APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

NAME OF GOVERNMENT	CM-RETAC	For the Year Ended 12/31/2024 or fiscal year ended:
ADDRESS	PO BOX 5055	
	FRISCO, CO 80443	
CONTACT PERSON	BRANDON DARUNA	
PHONE	970-926-5270 X4220	
EMAIL	BDARUNA@ECPARAMEDICS.COM	6/30/2025

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:	TERESIA A SWIFT, CPA
TITLE	CPA
FIRM NAME (if applicable)	SWIFT CPA, LLC
ADDRESS	PO BOX 5630, FRISCO, CO 80443
PHONE	970-668-5850
RELATIONSHIP TO ENTITY	ACCOUNTANT

PREPARER (SIGNATURE REQUIRED)	DATE PREPARED (No exemption shall be granted prior to the close of said fiscal year)
Teresia A. Swift, CPA	7-14-25

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.]	YES	NO	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*
	Assets			
1-1	Cash & Cash Equivalents	$ 220,376	$ -	$ -
1-2	Investments	$ -	$ -	$ -
1-3	Receivables	$ -	$ -	$ -
1-4	Due from Other Entities or Funds	$ -	$ -	$ -
1-5	Property Tax Receivable	$ -	$ -	$ -
	All Other Assets			
1-6	Lease Receivable (as Lessor)	$ -	$ -	$ -
1-7	Other [specify...]	$ -	$ -	$ -
1-8		$ -	$ -	$ -
1-9		$ -	$ -	$ -
1-10		$ -	$ -	$ -
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS	$ 220,376	$ -	$ -
	Deferred Outflows of Resources:			
1-12	[specify...]	$ -	$ -	$ -
1-13	[specify...]	$ -	$ -	$ -
1-14	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS	$ -	$ -	$ -
1-15	TOTAL ASSETS AND DEFERRED OUTFLOWS	$ 220,376	$ -	$ -
	Liabilities			
1-16	Accounts Payable	$ -	$ -	$ -
1-17	Accrued Payroll and Related Liabilities	$ -	$ -	$ -
1-18	Unearned Revenue	$ -	$ -	$ -
1-19	Due to Other Entities or Funds	$ -	$ -	$ -
1-20	All Other Current Liabilities	$ -	$ -	$ -
1-21	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	$ -	$ -	$ -
1-22	All Other Liabilities [specify...]	$ -	$ -	$ -
1-23		$ -	$ -	$ -
1-24		$ -	$ -	$ -
1-25		$ -	$ -	$ -
1-26		$ -	$ -	$ -
1-27	(add lines 1-22 through 1-26) TOTAL LIABILITIES	$ -	$ -	$ -
	Deferred Inflows of Resources:			
1-28	Deferred Property Taxes	$ -	$ -	$ -
1-29	Lease related (as lessor)	$ -	$ -	$ -
1-30	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	$ -	$ -	$ -
	Fund Balance			
1-31	Nonspendable Prepaid	$ -	$ -	$ -
1-32	Nonspendable Inventory	$ -	$ -	$ -
1-33	Restricted [specify...]	$ -	$ -	$ -
1-34	Committed [specify...]	$ -	$ -	$ -
1-35	Assigned [specify...]	$ -	$ -	$ -
1-36	Unassigned:	$ 220,376	$ -	$ -
1-37	Add lines 1-31 through 1-36 This total should be the same as line 3-36 TOTAL FUND BALANCE	$ 220,376	$ -	$ -
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	$ 220,376	$ -	$ -

