

# Application for Exemption From Audit Short Form

## Instructions

**If either revenues or expenditures exceed \$200,000, use the Long Form**

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

### Exemptions from audit are **NOT** automatic

To qualify for exemption from audit, a local government must complete an Application for Exemption from Audit **each year** and submit it to the Office of the State Auditor (OSA). Approval for an exemption from audit is granted **only** upon the review by the OSA.

Any preparer of an Application for Exemption from Audit — Short Form must be a person skilled in governmental accounting.

**Read ALL instructions before completing and submitting this form**

All applications must be filed with the OSA **within 3 months** after the accounting year-end.

For example, applications must be received by the OSA on or before March 31 for governments with a December 31 year-end. Applications for exemption from audit are not eligible for an extension of time.

Governmental activity should be reported on the modified accrual basis. Proprietary activity should be reported on a cash or budgetary basis.

### Important!

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

Governmental Activity should be reported on the **Modified Accrual Basis**.

Proprietary Activity should be reported on a **Budgetary Basis**.

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

**Postmark dates will not be accepted as proof of submission on or before the statutory deadline**

Prior year forms are obsolete and will not be accepted.

Applications must be fully and accurately completed. Applications submitted on forms other than those prescribed by the OSA will not be accepted.

For your reference, the Colorado Revised Statutes are available through the [LexisNexis Colorado portal](#).

## Checklist

- Has the preparer signed the application prior to board approval?
- Has the entity corrected all prior year deficiencies as communicated by the OSA?
- Has the application been **personally** reviewed and approved by the governing body?
- Are all sections on the form complete, including responses to all of the questions?
- Did you include any relevant explanations for unusual items in the appropriate spaces at the end of each section?

Will this application be submitted electronically?  Yes  No

- If yes, have you read and understood the Electronic Signature Policy? See policy in Part 10.

-- or --

- If yes, have you included a resolution?
  - Does the resolution state that the governing body **personally** reviewed and approved the resolution in an open public meeting?
  - Has the resolution been signed by a **majority** of the governing body? See sample resolution at the end of this form.

Will this application be submitted via a mail service (e.g., U.S. Post Office, FedEx, UPS, courier)?  Yes  No  
 If yes, does the application include **original ink signatures** from the **majority** of the governing body?

**Filing Methods**

**Web Portal (recommended)**  
[apps.leg.co.gov/osa/lg](https://apps.leg.co.gov/osa/lg)  
 For faster processing, the web portal should be used for submissions.

**Mail**  
**Office of the State Auditor**  
 Local Government Audit Division  
 1375 Sherman St., 5th Floor  
 Denver, CO 80261-3000

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

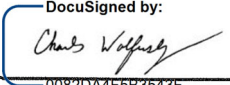
**Contact Information**

For the year ended December 31, 2025 or the fiscal year ended \_\_\_\_\_.

Name of government	Ash Meadows Metropolitan District
Street address	12210 Brighton Rd #8
City, State, Zip	Henderson, CO 80640
Contact person	Charles Wolfersberger
Phone	(720) 541-7725
Email	charles@wolfersbergerLLC.com

**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. The preparer must sign prior to board approval.

Name	Charles Wolfersberger	
Title	District Accountant	
Firm name (if applicable)	Wolfersberger, LLC	
Address	12210 Brighton Rd #8 Henderson, CO 80640	
Phone	(720) 541-7725	
Preparer signature	Date prepared	
 0082DA4F5B3543F...	February 16, 2026	

Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types.

- Governmental (modified accrual basis)
- Proprietary (cash or budgetary basis)

**Part 1: Revenues**

**Part 1A: Revenues Table**

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	Total (round to nearest dollar)
1-1	Taxes: Property (report mills levied in line 9-12)	\$ 158,900
1-2	Specific ownership	\$ 7,962
1-3	Sales and use	
	Other (specify in line 1-4):	
1-4		
1-5	Licenses and permits	
1-6	Intergovernmental: Grants	
1-7	Conservation Trust Funds (Lottery)	
1-8	Highway Users Tax Funds (HUTF)	
	Other (specify in line 1-9):	
1-9		
1-10	Charges for services	
1-11	Fines and forfeits	\$ 525
1-12	Special assessments	
1-13	Investment income	\$ 5,596
1-14	Charges for utility services	
1-15	Debt proceeds (should agree to Part 3, Debt Schedule Table, column 'issued during year')	
1-16	Lease proceeds (should agree to Part 3, Debt Schedule Table, column 'issued during year')	
1-17	Developer Advances received (should agree to Part 3, Debt Schedule Table, column 'issued during year')	
1-18	Proceeds from sale of capital assets	
1-19	Fire and police pension	
1-20	Donations	
	Other (specify in lines 1-21 through 1-24)	
1-21		
1-22		
1-23		
1-24		
1-25	<b>TOTAL REVENUES</b> (add lines 1-1 through 1-24)	\$ 172,983

