APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT	Washington 25 Metropolitan District No. 2	For the Year Ended
ADDRESS	c/o McGeady Becher P.C.	12/31/22
	450 17th Avenue, Suite 400	or fiscal year ended:
	Denver, CO 80203-1254	
CONTACT PERSON	Paula Williams	
PHONE	303-592-4380	
EMAIL	pwilliams@specialdistrictlaw.com	
	PART 1 - CERTIFICATION OF PREPARER	

I certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to the best of my knowledge.

NAME:	James H. Ruthven
TITLE	District Accountant
FIRM NAME (if applicable)	Special District Management Services, Inc.
ADDRESS	141 Union Blvd., Suite 150, Lakewood, CO 80228-1898
PHONE	303-987-0835
DATE PREPARED	3/16/2023

PREPARER (SIGNATURE REQUIRED)

Jul-

Please indicate whether the following financial information is recorded	GOVERNMENTAL (MODIFIED ACCRUAL BASIS)	PROPRIETARY (CASH OR BUDGETARY BASIS)
using Governmental or Proprietary fund types		

PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

Line#		Description		Round to nearest Dollar	Please use this
2-1	Taxes: Property	(report mills levied in Question 10-6)	\$	2	space to provide
2-2	Specific ow	nership	\$	-	any necessary
2-3	Sales and u	se	\$	-	explanations
2-4	Other (spec	ify):	\$	-	
2-5	Licenses and permits		\$	-	
2-6	Intergovernmental:	Grants	\$	-	
2-7	C C	Conservation Trust Funds		_	
2-8		Highway Users Tax Funds		_	
2-9		Other (specify):	\$	_	1
2-10	Charges for services		\$	_	
2-11	Fines and forfeits		\$	-	
2-12	Special assessments		\$	-	
2-13	Investment income		\$	-	
2-14	Charges for utility services		\$	-	Ī
2-15	Debt proceeds	(should agree with I	ine 4-4, column 2) \$	-	Ī
2-16	Lease proceeds		\$	-	Ī
2-17	Developer Advances received	(should a	gree with line 4-4)	-	
2-18	Proceeds from sale of capital as	sets	\$	-	İ
2-19	Fire and police pension		\$	-	1
2-20	Donations		\$	-	İ
2-21	Other (specify):		\$	-	İ
2-22			\$	-	1
2-23			\$	-	1
2-24	(ad	l lines 2-1 through 2-23) TOT	AL REVENUE \$	2	

PART 3 - EXPENDITURES/EXPENSES

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

Line#	Description		Round to nearest Dollar	Please use this
3-1	Administrative		\$ -	space to provide
3-2	Salaries		\$ -	any necessary
3-3	Payroll taxes		\$ -	explanations
3-4	Contract services		\$ -	
3-5	Employee benefits		\$ -	
3-6	Insurance		\$ -	7
3-7	Accounting and legal fees		\$ -	7
3-8	Repair and maintenance		\$ -	7
3-9	Supplies		\$-	
3-10	Utilities and telephone		\$-	
3-11	Fire/Police		\$ -	7
3-12	Streets and highways		\$ -	7
3-13	Public health		\$ -	7
3-14	Capital outlay		\$-	
3-15	Utility operations		\$-	
3-16	Culture and recreation		\$-	
3-17	Debt service principal (should	d agree with Part 4)	\$ -	7
3-18	Debt service interest		\$ -	7
3-19	Repayment of Developer Advance Principal (should	agree with line 4-4)	\$ -	7
3-20	Repayment of Developer Advance Interest		\$-	
3-21	Contribution to pension plan (shou	Id agree to line 7-2)	\$-	
3-22	Contribution to Fire & Police Pension Assoc. (shou	Id agree to line 7-2)	\$-	
3-23	Other (specify):			7
3-24			\$-	
3-25			\$-	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITUR	ES/EXPENSES	\$-	
If TOTAL	REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are (GREATER than	\$100.000 - STOP. You may	not use this

form. Please use the "Application for Exemption from Audit - LONG FORM"