Description	Proprietary/Fiduciary Funds (Cash or Budgetary Basis) Fund*	Fund*
Assets		
Cash & Cash Equivalents	$ -	$ -
Investments	$ -	$ -
Receivables	$ -	$ -
Due from Other Entities or Funds	$ -	$ -
Other Current Assets [specify...]	$ -	$ -
	$ -	$ -
Total Current Assets	$ -	$ -
Capital & Right to Use Assets, net (from Part 6-4)	$ -	$ -
Other Long Term Assets [specify...]	$ -	$ -
	$ -	$ -
	$ -	$ -
(add lines 1-1 through 1-10) TOTAL ASSETS	$ -	$ -
Deferred Outflows of Resources		
[specify...]	$ -	$ -
[specify...]	$ -	$ -
(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS	$ -	$ -
TOTAL ASSETS AND DEFERRED OUTFLOWS	$ -	$ -
Liabilities		
Accounts Payable	$ -	$ -
Accrued Payroll and Related Liabilities	$ -	$ -
Accrued Interest Payable	$ -	$ -
Due to Other Entities or Funds	$ -	$ -
All Other Current Liabilities	$ -	$ -
(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	$ -	$ -
Proprietary Debt Outstanding (from Part 4-4)	$ -	$ -
Other Liabilities [specify...]	$ -	$ -
	$ -	$ -
	$ -	$ -
	$ -	$ -
(add lines 1-22 through 1-26) TOTAL LIABILITIES	$ -	$ -
Deferred Inflows of Resources		
Pension/OPEB Related	$ -	$ -
Other [specify...]	$ -	$ -
(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	$ -	$ -
Net Position		
Net Investment in Capital and Right-to Use Assets	$ -	$ -
Emergency Reserves	$ -	$ -
Other Designations/Reserves	$ -	$ -
Restricted	$ -	$ -
Undesignated/Unreserved/Unrestricted	$ -	$ -
Add lines 1-31 through 1-36 This total should be the same as line 3-36 TOTAL NET POSITION	$ -	$ -
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

Governmental Funds

Line #	Description	Fund*	Fund*	Fund*
	Tax Revenue			
2-1	Property [include mills levied in question 10-7]	$ -	$ -	$ -
2-2	Specific Ownership	$ -	$ -	$ -
2-3	Sales and Use Tax	$ -	$ -	$ -
2-4	Other Tax Revenue [specify...]	$ -	$ -	$ -
2-5		$ -	$ -	$ -
2-6		$ -	$ -	$ -
2-7		$ -	$ -	$ -
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	$ -	$ -	$ -
2-9	Licenses and Permits	$ -	$ -	$ -
2-10	Highway Users Tax Funds (HUTF)	$ -	$ -	$ -
2-11	Conservation Trust Funds (Lottery)	$ -	$ -	$ -
2-12	Community Development Block Grant	$ -	$ -	$ -
2-13	Fire & Police Pension	$ -	$ -	$ -
2-14	Grants	$ 301,055	$ -	$ -
2-15	Donations	$ -	$ -	$ -
2-16	Charges for Sales and Services	$ -	$ -	$ -
2-17	Rental Income	$ -	$ -	$ -
2-18	Fines and Forfeits	$ -	$ -	$ -
2-19	Interest/Investment Income	$ 147	$ -	$ -
2-20	Tap Fees	$ -	$ -	$ -
2-21	Proceeds from Sale of Capital Assets	$ -	$ -	$ -
2-22	All Other MISCELLANEOUS	$ 330	$ -	$ -
2-23		$ -	$ -	$ -
2-24	Add lines 2-9 through 2-23 TOTAL REVENUES	$ 301,532	$ -	$ -
	Other Financing Sources			
2-25	Debt Proceeds	$ -	$ -	$ -
2-26	Lease Proceeds	$ -	$ -	$ -
2-27	Developer Advances	$ -	$ -	$ -
2-28	Other [specify...]	$ -	$ -	$ -
2-29	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	$ 301,532	$ -	$ -
2-31				