**IF TOTAL REVENUES OR TOTAL EXPENDITURES ARE GREATER THAN \$200,000 — STOP.**

You may not use this form. Please use the Application for Exemption from Audit - Long Form.

**Part 1B: Comments or Additional Information**

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Please use the space below to provide any additional information (optional):

**Part 2: Expenditures/Expenses**

**Part 2A: Expenditures/Expenses Table**

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	Total (round to nearest dollar)
2-1	Administrative	\$ 4,962
2-2	Salaries	
2-3	Payroll taxes	
2-4	Contract services	
2-5	Employee benefits	
2-6	Insurance	\$ 9,165
2-7	Accounting and legal fees	\$ 30,615
2-8	Repair and maintenance	
2-9	Supplies	
2-10	Utilities and telephone	
2-11	Fire/Police	
2-12	Streets and highways	
2-13	Public health	
2-14	Capital outlay	
2-15	Utility operations	
2-16	Culture and recreation	
2-17	Debt service principal (should agree to Part 3, Debt Schedule Table 'Retired during year')	
2-18	Debt service interest	
2-19	Repayment of Developer Advances Principal (should agree to Part 3, Debt Schedule Table, column 'Retired during year')	
2-20	Repayment of Developer Advances Interest	
2-21	Contribution to pension plan	
2-22	Contribution to Fire & Police Pension Association	
2-23	Other (specify in lines 2-24 through 2-27)	
2-24	Parks, open space and alleyway maintenance	\$ 81,036
2-25	Weekly trash hauling services	\$ 12,692
2-26	Covenant enforcement services	\$ 7,078
2-27		
2-28	<b>TOTAL EXPENDITURES/EXPENSES</b> (Add lines 2-1 through 2-27)	\$ 145,548

**IF TOTAL REVENUES OR TOTAL EXPENDITURES ARE GREATER THAN \$200,000 — STOP.**

You may not use this form. Please use the Application for Exemption from Audit - Long Form.

**Part 2B: Comments or Additional Information**

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Please use the space below to provide any additional information (optional):

**Part 3: Debt Outstanding, Issued, and Retired**

<b>3-1</b>	Does the entity have outstanding debt?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
<b>3-2</b>	If no, skip to line 3-13. If yes, please attach a copy of the entity's debt repayment schedule.		
<b>3-3</b>	Is the debt repayment schedule attached?	<input type="radio"/> N/A	<input type="radio"/> Yes <input type="radio"/> No
	If no, MUST explain below.		
<b>3-4</b>	Is the entity current in its debt service payments?	<input type="radio"/> Yes	<input type="radio"/> No
	If no, MUST explain below.		
<b>3-5</b>	If no, also indicate if the government is in default with its bond agreements.	<input type="radio"/> Yes	<input type="radio"/> No

**Debt Schedule Table**

Please complete the following debt schedule, if applicable.  
Please only include principal amounts. Enter all amounts as positive numbers.

Line	Debt Type	Outstanding at End of Prior Year*	Issued During Year	Retired During Year	Outstanding at Year-End
3-6	General Obligation Bonds				\$ 0
3-7	Revenue Bonds				\$ 0
3-8	Notes/Loans				\$ 0
3-9	Lease & SBITA** Liabilities (GASB 87 & 96)				\$ 0
3-10	Developer Advances				\$ 0
	Other (specify in line 3-11)				
3-11					\$ 0
3-12	<b>TOTAL</b> (Add lines 3-6 through 3-11)	\$ 0	\$ 0	\$ 0	\$ 0

\*Must agree to prior year-end balance

\*\*Subscription-Based Information Technology Arrangements

Comments (optional)

