P

APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

NAME OF GOVERNMENT	Leawood Metropolitan Recreation and Park District	For the Year Ended 12/31/2024 or fiscal year ended:
ADDRESS	P.O. Box 620802	
	Littleton, CO 80162	
CONTACT PERSON	Amanda Halbert, Treasurer	
PHONE	303-489-5020	
EMAIL	lmrpdtreasurer@hotmail.com	

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:	Andrea L Geerdes
TITLE	CPA
FIRM NAME (if applicable)	AnderKobes CPA Inc
ADDRESS	1 Oakwood Park Plaza #205, Castle Rock, CO 80104
PHONE	303-688-2751
RELATIONSHIP TO ENTITY	Indpendent CPA

PREPARER (SIGNATURE REQUIRED)	DATE PREPARED (No exemption shall be granted prior to the close of said fiscal year)
Andrea L Geerdes, CPA	3-7-2025

	YES	NO	
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.]	☐	☑	If Yes, date filed:

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Please indicate the name of the fund (i.e., General Fund, Debt Service Fund, etc.)

NOTE: Attach additional sheets as necessary

Line #	Description	Governmental Funds (Modified Accrual Basis) Fund*	Fund*	Fund*	Description	Proprietary/Fiduciary Fund (Cash or Budgetary Basis) Fund*	Fund*
	Assets				**Assets**		
1-1	Cash & Cash Equivalents	$ 24,993	$ -	$ -	Cash & Cash Equivalents	$ -	$ -
1-2	Investments	$ 321,157	$ -	$ -	Investments	$ -	$ -
1-3	Receivables	$ 190,458	$ -	$ -	Receivables	$ -	$ -
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					$ -	$ -
1-6	Lease Receivable (as Lessor)	$ -	$ -	$ -	Total Current Assets	$ -	$ -
1-7	Other [specify...]	$ -	$ -	$ -	Capital & Right to Use Assets, net (from Part 6-4)	$ -	$ -
1-8		$ -	$ -	$ -	Other Long Term Assets [specify...]	$ -	$ -
1-9		$ -	$ -	$ -		$ -	$ -
1-10		$ -	$ -	$ -		$ -	$ -
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS	$ 536,608	$ -	$ -	(add lines 1-1 through 1-10) TOTAL ASSETS	$ -	$ -
	Deferred Outflows of Resources:				**Deferred Outflows of Resources**		
1-12	[specify...]	$ -	$ -	$ -	[specify...]	$ -	$ -
1-13	[specify...]	$ -	$ -	$ -	[specify...]	$ -	$ -
1-14	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS	$ -	$ -	$ -	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS	$ -	$ -
1-15	TOTAL ASSETS AND DEFERRED OUTFLOWS	$ 536,608	$ -	$ -	TOTAL ASSETS AND DEFERRED OUTFLOWS	$ -	$ -
	Liabilities				**Liabilities**		
1-16	Accounts Payable	$ -	$ -	$ -	Accounts Payable	$ -	$ -
1-17	Accrued Payroll and Related Liabilities	$ -	$ -	$ -	Accrued Payroll and Related Liabilities	$ -	$ -
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) TOTAL CURRENT LIABILITIES	$ -	$ -	$ -	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	$ -	$ -
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 1-22 through 1-26) TOTAL LIABILITIES	$ -	$ -	$ -	(add lines 1-22 through 1-26) TOTAL LIABILITIES	$ -	$ -
	Deferred Inflows of Resources:				**Deferred Inflows of Resources**		
1-28	Deferred Property Taxes	$ 190,458	$ -	$ -	Pension/OPEB Related	$ -	$ -
1-29	Lease related (as lessor)	$ -	$ -	$ -	Other [specify...]	$ -	$ -
1-30	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	$ 190,458	$ -	$ -	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	$ -	$ -
	Fund Balance				**Net Position**		
1-31	Nonspendable Prepaid	$ -	$ -	$ -	Net Investment in Capital and Right-to Use Assets	$ -	$ -
1-32	Nonspendable Inventory	$ -	$ -	$ -			
1-33	Restricted [TABOR]	$ 6,392	$ -	$ -	Emergency Reserves	$ -	$ -
1-34	Committed [specify...]	$ 76,079	$ -	$ -	Other Designations/Reserves	$ -	$ -
1-35	Assigned [specify...]	$ -	$ -	$ -	Restricted	$ -	$ -
1-36	Unassigned:	$ 263,679	$ -	$ -	Undesignated/Unreserved/Unrestricted	$ -	$ -
1-37	Add lines 1-31 through 1-36. This total should be the same as line 3-36. TOTAL FUND BALANCE	$ 346,150	$ -	$ -	Add lines 1-31 through 1-36. This total should be the same as line 3-36. TOTAL NET POSITION	$ -	$ -
1-38	Add lines 1-27, 1-30 and 1-37. This total should be the same as line 1-15. TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND BALANCE	$ 536,608	$ -	$ -	Add lines 1-27, 1-30 and 1-37. This total should be the same as line 1-15. TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET POSITION	$ -	$ -