Proprietary/Fiduciary Funds

Description	Fund*	Fund*
Tax Revenue		
Property [include mills levied in question 10-7]	$ -	$ -
Specific Ownership	$ -	$ -
Sales and Use Tax	$ -	$ -
Other Tax Revenue [specify...]	$ -	$ -
	$ -	$ -
	$ -	$ -
	$ -	$ -
Add lines 2-1 through 2-7 TOTAL TAX REVENUE	$ -	$ -
Licenses and Permits	$ -	$ -
Highway Users Tax Funds (HUTF)	$ -	$ -
Conservation Trust Funds (Lottery)	$ -	$ -
Community Development Block Grant	$ -	$ -
Fire & Police Pension	$ -	$ -
Grants	$ -	$ -
Donations	$ -	$ -
Charges for Sales and Services	$ -	$ -
Rental Income	$ -	$ -
Fines and Forfeits	$ -	$ -
Interest/Investment Income	$ -	$ -
Tap Fees	$ -	$ -
Proceeds from Sale of Capital Assets	$ -	$ -
All Other [specify...]	$ -	$ -
	$ -	$ -
Add lines 2-9 through 2-23 TOTAL REVENUES	$ -	$ -
Other Financing Sources		
Debt Proceeds	$ -	$ -
Lease Proceeds	$ -	$ -
Developer Advances	$ -	$ -
Other [specify...]	$ -	$ -
Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES	$ -	$ -
Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES	$ -	$ -
GRAND TOTALS (ALL FUNDS)	$ 301,532	

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*
	Expenditures			
3-1	General Government	$ -	$ -	$ -
3-2	Judicial	$ -	$ -	$ -
3-3	Law Enforcement	$ -	$ -	$ -
3-4	Fire	$ -	$ -	$ -
3-5	Highways & Streets	$ -	$ -	$ -
3-6	Solid Waste	$ -	$ -	$ -
3-7	Contributions to Fire & Police Pension Assoc.	$ -	$ -	$ -
3-8	Health	$ 207,429	$ -	$ -
3-9	Culture and Recreation	$ -	$ -	$ -
3-10	Transfers to other districts	$ -	$ -	$ -
3-11	Other [specify...]	$ -	$ -	$ -
3-12		$ -	$ -	$ -
3-13		$ -	$ -	$ -
3-14	Capital Outlay	$ -	$ -	$ -
	Debt Service			
3-15	Principal (should match amount in 4-4)	$ -	$ -	$ -
3-16	Interest	$ -	$ -	$ -
3-17	Bond Issuance Costs	$ -	$ -	$ -
3-18	Developer Principal Repayments	$ -	$ -	$ -
3-19	Developer Interest Repayments	$ -	$ -	$ -
3-20	All Other [specify...]	$ -	$ -	$ -
3-21		$ -	$ -	$ -
3-22		$ -	$ -	$ -
3-23		$ -	$ -	$ -
3-24	Add lines 3-1 through 3-23 TOTAL EXPENDITURES	$ 207,429	$ -	$ -
3-25				
3-26	Interfund Transfers (In)	$ -	$ -	$ -
3-27	Interfund Transfers Out	$ -	$ -	$ -
3-28	Other Expenditures (Revenues)	$ -	$ -	$ -
3-29		$ -	$ -	$ -
3-30		$ -	$ -	$ -
3-31		$ -	$ -	$ -
3-32	(Add lines 3-26 through 3-31) TOTAL TRANSFERS AND OTHER EXPENDITURES	$ -	$ -	$ -
3-33	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures Line 2-30, less line 3-24, less line 3-32	$ 94,103	$ -	$ -
3-34	Fund Balance, January 1 from December 31 prior year report	$ 126,273	$ -	$ -
3-35	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.	$ 220,376	$ -	$ -