3-13	Does the entity have any authorized but unissued debt as of its fiscal year-end?	<input checked="" type="radio"/> Yes	<input type="radio"/> No
3-14	If yes, how much?	\$ 70,000,000	
3-15	Date the debt was authorized	May 06, 2014	
3-16	Is the authorized but unissued debt further limited by the entity's most recent Service Plan?	<input checked="" type="radio"/> Yes	<input type="radio"/> No
3-17	If yes, how much?	\$ 0	
3-18	Date of the most recent Service Plan	April 08, 2014	
3-19	Does the entity intend to issue debt within the next calendar year?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
3-20	If yes, how much?		
3-21	Does the entity have debt that has been refinanced that it is still responsible for?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
3-22	If yes, what is the amount outstanding?		
3-23	Does the entity have any lease agreements?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
3-24	If yes, what is being leased?		
3-25	What is the original date of the lease?		
3-26	Number of years of lease?		
3-27	Is the lease subject to annual appropriation?	<input type="radio"/> Yes	<input type="radio"/> No
3-28	What are the annual lease payments?		

Please use the space below to provide any additional information (optional):

**Part 4: Cash and Investments**

Please provide the entity's cash deposit and investment balances.

Line	Description	Amount
4-1	Year-end Total of all Checking and Savings Accounts	\$ 77,240
4-2	Certificates of deposit	\$ 0
4-3	<b>TOTAL CASH DEPOSITS</b> (Add lines 4-1 and 4-2)	\$ 77,240
<b>Investments</b> (specify in lines 4-4 through 4-8. If investment is a mutual fund, please list underlying investment.)		
4-4	CSAFE	\$ 88,481
4-5		
4-6		
4-7		
4-8		
4-9	<b>Total Investments</b> (Add lines 4-4 through 4-8)	\$ 88,481
4-10	<b>TOTAL CASH AND INVESTMENTS</b> (Add lines 4-3 and 4-9)	\$ 165,721

4-11	Are the entity's investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?	<input type="radio"/> N/A	<input checked="" type="radio"/> Yes	<input type="radio"/> No
4-12	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 checked="" type="radio"/> Yes	<input type="radio"/> No
4-13	If no, MUST explain below.			

Please use the space below to provide any additional information (optional).

**Part 5: Capital and Right-to-Use Assets**

<b>5-1</b>	Does the entity have capitalized assets? (If "no" is selected, skip the rest of Part 5.)	<input checked="" type="radio"/> Yes	<input type="radio"/> No
<b>5-2</b>	Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.?	<input checked="" type="radio"/> Yes	<input type="radio"/> No
<b>5-3</b>	If no, MUST explain below.		

**Capital and Right-to-Use Assets Table**

Line	Asset Type	Beginning of the Year Balance*	Additions**	Deletions	Year-End Balance
5-4	Land	\$ 23,000	\$ 0		\$ 23,000
5-5	Buildings	\$ 0			\$ 0
5-6	Machinery and Equipment	\$ 0			\$ 0
5-7	Furniture and Fixtures	\$ 0			\$ 0
5-8	Infrastructure	\$ 912,000	\$ 0		\$ 912,000
5-9	Construction In Progress (CIP)	\$ 0			\$ 0
5-10	Leased & SBITA Right-to-Use Assets	\$ 0			\$ 0
	Other (explain in line 5-11)				
5-11		\$ 0			\$ 0
5-12	Accumulated Depreciation/ Amortization (Enter a negative or credit balance)	-\$ 300,603	-\$ 33,401		-\$ 334,004
5-13	<b>TOTAL</b> (Add lines 5-4 through 5-12)	\$ 634,397	-\$ 33,401	\$ 0	\$ 600,996

\*Must agree to prior year-end balance

\*\*Generally capital asset additions should be reported as capital outlay on line 2-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy in the comments section below.

Please use the space below to provide any additional information (optional).

Infrastructure is comprised of (1) alleyways, (2) driveways, (3) retaining walls, (4) playground equipment, (5) sidewalks and (6) entrance monument sign.

**Part 6: Pension Information**

6-1	Does the entity have an "old hire" firefighters' pension plan?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
6-2	Does the entity have a volunteer firefighters' pension plan?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
6-3	If yes, who administers the plan?		
	Indicate the contributions from the following in lines 6-4 through 6-6.		
6-4	Tax (property, specific ownership, sales, etc.)		
6-5	State contribution amount		
6-6	Other (gifts, donations, etc.)		
6-7	<b>TOTAL</b> (Add lines 6-4 through 6-6)		\$ 0
6-8	What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?		