Please use this space to provide explanation of any item on this page

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

Line #	Description	Governmental Funds: Fund*	Governmental Funds: Fund*	Governmental Funds: Fund*	Description	Proprietary/Fiduciary Funds: Fund*	Proprietary/Fiduciary Funds: Fund*
	Tax Revenue				**Tax Revenue**		
2-1	**Property** [include mills levied in question 10-7]	$ 197,071	$ -	$ -	**Property** [include mills levied in question 10-7]	$ -	$ -
2-2	**Specific Ownership**	$ 12,024	$ -	$ -	**Specific Ownership**	$ -	$ -
2-3	**Sales and Use Tax**	$ -	$ -	$ -	**Sales and Use Tax**	$ -	$ -
2-4	**Other Tax Revenue** [specify...]	$ -	$ -	$ -	**Other Tax Revenue** [specify...]	$ -	$ -
2-5	Interest on taxes	$ 121	$ -	$ -		$ -	$ -
2-6		$ -	$ -	$ -		$ -	$ -
2-7		$ -	$ -	$ -		$ -	$ -
2-8	Add lines 2-1 through 2-7 **TOTAL TAX REVENUE**	$ 209,216	$ -	$ -	Add lines 2-1 through 2-7 **TOTAL TAX REVENUE**	$ -	$ -
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)	$ 19,621	$ -	$ -	**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**	$ -	$ -
2-16	**Charges for Sales and Services**	$ -	$ -	$ -	**Charges for Sales and Services**	$ -	$ -
2-17	**Rental Income**	$ -	$ -	$ -	**Rental Income**	$ -	$ -
2-18	**Fines and Forfeits**	$ -	$ -	$ -	**Fines and Forfeits**	$ -	$ -
2-19	**Interest/Investment Income**	$ 17,498	$ -	$ -	**Interest/Investment Income**	$ -	$ -
2-20	**Tap Fees**	$ -	$ -	$ -	**Tap Fees**	$ -	$ -
2-21	**Proceeds from Sale of Capital Assets**	$ -	$ -	$ -	**Proceeds from Sale of Capital Assets**	$ -	$ -
2-22	**All Other** [Miscellaneous]	$ -	$ -	$ -	**All Other** [specify...]	$ -	$ -
2-23		$ -	$ -	$ -		$ -	$ -
2-24	Add lines 2-8 through 2-23 **TOTAL REVENUES**	$ 246,335	$ -	$ -	Add lines 2-8 through 2-23 **TOTAL REVENUES**	$ -	$ -
	Other Financing Sources				**Other Financing Sources**		
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	Add lines 2-25 through 2-28 **TOTAL OTHER FINANCING SOURCES**	$ -	$ -	$ -	Add lines 2-25 through 2-28 **TOTAL OTHER FINANCING SOURCES**	$ -	$ -
2-30	Add lines 2-24 and 2-29 **TOTAL REVENUES AND OTHER FINANCING SOURCES**	$ 246,335	$ -	$ -	Add lines 2-24 and 2-29 **TOTAL REVENUES AND OTHER FINANCING SOURCES**	$ -	$ -
2-31						GRAND TOTALS (ALL FUNDS)	$ [illegible]

IF GRAND TOTAL REVENUES AND OTHER FINANCING SOURCES FOR ALL FUNDS (LINE 2-31) 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.