Line #	Description	Proprietary/Fiduciary Funds Fund*	Fund*
	Expenses		
3-1	General Operating & Administrative	$ -	$ -
3-2	Salaries	$ -	$ -
3-3	Payroll Taxes	$ -	$ -
3-4	Contract Services	$ -	$ -
3-5	Employee Benefits	$ -	$ -
3-6	Insurance	$ -	$ -
3-7	Accounting and Legal Fees	$ -	$ -
3-8	Repair and Maintenance	$ -	$ -
3-9	Supplies	$ -	$ -
3-10	Utilities	$ -	$ -
3-11	Contributions to Fire & Police Pension Assoc.	$ -	$ -
3-12	Other [specify...]	$ -	$ -
3-13		$ -	$ -
3-14	Capital Outlay	$ -	$ -
	Debt Service		
3-15	Principal (should match amount in 4-4)	$ -	$ -
3-16	Interest	$ -	$ -
3-17	Bond Issuance Costs	$ -	$ -
3-18	Developer Principal Repayments	$ -	$ -
3-19	Developer Interest Repayments	$ -	$ -
3-20	All Other [specify...]	$ -	$ -
3-21		$ -	$ -
3-22		$ -	$ -
3-23		$ -	$ -
3-24	Add lines 3-1 through 3-23 TOTAL EXPENSES	$ -	$ -
3-25	GRAND TOTAL (ALL FUNDS)		$ 207,429
3-26	Net Interfund Transfers (In) Out	$ -	$ -
3-27	Other [specify...][enter negative for expense]	$ -	$ -
3-28	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 3-27, 3-30, and 3-31, subtract lines 3-28 and 3-29) TOTAL GAAP RECONCILING ITEMS	$ -	$ -
3-33	Net Increase (Decrease) in Net Position Line 2-30, less line 3-24, plus line 3-32, less line 3-26	$ -	$ -
3-34	Net Position, January 1 from December 31 prior year report	$ -	$ -
3-35	Prior Period Adjustment (MUST explain)	$ -	$ -
3-36	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

	Please answer the following questions by marking the appropriate boxes.	Yes	No
4-1	Does the entity have outstanding debt? *(If 'No' is checked, skip to question 4-5)* *(If 'Yes' is checked, please attach a copy of the entity's debt repayment schedule)*	☐	☑
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:	☐	☐

Please use this space to provide any explanations or comments

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

*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 [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 provide the entity's cash deposit and investment balances.	Amount	Total
5-1	YEAR-END Total of ALL Checking and Savings accounts	$ 220,376	
5-2	Certificates of deposit	$ -	
	TOTAL CASH DEPOSITS		$ 220,376
5-3	Investments (if investment is a mutual fund, please list underlying investments):		
		$ -	
		$ -	
		$ -	
		$ -	
	TOTAL INVESTMENTS		$ -
	TOTAL CASH AND INVESTMENTS		$ 220,376

Please use this space to provide any explanations or comments

	Please answer the following questions by marking in the appropriate box.	Yes	No	N/A
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

	Please answer the following questions by marking in the appropriate box.	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	$ -	$ -	$ -	$ -
Buildings	$ -	$ -	$ -	$ -
Machinery and equipment	$ -	$ -	$ -	$ -
Furniture and fixtures	$ 2,505	$ -	$ -	$ 2,505
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)	$ (2,505)	$ -	$ -	$ (2,505)
TOTAL	$ -	$ -	$ -	$ -

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	$ -	$ -	$ -	$ -

* 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 7 - PENSION INFORMATION

	Please answer the following questions by marking in the appropriate box.	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:	☐	☑	☐	THE BUDGET IS FILED ANNUALLY WITH CDPHE
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 FYE 6-30-25	$ 289,035
	$ -
	$ -
	$ -
	$ -

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 questions by marking in the appropriate box.		Yes	No	Please use this space to provide any explanations or comments
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: CONSORTIUM OF 6 COUNTIES IN CENTRAL CO - EMS, TRAUMA SERVICES UNDER SEMTAC			
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 <u>mills</u> 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.	☐	☐	☑

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 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 1	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. See attached My term expires: ______	Signature ______ Date ______
Board Member 2	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. My term expires: ______	Signature ______ Date ______
Board Member 3	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. My term expires: ______	Signature ______ Date ______
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. My term expires: ______	Signature ______ 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. My term expires: ______	Signature ______ 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. My term expires: ______	Signature ______ 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. My term expires: ______	Signature ______ Date ______

CM-RETAC
RESOLUTION/ORDIANANCE FOR EXEMPTION FROM AUDIT
(Pursuant to Section 29-1-604, C.R.S.)

A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR FISCAL YEAR JUNE 30, 2025 FOR THE CENTRAL MOUNTAINS REGIONAL EMERGENCY MEDICAL TRAUMA ADVISORY COUNCIL (CM-RETAC) FOR THE STATE OF COLORADO.