Please use the space below to provide any additional information (optional).

**Part 7: Budget Information**

7-1	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.?	<input type="radio"/> N/A	<input checked="" type="radio"/> Yes	<input type="radio"/> No
7-2	If no, MUST explain below.			
7-3	Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.?	<input type="radio"/> N/A	<input checked="" type="radio"/> Yes	<input type="radio"/> No
7-4	If no, MUST explain below.			
If yes, indicate the amount appropriated for each fund separately for the year reported in the table below.				

**Appropriation Amount by Fund Table**

Enter the fund name, then indicate the final amount appropriated for each fund for the year reported. Ensure each individual fund's final appropriated amount agrees to the adopted budget. Do not combine funds.

Line	Governmental/Proprietary Fund Name	Total
7-5	General Fund	\$ 168,900
7-6	Capital Projects Funs	\$ 0
7-7		
7-8		
7-9		

Please use the space below to provide any additional information (optional).

**Part 8: Taxpayer's Bill of Rights (TABOR)**

8-1	Is the entity in compliance with all the provisions of TABOR (State Constitution, Article X, Section 20(5))?	<input checked="" type="radio"/> Yes	<input type="radio"/> No
8-2	If no, MUST explain below.		

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.

Please use the space below to provide any additional information (optional).

**Part 9: General Information**

9-1	Is this application for a newly formed governmental entity?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
9-2	If yes, what was the date of formation		
9-3	Has the entity changed its name in the past or current year?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
9-4	If yes, please list the NEW name below.		
9-5	If yes, please list the PRIOR name below.		
9-6	Is the entity a metropolitan district?	<input checked="" type="radio"/> Yes	<input type="radio"/> No
9-7	Please indicate what services the entity provides below. Weekly trash pick-up services for all 56 townhomes unites within the District plus maintenance of parks, open spaces, alleyways and driveways within the District.		
9-8	Does the entity have an agreement with another government to provide services?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
9-9	If yes, list the name of the other governmental entity and the services provided below.		
9-10	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.)	<input type="radio"/> Yes	<input checked="" type="radio"/> No
9-11	If yes, what was the date filed		
9-12	Does the entity have a certified mill levy?	<input checked="" type="radio"/> Yes	<input type="radio"/> No
	If yes, please provide the following mills levied for the year reported in lines 9-13 through 9-14. (Do not report \$ amounts.)		
9-13	Bond redemption mills	0.000	
9-14	General/other mills	111.397	
9-15	<b>TOTAL MILLS</b> (Add lines 9-13 through 9-14)	111.397	
9-16	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.)?	<input type="radio"/> N/A	<input checked="" type="radio"/> Yes <input type="radio"/> No
9-17	If no, please explain below.		

Please use the space below to provide any additional information (optional).

**Part 10: Governing Body Approval**

<b>10-1</b>	If you plan to submit this form electronically, have you read the Electronic Signature Policy?	<input checked="" type="radio"/> Yes	<input type="radio"/> No
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**Office of the State Auditor — Local Government Division  
Exemption Form Electronic Signature Policy and Procedure**

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:

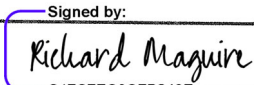


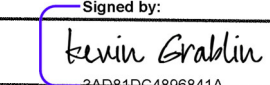

- The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.
- The application must be 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 must note their approval and submit the application using one of the following two methods:

- 1) Submit the application in hard copy via U.S. 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.

### Governing Body Signatures

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	Richard Maguire	
My term expires on	May 2027	
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	Date
	 <small>Signed by: C1707EC0CFB249E...</small>	2/17/2026
Board Member 2		
Board member's name	Kodi Patterson	
My term expires on	May 2027	
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	Date
	 <small>DocuSigned by: 31D54D6803FB460...</small>	2/17/2026
Board Member 3		
Board member's name	Lucas Nishimoto	
My term expires on	May 2027	
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	Date
	 <small>DocuSigned by: E516A8085CBD4AF</small>	2/17/2026
Board Member 4		
Board member's name	Kevin Grablin	
My term expires on	May 2027	
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	Date
	 <small>Signed by: 3AD81DC4806841A...</small>	3/4/2026
Board Member 5		
Board member's name	Steve Summers	
My term expires on	May 2027	
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	Date
	 <small>Signed by: C84A45AAC853416...</small>	3/4/2026
Board Member 6		
Board member's name		
My term expires on		
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	Date
Board Member 7		
Board member's name		
My term expires on		
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	Date