Please use this space to provide explanation of any item on this page

PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES

Line #	Description	Governmental Funds: Fund*	Fund*	Fund*	Description	Proprietary/Fiduciary Funds: Fund*	Fund*
	Expenditures				**Expenses**		
3-1	General Government	$ -	$ -	$ -	General Operating & Administrative	$ -	$ -
3-2	Judicial	$ -	$ -	$ -	Salaries	$ -	$ -
3-3	Law Enforcement	$ -	$ -	$ -	Payroll Taxes	$ -	$ -
3-4	Fire	$ -	$ -	$ -	Contract Services	$ -	$ -
3-5	Highways & Streets	$ -	$ -	$ -	Employee Benefits	$ -	$ -
3-6	Solid Waste	$ -	$ -	$ -	Insurance	$ -	$ -
3-7	Contributions to Fire & Police Pension Assoc.	$ -	$ -	$ -	Accounting and Legal Fees	$ -	$ -
3-8	Health	$ -	$ -	$ -	Repair and Maintenance	$ -	$ -
3-9	Culture and Recreation	$ 184,964	$ -	$ -	Supplies	$ -	$ -
3-10	Transfers to other districts	$ -	$ -	$ -	Utilities	$ -	$ -
3-11	Other [specify...]	$ -	$ -	$ -	Contributions to Fire & Police Pension Assoc.	$ -	$ -
3-12		$ -	$ -	$ -	Other [specify...]	$ -	$ -
3-13		$ -	$ -	$ -		$ -	$ -
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		$ -	$ -	$ -		$ -	$ -
3-23		$ -	$ -	$ -		$ -	$ -
3-24	Add lines 3-1 through 3-23 TOTAL EXPENDITURES	$ 184,964	$ -	$ -	Add lines 3-1 through 3-23 TOTAL EXPENSES	$ -	$ -
3-25					GRAND TOTAL (ALL FUNDS)		$ [illegible]
3-26	Interfund Transfers (In)	$ -	$ -	$ -	Net Interfund Transfers (In) Out	$ -	$ -
3-27	Interfund Transfers Out	$ -	$ -	$ -	Other [specify...][enter negative for expense]	$ -	$ -
3-28	Other Expenditures (Revenues)	$ -	$ -	$ -	Depreciation/Amortization	$ -	$ -
3-29		$ -	$ -	$ -	Other Financing Sources (from line 2-28)	$ -	$ -
3-30		$ -	$ -	$ -	Capital Outlay (from line 3-14)	$ -	$ -
3-31		$ -	$ -	$ -	Debt Principal (from line 3-15, 3-18)	$ -	$ -
3-32	(Add lines 3-26 through 3-31) TOTAL TRANSFERS AND OTHER EXPENDITURES	$ -	$ -	$ -	(Add lines 3-27, 3-30, and 3-31, subtract lines 3-28 and 3-29) TOTAL GAAP RECONCILING ITEMS	$ -	$ -
3-33	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures Line 2-30, less line 3-24, less line 3-32	$ 61,371	$ -	$ -	Net Increase (Decrease) in Net Position Line 2-30, less line 3-24, plus line 3-32, less line 3-26	$ -	$ -
3-34	Fund Balance, January 1 from December 31 prior year report	$ 284,779	$ -	$ -	Net Position, January 1 from December 31 prior year report	$ -	$ -
3-35	Prior Period Adjustment (MUST explain)	$ -	$ -	$ -	Prior Period Adjustment (MUST explain)	$ -	$ -
3-36	Fund Balance, December 31 Sum of Lines 3-33, 3-34, and 3-35 This total should be the same as line 1-37.	$ 346,150	$ -	$ -	Net Position, December 31 Sum of Lines 3-33, 3-34, and 3-35 This total should be the same as line 1-37.	$ -	$ -

IF GRAND TOTAL EXPENDITURES FOR ALL FUNDS (Line 3-25) ARE 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.

Please use this space to provide explanation of any item on this page

PART 4 - DEBT OUTSTANDING, ISSUED, AND RETIRED

		Yes	No	Please use this space to provide any explanations or comments
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)*	☐	☑	
4-2	**Is the debt repayment schedule attached? If no, MUST explain:**	☐	☐	
4-3	**Is the entity current in its debt service payments? If no, MUST explain:**	☐	☐	

4-4 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

			Yes	No
4-5	**Does the entity have any authorized but unissued debt as of its fiscal year-end [Section 29-1-605(2) C.R.S.]?**			☑
If yes:	**How much?**	$ -		
	Date the debt was authorized:			
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:			
4-7	**Does the entity intend to issue debt within the next calendar year?**		☐	☑
If yes:	**How much?**	$ -		
4-8	**Does the entity have debt that has been refinanced that it is still responsible for?**		☐	☑
If yes:	**What is the amount outstanding?**	$ -		
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?	$ -		

PART 5 - CASH AND INVESTMENTS

Please use this space to provide any explanations or comments

5-1	**YEAR-END Total of ALL Checking and Savings accounts**	$ 24,993	
5-2	**Certificates of deposit**	$ -	
	TOTAL CASH DEPOSITS		$ 24,993
5-3			
	Colo Trust (4 Accts)	$ 321,157	
		$ -	
		$ -	
		$ -	
	TOTAL INVESTMENTS		$ 321,157
	TOTAL CASH AND INVESTMENTS		$ 346,150

5-4	**Are the entity's investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?**	☐	
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:**	☐	