WHEREAS, the Board of Directors of CM-RETAC wishes to claim exemption from the audit requirement 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 provision of Section 29-1-603, C.R.S.; and

WHEREAS, neither revenues nor expenditures for CM-RETAC exceeded $750,000 for fiscal year ended June 30, 2025; and

WHEREAS, an application for exemption from audit for CM-RETAC has been prepared by Swift CPA, LLC, an independent certified public accounting firm, with knowledge of governmental accounting; and

WHEREAS, said application for exemption from audit for CM-RETAC has been completed in accordance with regulation issued by the state auditor.

NOW THEREFORE, be it resolved/ordained by the Board of Directors of the CM-RETAC that the application for exemption from audit for CM-RETAC for the fiscal year ended June 30, 2025, has been personally reviewed and is hereby approved by a majority of the Board of Directors of CM-RETAC; that those member of the Board of Directors have signified their approval by signing below; and that this resolution shall be attached to, and shall become a part of, the application for exemption from audit of the CM-RETAC for the fiscal year ended June 30, 2025.

Adopted the 23rd day of July, A.D. 2025

Josh Hadley

Signature- CM-RETAC Chairman
Josh Hadley
Print Name Josh Hadley

ATTEST:

Print Name of Members of Governing Body	Date Term Expires	Signatures
Gabriel Muething	07/01/2026	Gabriel Muething
Jeremiah Grantham	8/4/25	Jeremiah Grantham
Jim Levi	NA	Jim Levi
Katie Kowalski	2026	Katie Kowalski
Kevin Borns	N/A	Kevin Borns
Lucas Robinson	NA	Lucas Robinson
Marci Dowis	09/01/2027	[illegible]
Susan Bernstetter	December 31, 2025	Susan Bernstetter

Progress | RightSignature

SIGNATURE CERTIFICATE

REFERENCE NUMBER
B9440E68-AADB-4371-8435-AE72F45623C3

TRANSACTION DETAILS

Reference Number
B9440E68-AADB-4371-8435-AE72F45623C3

Transaction Type
Signature Request

Sent At
08/04/2025 04:25 PM EDT

Executed At
08/06/2025 12:10 PM EDT

Identity Method
email

Distribution Method
email

Signed Checksum
d0f008b6b724643c9d6040c88d1d34806d67c0576bda49d2bccf438c7e2a629b

Signer Sequencing
Disabled

Document Passcode
Disabled

DOCUMENT DETAILS

Document Name
Application for Exemption From Audit CM RETAC Josh Hadley-signed

Filename
Application_for_Exemption_From_Audit_CM_RETAC_Josh_Hadley-signed.pdf

Pages
12 pages

Content Type
application/pdf

File Size
3.82 MB

Original Checksum
17e452c7ac6e477a622c970b60fc8d39ddf05e0f7ad495577174172351488de0

SIGNERS

SIGNER	E-SIGNATURE	EVENTS
Name Jim Levi **Email** jlevi@rwbfire.org **Components** 3	**Status** signed **Multi-factor Digital Fingerprint Checksum** 4f53cda18c2baa0c0354bb5f9a3ecbe5ed12ab4d8e11ba873c2f11161202b945 **IP Address** 216.75.117.242 **Device** Microsoft Edge via Windows **Typed Signature** Jim Levi **Signature Reference ID** FD0AACA9	**Viewed At** 08/06/2025 10:34 AM EDT **Identity Authenticated At** 08/06/2025 10:37 AM EDT **Signed At** 08/06/2025 10:37 AM EDT
Name Lucas Robinson **Email** lucas.robinson@plattecanyonfire.com **Components** 3	**Status** signed **Multi-factor Digital Fingerprint Checksum** 4f53cda18c2baa0c0354bb5f9a3ecbe5ed12ab4d8e11ba873c2f11161202b945 **IP Address** 107.115.99.2 **Device** Chrome Mobile via Android **Typed Signature** Lucas Robinson **Signature Reference ID** 31F0B0C7	**Viewed At** 08/05/2025 12:07 PM EDT **Identity Authenticated At** 08/05/2025 12:07 PM EDT **Signed At** 08/05/2025 12:07 PM EDT