**ASH MEADOWS METROPOLITAN DISTRICT  
RESOLUTION REGARDING EXEMPTION FROM AUDIT**  
(Pursuant to Section 29-1-604 CRS)

A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR CALENDAR YEAR 2025 FOR THE ASH MEADOWS METROPOLITAN DISTRICT, STATE OF COLORADO

WHEREAS, the Board of the Ash Meadows Metropolitan District (“District”) 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 or expenditures exceed \$1 million dollars may, with the approval of the State Auditor, be exempt from the provision of Section 29-1-603, C.R.S.; and

WHEREAS, neither revenue nor expenditures for the District exceeded \$200,000 for Fiscal Year 2025; and

WHEREAS, an application for exemption from audit for the District has been prepared by Charles Wolfersberger, an accountant with knowledge of governmental accounting; and


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






NOW THEREFORE, be it resolved by the Board of the District that the application for exemption from audit the District for the Calendar Year ended 2025 has been personally reviewed and is hereby approved by a majority of the Board of the District; that those members of the Board have signified their approval by signing on the next page; and that this resolution shall be attached to, and shall become a part of, the application for exemption from audit of the District for the calendar year ended December 31, 2025.

Adopted this 16<sup>th</sup> day of February 2026.

ASH MEADOWS METROPOLITAN  
DISTRICT

By: Signed by:  
*Richard Maguire*  
C17C7EC8CFB243E...  
Richard Maguire, President

ATTEST:  
By: DocuSigned by:  
  
E516A8085CBD4AE  
Lucas Nishimoto, Secretary

Director' Name	Director's Office	Term Expires	Signature
Richard Maguire	President	May 2027	Signed by:  <small>C17C7EC8CFB243E...</small>
Kodi Patterson	Treasurer	May 2027	<small>C17C7EC8CFB243E...</small> DocuSigned by:  <small>31D54D6B93FB469...</small>
Lucas Nishimoto	Secretary	May 2027	DocuSigned by:  <small>E516A8085CBD4AE...</small>
Kevin Grablin		May 2027	<small>E516A8085CBD4AE...</small> Signed by:  <small>3AD81DC4896841A...</small>
Steve Summers		May 2027	Signed by:  <small>C94A45AAC853418...</small>

## Certificate Of Completion

Envelope Id: 70613BBC-EAB6-4361-A09D-574043DAE174

Status: Completed

Subject: Complete with Docusign: Audit exemption resolution + Application for Audit Exemption

Source Envelope:

Document Pages: 18

Signatures: 13

Envelope Originator:

Certificate Pages: 6

Initials: 0

Charles Wolfersberger

AutoNav: Enabled

12210 Brighton Rd #8

Envelopeld Stamping: Enabled

Henderson, CO 80640

Time Zone: (UTC-08:00) Pacific Time (US & Canada)

charles@wolfersbergerllc.com

IP Address: 2603:300b:c4:e8

## Record Tracking

Status: Original

Holder: Charles Wolfersberger

Location: DocuSign

2/17/2026 12:36:20 AM

charles@wolfersbergerllc.com

## Signer Events

### Signature

### Timestamp

Charles Wolfersberger

charles@wolfersbergerllc.com

District Manager

Wolfersberger, LLC

Security Level: Email, Account Authentication  
(None)

DocuSigned by:

0082DA4F5B3543F...

Signature Adoption: Uploaded Signature Image

Using IP Address:

2603:300b:c4:e800:b57e:b07e:3815:5e1d

Sent: 2/17/2026 12:47:47 AM

Viewed: 2/17/2026 12:48:06 AM

Signed: 2/17/2026 12:48:10 AM

## Electronic Record and Signature Disclosure:

Not Offered via Docusign

Kevin Grablin

ashmeadows.kevin@gmail.com

Security Level: Email, Account Authentication  
(None)

Signed by:

3AD81DC4896841A...