	PART 4 - DEBT OUTSTANDIN	G, IS	SUED	, A	ND RE	ETIR	ED		
	Please answer the following questions by marking the	appropi	riate boxes.	Ĩ		•	Yes		No
4-1	Does the entity have outstanding debt? If Yes, please attach a copy of the entity's Debt Repayment Schedule.							[~
4-2	Is the debt repayment schedule attached? If no, MUST explain:					Г	7	Г	
4-Z	Is the dept repayment schedule attached? If no, MUST explai	n:				1		L]
4-3	Is the entity current in its debt service payments? If no, MUS	T expla	ain:			. C		[
4-4									
	Please complete the following debt schedule, if applicable: (please only include principal amounts)(enter all amount as positive		standing at	lssu	ed during	Retire	d during		anding at
	numbers)	end of	f prior year*		year	У	/ear	yea	r-end
	General obligation bonds	\$	-	\$	-	\$	-	\$	-
	Revenue bonds	\$	-	\$	-	\$	-	\$	-
	Notes/Loans	\$	-	\$	-	\$	-	\$	-
	Lease Liabilities	\$	-	\$	-	\$	-	\$	-
	Developer Advances	\$	-	\$	-	\$	-	\$	-
	Other (specify):	\$	-	\$	-	\$	-	\$	-
	TOTAL	\$	-	\$	-	\$	-	\$	-
			tie to prior ye	ar end	ing balance				
	Please answer the following questions by marking the appropriate boxes						Yes		No
4-5	Does the entity have any authorized, but unissued, debt? How much?	¢	1 1	25.00	0,000.00	ו	✓		
If yes:	Date the debt was authorized:	\$	11/8/2		0,000.00				
4.0	Does the entity intend to issue debt within the next calendar		11/0/2	2010		J			7
4-6 If ves:	How much?	year : c				1			~
4-7	Does the entity have debt that has been refinanced that it is s	φ till roc	nonoiblo f	or?	-	J			✓
If yes:	What is the amount outstanding?	\$	sponsible i	01 :		1			
4-8	Does the entity have any lease agreements?	φ			-	J			~
If yes:	What is being leased?					1			
ii yoo.	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?	\$			-				
	Please use this space to provide any	explai	nations or	com	ments:				
	PART 5 - CASH AND		/ESTM						

	PART 5 - CASH AND INVESTMI	ENTS		
	Please provide the entity's cash deposit and investment balances.		Amount	Total
5-1	YEAR-END Total of ALL Checking and Savings Accounts		\$ -	
5-2	Certificates of deposit		\$ -	
	Total Cash Deposits			\$ -
	Investments (if investment is a mutual fund, please list underlying investments):			
			\$-	1
5-3			\$ -	
5-5			\$ -]
			\$-	
	Total Investments			\$-
	Total Cash and Investments			\$-
	Please answer the following questions by marking in the appropriate boxes	Yes	No	N/A
5-4	Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?			
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.)?			\checkmark
If no M	UST use this space to provide any explanations:			

	PART 6 - CAPITAL AND RI	GHT-TO	-U	SE ASS	ΕT	S		
	Please answer the following questions by marking in the appropriate box	(es.				Yes		No
6-1	Does the entity have capital assets?							1
6-2	Has the entity performed an annual inventory of capital asset 29-1-506, C.R.S.,? If no, MUST explain:	ts in accordan	ice v	vith Section	_			
6-3	Complete the following capital & right-to-use assets table:	Balance - beginning of t year*		Additions (Mus be included in Part 3)		Deletions		′ear-End Balance
	Land	¢		*			A	
	Land	Φ -		\$-	\$	-	\$	-
	Buildings	\$ - \$ -		<u>\$ -</u> \$ -	\$ \$	-	\$ \$	-
		\$ - \$ -		+	• •		'	- - -
	Buildings	-		\$-	\$	-	\$	- - - -
	Buildings Machinery and equipment	\$ -		\$ - \$ -	\$ \$	-	\$ \$	

Complete the following capital & right-to-use assets table:	beginn	ance - ing of the ear*	be inc	ons (Must cluded in art 3)	De	letions	ar-End Ilance
Land	\$	-	\$	-	\$	-	\$ -
Buildings	\$	-	\$	-	\$	-	\$ -
Machinery and equipment	\$	-	\$	-	\$	-	\$ -
Furniture and fixtures	\$	-	\$	-	\$	-	\$ -
Infrastructure	\$	-	\$	-	\$	-	\$ -
Construction In Progress (CIP)	\$	-	\$	-	\$	-	\$ -
Leased Right-to-Use Assets	\$	-	\$	-	\$	-	\$ -
Other (explain):	\$	-	\$	-	\$	-	\$ -
Accumulated Depreciation/Amortization (Please enter a negative, or credit, balance)	\$	-	\$	-	\$	-	\$ -
TOTAL	\$	-	\$	-	\$	-	\$ -