SIGNER	E-SIGNATURE	EVENTS
Name Marci Dowis **Email** marci.dowis@commonspirit.org **Components** 3	**Status** signed **Multi-factor Digital Fingerprint Checksum** 4f53cda18c2baa0c0354bb5f9a3ecbe5ed12ab4d8e11ba873c2f11161202b945 **IP Address** 67.177.234.113 **Device** Chrome Mobile iOS via iOS **Drawn Signature** **Signature Reference ID** B6913E3E **Signature Biometric Count** 5	**Viewed At** 08/04/2025 05:17 PM EDT **Identity Authenticated At** 08/04/2025 05:18 PM EDT **Signed At** 08/04/2025 05:18 PM EDT
Name Jeremiah Grantham **Email** jgrantham@stvincent.health **Components** 3	**Status** signed **Multi-factor Digital Fingerprint Checksum** 4f53cda18c2baa0c0354bb5f9a3ecbe5ed12ab4d8e11ba873c2f11161202b945 **IP Address** 204.132.34.32 **Device** Safari via Mac **Typed Signature** Jeremiah Grantham **Signature Reference ID** A084CFA1	**Viewed At** 08/04/2025 05:04 PM EDT **Identity Authenticated At** 08/04/2025 05:06 PM EDT **Signed At** 08/04/2025 05:06 PM EDT
Name Susan Bernstetter **Email** susan@lakegeorgefire.com **Components** 3	**Status** signed **Multi-factor Digital Fingerprint Checksum** 4f53cda18c2baa0c0354bb5f9a3ecbe5ed12ab4d8e11ba873c2f11161202b945 **IP Address** 216.147.122.114 **Device** Chrome via Windows **Typed Signature** Susan Bernstetter **Signature Reference ID** CC14BBCA	**Viewed At** 08/04/2025 04:35 PM EDT **Identity Authenticated At** 08/04/2025 04:39 PM EDT **Signed At** 08/04/2025 04:39 PM EDT
Name Gabriel Muething **Email** gmuething@aspenhospital.org **Components** 3	**Status** signed **Multi-factor Digital Fingerprint Checksum** 4f53cda18c2baa0c0354bb5f9a3ecbe5ed12ab4d8e11ba873c2f11161202b945 **IP Address** 107.1.179.254 **Device** Chrome via Windows **Typed Signature** Gabriel Muething **Signature Reference ID** 454010CD	**Viewed At** 08/04/2025 04:31 PM EDT **Identity Authenticated At** 08/04/2025 04:33 PM EDT **Signed At** 08/04/2025 04:33 PM EDT

SIGNER	E-SIGNATURE	EVENTS
Name Kevin Borns **Email** chief@southparkambulance.com **Components** 3	**Status** signed **Multi-factor Digital Fingerprint Checksum** 4f53cda18c2baa0c0354bb5f9a3ecbe5ed12ab4d8e11ba873c2f11161202b945 **IP Address** 209.236.92.103 **Device** Chrome via Windows **Typed Signature** Kevin Borns **Signature Reference ID** 0ACBB41E	**Viewed At** 08/04/2025 04:30 PM EDT **Identity Authenticated At** 08/04/2025 04:33 PM EDT **Signed At** 08/04/2025 04:33 PM EDT
Name Katie Kowalski **Email** katie.kowalski@hrrmc.net **Components** 3	**Status** signed **Multi-factor Digital Fingerprint Checksum** 4f53cda18c2baa0c0354bb5f9a3ecbe5ed12ab4d8e11ba873c2f11161202b945 **IP Address** 199.7.99.1 **Device** Chrome via Windows **Typed Signature** Katie Kowalski **Signature Reference ID** 4EFCF6FC	**Viewed At** 08/04/2025 04:26 PM EDT **Identity Authenticated At** 08/04/2025 04:27 PM EDT **Signed At** 08/04/2025 04:27 PM EDT