Signature Adoption: Pre-selected Style

Using IP Address: 24.128.34.25

Signed using mobile

Sent: 2/17/2026 12:47:45 AM

Resent: 2/17/2026 7:10:11 PM

Resent: 2/19/2026 10:41:00 AM

Resent: 2/20/2026 1:27:07 PM

Resent: 2/23/2026 12:27:08 PM

Resent: 2/26/2026 9:15:24 PM

Resent: 2/27/2026 1:38:05 PM

Resent: 3/4/2026 1:54:35 AM

Resent: 3/4/2026 1:58:36 AM

Resent: 3/4/2026 2:55:29 PM

Viewed: 3/4/2026 5:37:01 PM

Signed: 3/4/2026 5:37:22 PM

## Electronic Record and Signature Disclosure:

Accepted: 3/4/2026 5:37:01 PM

ID: b71e524c-eb69-4a4d-a0c8-7457cb44a856

Kodi Patterson

kodi@doorwaysinc.com

Secretary

Security Level: Email, Account Authentication  
(None)

DocuSigned by:

31D54D6B93FB469...

Signature Adoption: Pre-selected Style

Using IP Address: 63.224.76.213

Sent: 2/17/2026 12:47:46 AM

Viewed: 2/17/2026 5:49:55 AM

Signed: 2/17/2026 5:51:49 AM

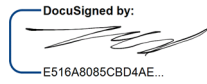
## Electronic Record and Signature Disclosure:

Accepted: 2/17/2026 5:49:55 AM

ID: fae29a3e-52cb-452d-9801-961b8eca57f5

**Signer Events**

Lucas Nishimoto  
 nishimotocss@gmail.com  
 Security Level: Email, Account Authentication  
 (None)

**Signature**

Signature Adoption: Drawn on Device  
 Using IP Address: 24.128.32.9  
 Signed using mobile

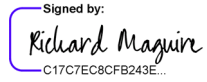
**Timestamp**

Sent: 2/17/2026 12:47:46 AM  
 Viewed: 2/17/2026 6:23:24 AM  
 Signed: 2/17/2026 6:23:37 AM

**Electronic Record and Signature Disclosure:**

Accepted: 2/17/2026 6:23:24 AM  
 ID: bd0fb91f-e4ec-4821-a441-ac2c2970753f

Richard Maguire  
 ashmeadows.rjmaguire@gmail.com  
 Security Level: Email, Account Authentication  
 (None)



Signature Adoption: Pre-selected Style  
 Using IP Address:  
 2601:280:4800:39b0:4d08:a568:92e8:402a

Sent: 2/17/2026 12:47:47 AM  
 Viewed: 2/17/2026 6:17:55 AM  
 Signed: 2/17/2026 6:18:16 AM

**Electronic Record and Signature Disclosure:**

Accepted: 10/29/2025 4:04:42 PM  
 ID: 4a4cbd86-c30e-4011-af90-ae4c6ce5079

Steve Summers  
 ssummers007@gmail.com  
 Security Level: Email, Account Authentication  
 (None)



Signature Adoption: Drawn on Device  
 Using IP Address:  
 2600:100e:b210:4358:2953:4fa9:40b4:9b39  
 Signed using mobile

Sent: 2/17/2026 12:47:47 AM  
 Resent: 2/17/2026 7:10:12 PM  
 Resent: 2/19/2026 10:41:00 AM  
 Resent: 2/20/2026 1:27:08 PM  
 Resent: 2/23/2026 12:27:08 PM  
 Resent: 2/26/2026 9:15:25 PM  
 Resent: 2/27/2026 1:38:05 PM  
 Resent: 3/4/2026 1:54:36 AM  
 Resent: 3/4/2026 1:58:37 AM  
 Viewed: 3/4/2026 8:52:03 AM  
 Signed: 3/4/2026 8:52:42 AM

**Electronic Record and Signature Disclosure:**

Accepted: 3/4/2026 8:52:03 AM  
 ID: 01aa5989-b539-4bbe-bde9-e2154370d6eb

**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****Carbon Copy Events****Status****Timestamp****Witness Events****Signature****Timestamp****Notary Events****Signature****Timestamp****Envelope Summary Events****Status****Timestamps**

Envelope Sent	Hashed/Encrypted	2/17/2026 12:47:47 AM
Certified Delivered	Security Checked	3/4/2026 8:52:03 AM
Signing Complete	Security Checked	3/4/2026 8:52:42 AM

Envelope Summary Events	Status	Timestamps
Completed	Security Checked	3/4/2026 5:37:22 PM
Payment Events	Status	Timestamps
Electronic Record and Signature Disclosure		

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