney Linney (clinney@spencerfane.com) authenticated via session on Chrome via Windows from 38.142.162.227.
09/09/2025 01:10 PM EDT	Courtney Linney (clinney@spencerfane.com) signed the document on Chrome via Windows from 38.142.162.227.