AUDITS

TIMESTAMP	AUDIT
08/04/2025 04:25 PM EDT	Ali Ritter (ali@swiftsnow.com) created document 'Application_for_Exemption_From_Audit_CM_RETAC_Josh_Hadley-signed.pdf' on Chrome via Windows from 70.90.113.41.
08/04/2025 04:25 PM EDT	Katie Kowalski (katie.kowalski@hrrmc.net) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Jim Levi (jlevi@rwbfire.org) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Jeremiah Grantham (jgrantham@stvincent.health) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Gabriel Muething (gmuething@aspenhospital.org) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Barron Birch (birch.barron@eaglecounty.us) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Marci Dowis (marci.dowis@commonspirit.org) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Lou Laurina (llaurina@summitfire.org) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Brandon Daruna (bdaruna@ecparamedics.com) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Andrea Carlstrom (acarlstrom@chaffeecounty.com) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Elizabeth Kruger (elizabeth.kruger@vailhealth.org) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Jill Kennedy (jkennedy@aspenhospital.org) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Lucas Robinson (lucas.robinson@plattecanyonfire.com) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Susan Bernstetter (susan@lakegeorgefire.com) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Kevin Borns (chief@southparkambulance.com) was emailed a link to sign.
08/04/2025 04:25 PM EDT	Aaron Luttrell (aluttrell@roaringforkfire.org) was emailed a link to sign.
08/04/2025 04:26 PM EDT	Katie Kowalski (katie.kowalski@hrrmc.net) viewed the document on Chrome via Windows from 199.7.99.1.
08/04/2025 04:27 PM EDT	Katie Kowalski (katie.kowalski@hrrmc.net) authenticated via email on Chrome via Windows from 199.7.99.1.
08/04/2025 04:27 PM EDT	Katie Kowalski (katie.kowalski@hrrmc.net) signed the document on Chrome via Windows from 199.7.99.1.
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08/04/2025 04:31 PM EDT	Gabriel Muething (gmuething@aspenhospital.org) viewed the document on Chrome via Windows from 107.1.179.254.
08/04/2025 04:31 PM EDT	Gabriel Muething (gmuething@aspenhospital.org) viewed the document on Chrome via Windows from 18.205.183.22.
08/04/2025 04:32 PM EDT	Jim Levi (jlevi@rwbfire.org) viewed the document on Microsoft Edge via Windows from 216.75.117.242.
08/04/2025 04:33 PM EDT	Kevin Borns (chief@southparkambulance.com) authenticated via email on Chrome via Windows from 209.236.92.103.
08/04/2025 04:33 PM EDT	Kevin Borns (chief@southparkambulance.com) signed the document on Chrome via Windows from 209.236.92.103.
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08/04/2025 04:39 PM EDT	Susan Bernstetter (susan@lakegeorgefire.com) authenticated via email on Chrome via Windows from 216.147.122.114.
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08/04/2025 05:04 PM EDT	Jeremiah Grantham (jgrantham@stvincent.health) viewed the document on Safari via Mac from 204.132.34.32.
08/04/2025 05:06 PM EDT	Jeremiah Grantham (jgrantham@stvincent.health) authenticated via email on Safari via Mac from 204.132.34.32.
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08/04/2025 05:07 PM EDT	Marci Dowis (marci.dowis@commonspirit.org) viewed the document on Chrome via Windows from 3.226.83.31.
08/04/2025 05:16 PM EDT	Marci Dowis (marci.dowis@commonspirit.org) viewed the document on Chrome Mobile IOS via IOS from 67.177.234.113.
08/04/2025 05:17 PM EDT	Marci Dowis (marci.dowis@commonspirit.org) viewed the document on Chrome Mobile iOS via iOS from 67.177.234.113.
08/04/2025 05:17 PM EDT	Marci Dowis (marci.dowis@commonspirit.org) viewed the document on Chrome Mobile iOS via iOS from 67.177.234.113.