	PART 7 - PENSION INFORMA	TION			
	Please answer the following questions by marking in the appropriate boxes.		Ye	s	No
7-1	Does the entity have an "old hire" firefighters' pension plan?				V
7-2					\checkmark
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?	\$-			
	Please use this space to provide any explanations or	comments:			

PART 8 - BUDGET INFORMATION						
	Please answer the following questions by marking in the appropriate boxes.	Yes	No	N/A		
8-1	Did the entity file a budget with the Department of Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.?	V				
8-2	Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:	\checkmark				

If yes: Please indicate the amount budgeted for each fund for the year reported:

Governmental/Proprietary Fund Name	Total Appropriations By Fund
General Fund	\$-

	PART 9 - TAXPAYER'S BILL OF RIGHTS (TAB	OR)	
	Please answer the following question by marking in the appropriate box	Yes	No
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent emergency reserve requirement. All governments should determine if they meet this requirement of TABOR.	v	
If no, ML	JST explain:		
	PART 10 - GENERAL INFORMATION		
	Please answer the following questions by marking in the appropriate boxes.	Yes	No
10-1	Is this application for a newly formed governmental entity?		7
If yes:	Date of formation:		
10-2	Has the entity changed its name in the past or current year?		
10-2	has the entity changed its hame in the past of current year?		
If yes:	Please list the NEW name & PRIOR name:		
10-3	Is the entity a metropolitan district?	\checkmark	
	Please indicate what services the entity provides:		
10-4	See attached		
	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: See attached		
10-5	Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during		✓
If yes:	Date Filed:		
j			
10-6	Does the entity have a certified Mill Levy?	~	
If yes:			
j - 22	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):		
	Bond Redemption mills		-
	General/Other mills		50.000
	Total mills		50.000

Please use this space to provide any explanations or comments:

PART 11 - GOVERNING BODY APPROVA		
Please answer the following question by marking in the appropriate box	YES	NO

12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedure

Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as Docusign or Echosign. Required elements and safeguards are as follows:

• The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.

• The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.

• Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

1) Submit the application in hard copy via the US Mail including original signatures.

2) Submit the application electronically via email and either,

a. Include a copy of an adopted resolution that documents formal approval by the Board, or

b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

	Print the names of ALL members of current governing body below.	A <u>MAJORITY</u> of the members of the governing body must complete and sign in the column below.
Board Member 1	Print Board Member's Name Patrick Chelin	IPatrick Chelin, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit Signed Date03 / 23 / 2023
Board Member 2	Print Board Member's Name Kevin Collins	My term Expires: May 2023 I Kevin Collins appointed board member, and that I have personally reviewed and approve this application for exemption from audit Signed Date03 / 23 / 2023 My term Expires: May 2023
Board Member 3	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires:
Board Member 4	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires:
Board Member 5	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires:
Board Member 6	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires:
Board Member 7	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires:

10-3 The District is responsible for the acquisition, construction, installation, and completion of certain: street improvements; park and recreation improvements; water; sanitation; transportation; safety protection; fire protection; mosquito control; television relay and translation; security services and covenant enforcement and design review services.

10-4 Washington 25 Metropolitan District Nos. 1-4 entered into a Memorandum of Understanding (MOU) on September 24, 2018 with an effective date of August 7, 2018. District No. 1 shall provide the financing, construction, design, operation and maintenance of the improvements, as well as the overall administration of the Districts until such time as an Intergovernmental Agreement (IGA) is executed. District No. 1 will enter into agreement(s) with the developer of the Development to provide for the financing of such services. District Nos. 2, 3, and 4 will reimburse District No. 1 for all costs incurred by District No. 1 pursuant to the MOU based on an allocable basis that will be set forth in the IGA.



Title	Washington 25 MD Nos. 1-4 - Audit Exemptions
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