PART 6 - CAPITAL AND RIGHT-TO-USE ASSETS

		Yes	No	Please use this space to provide any explanations or comments
6-1	Does the entity have capitalized assets? *(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:	☑	☐	

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	$ 40,344	$ -	$ -	$ 40,344
Buildings	$ -	$ -	$ -	$ -
Machinery and equipment	$ 1,448,480	$ -	$ -	$ 1,448,480
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)	$ (1,283,700)	$ (23,202)	$ -	$ (1,306,902)
TOTAL	$ 205,124	$ (23,202)	$ -	$ 181,922

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	$ -	$ -	$ -	$ -
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)	$ -	$ -	$ -	$ -
TOTAL	$ -	$ -	$ -	$ -

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?	☐	☑	
7-2	Does the entity have a volunteer firefighters' pension plan?	☐	☑	

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 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:

8-2 Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:

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	$ 238,488
	$ -
	$ -
	$ -
	$ -

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)]?

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 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

		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 number of mills levied for the year reported (do not report $ amounts):

Bond redemption mills	-
General/other mills	3.730
Total mills	3.730

		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.			☑

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

OSA USE ONLY

Entity Wide:			**General Fund**			**Governmental Funds**		
Unrestricted Cash & Investments	$	346,150	Unrestricted Fund Balan	$	339,758	Total Tax Revenue	$	209,216
Current Liabilities	$	-	Total Fund Balance	$	346,150	Revenue Paying Debt Service	$	-
Deferred Inflow	$	190,458	PY Fund Balance	$	284,779	Total Revenue	$	246,335
			Total Revenue	$	246,335	Total Debt Service Principal	$	-
			Total Expenditures	$	184,964	Total Debt Service Interest	$	-
						Total Assets	$	536,608
			Interfund In	$	-	Total Liabilities	$	-
Governmental			Interfund Out	$	-			
Total Cash & Investments	$	346,150	**Proprietary**			**Enterprise Funds**		
Transfers In	$	-	Current Assets	$	-	Net Position	$	-
Transfers Out	$	-	Deferred Outflow	$	-	PY Net Position	$	-
Property Tax	$	197,071	Current Liabilities	$	-	**Government-Wide**		
Debt Service Principal	$	-	Deferred Inflow	$	-	Total Outstanding Debt	$	-
Total Expenditures	$	184,964	Cash & Investments	$	-	Authorized but Unissued	$	-
Total Developer Advances	$	-	Principal Expense	$	-	Year Authorized	1/0/1900	
Total Developer Repayments	$	-	Total Expenses	$	-			

PART 11 - GOVERNING BODY APPROVAL

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 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 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.

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 revenues and expenditures of more than $100,000 but not more than $750,000 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 or type the names of ALL members of the governing body below
A MAJORITY of the members of the governing body must sign below

	Board Member's Name	
Board Member 1	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. My term expires:	Carole Gottlieb, President Signature Date
Board Member 2	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. My term expires: May 2025	Judy Anderson, Vice President Signature [illegible] Date Mar 11, 2026
Board Member 3	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. My term expires: May 2025	Amanda Halbert, Treasurer Signature [illegible] Date 3-11-26
Board Member 4	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. My term expires: May 20	Carrie Dupree, Secretary Signature Carrie J Dupree Date 3-11-26
Board Member 5	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. My term expires: May 2025	Kyle Sargent Signature KW Sargent Date 11 March 2026
Board Member 6	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. My term expires:	Signature [illegible] Date 3-11-26

AnderKobes
Certified Public Accountants

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To Board of Directors
Leawood Metropolitan Recreation and Park District
Littleton, Colorado 80123

Management is responsible for the accompanying financial statements of (the) Leawood Metropolitan Recreation and Park District (a governmental agency), which comprise the balance sheet as of December 31, 2024, and the related statements of revenues and expenditures for the year then ended, included in the accompanying prescribed form in accordance with accounting principles generally accepted in the United States of America. I have performed a compilation engagement in accordance with the Statement of Standards of Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. I did not audit or review the financial statements included in the accompanying prescribed form nor was I required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, I do not express an opinion, a conclusion, nor provide any form of assurance on the financial statements included in the accompanying prescribed form.

The financial statements included in the accompanying prescribed form are presented in accordance with the requirements of the Colorado State Auditor, and are not intended to be a presentation in accordance with accounting principles generally accepted in the United States of America.

This report is intended solely for the information and use of (the) Leawood Metropolitan Recreation and Park District and (the) Colorado State Auditor, and is not intended to be and should not be used by anyone other than these specified parties.

AnderKobes CPA Inc

AnderKobes CPA Inc
Castle Rock, Colorado 80104
March 7, 2025