08/04/2025 05:18 PM EDT	Marci Dowis (marci.dowis@commonspirit.org) authenticated via email on Chrome Mobile iOS via iOS from 67.177.234.113.
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08/04/2025 05:19 PM EDT	Lou Laurina (llaurina@summitfire.org) viewed the document on Microsoft Edge via Windows from 69.71.168.94.
08/05/2025 12:06 PM EDT	Lucas Robinson (lucas.robinson@plattecanyonfire.com) viewed the document on Chrome Mobile via Android from 166.205.58.45.
08/05/2025 12:07 PM EDT	Lucas Robinson (lucas.robinson@plattecanyonfire.com) viewed the document on Chrome Mobile via Android from 107.115.99.2.
08/05/2025 12:07 PM EDT	Lucas Robinson (lucas.robinson@plattecanyonfire.com) authenticated via email on Chrome Mobile via Android from 107.115.99.2.
08/05/2025 12:07 PM EDT	Lucas Robinson (lucas.robinson@plattecanyonfire.com) signed the document on Chrome Mobile via Android from 107.115.99.2.
08/06/2025 10:25 AM EDT	Lou Laurina (llaurina@summitfire.org) was emailed a reminder.
08/06/2025 10:25 AM EDT	Jim Levi (jlevi@rwbfire.org) was emailed a reminder.
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08/06/2025 10:37 AM EDT	Jim Levi (jlevi@rwbfire.org) authenticated via email on Microsoft Edge via Windows from 216.75.117.242.
08/06/2025 10:37 AM EDT	Jim Levi (jlevi@rwbfire.org) signed the document on Microsoft Edge via Windows from 216.75.117.242.
08/06/2025 12:10 PM EDT	Lou Laurina (llaurina@summitfire.org) was removed from document b9440e68-aadb-4371-8435-ae72f45623c3 as the document was force completed.
08/06/2025 12:10 PM EDT	Aaron Luttrell (aluttrell@roaringforkfire.org) was removed from document b9440e68-aadb-4371-8435-ae72f45623c3 as the document was force completed.
08/06/2025 12:10 PM EDT	Andrea Carlstrom (acarlstrom@chaffeecounty.com) was removed from document b9440e68-aadb-4371-8435-ae72f45623c3 as the document was force completed.
08/06/2025 12:10 PM EDT	Barron Birch (birch.barron@eaglecounty.us) was removed from document b9440e68-aadb-4371-8435-ae72f45623c3 as the document was force completed.
08/06/2025 12:10 PM EDT	Brandon Daruna (bdaruna@ecparamedics.com) was removed from document b9440e68-aadb-4371-8435-ae72f45623c3 as the document was force completed.
08/06/2025 12:10 PM EDT	Elizabeth Kruger (elizabeth.kruger@vailhealth.org) was removed from document b9440e68-aadb-4371-8435-ae72f45623c3 as the document was force completed.
08/06/2025 12:10 PM EDT	Jill Kennedy (jkennedy@aspenhospital.org) was removed from document b9440e68-aadb-4371-8435-ae72f45623c3 as the document was force completed.
08/06/2025 12:10 PM EDT	Component 'Text 24' assigned to signer12 was removed as the document was force completed.
08/06/2025 12:10 PM EDT	Component 'Text 23' assigned to signer12 was removed as the document was force completed.
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08/06/2025 12:10 PM EDT	Component 'Signature 2' assigned to signer2 was removed as the document was force completed.
08/06/2025 12:10 PM EDT	Component 'Text 3' assigned to signer2 was removed as the document was force completed.

TIMESTAMP	AUDIT
08/06/2025 12:10 PM EDT	Component 'Text 4' assigned to signer2 was removed as the document was force completed.
08/06/2025 12:10 PM EDT	Component 'Signature 1' assigned to signer1 was removed as the document was force completed.
08/06/2025 12:10 PM EDT	Component 'Text 2' assigned to signer1 was removed as the document was force completed.
08/06/2025 12:10 PM EDT	Component 'Text 1' assigned to signer1 was removed as the document was force completed.
08/06/2025 12:10 PM EDT	Ali Ritter (ali@swiftsnow.com) force completed document 'Application_for_Exemption_From_Audit_CM_RETAC_Josh_Hadley-signed.pdf' on Chrome via Windows from 70.90.113.41.