APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT
ADDRESS

C/o McGeady Becher P.C.
450 E. 17th Avenue, Suite 400
Denver, CO 80203-1254

CONTACT PERSON
PHONE
303-592-4380
EMAIL

For the Year Ended
12/31/22
or fiscal year ended:

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)

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

GOVERNMENTAL (MODIFIED ACCRUAL BASIS)

CASH OR BUDGETARY BASIS)

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)	\$ -	space to provide
2-2	Tuxoo.	Specific owner	,	\$ -	any necessary
2-3		Sales and use	Sinp	\$ -	explanations
2-4		Other (specify)		\$ -	-
2-5	Licenses and permi		•	\$ -	
2-6	Intergovernmental:	13	Grants	\$ -	-
2-7	intergoverninental.		Conservation Trust Funds (Lottery)	\$ -	
2-7			Highway Users Tax Funds (HUTF)	\$ -	-
2-9			Other (specify):	\$ -	_
2-10	Charges for service	6	Other (specify).	\$ -	_
2-10	Fines and forfeits	5		\$ -	_
					_
2-12	Special assessments Investment income			\$ -	
2-13				-	
2-14	Charges for utility s	ervices		\$ -	
2-15	Debt proceeds		(should agree with line 4-4, column 2)	· ·	
2-16	Lease proceeds			-	
2-17	Developer Advances		(should agree with line 4-4	′ _ ' 	
2-18	Proceeds from sale			\$ -	
2-19	Fire and police pens	sion		\$ -	
2-20	Donations			\$ -	
2-21	Other (specify):			\$ -	
2-22				\$ -	
2-23				\$ -	
2-24		(add lir	nes 2-1 through 2-23) TOTAL REVENUE	\$ -	

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	e use this
3-1	Administrative		\$ -	•	to provide
3-2	Salaries		\$ -		ecessary
3-3	Payroll taxes		\$ -	explai	nations
3-4	Contract services		\$ -		
3-5	Employee benefits		\$ -		
3-6	Insurance		\$ -		
3-7	Accounting and legal fees		\$ -		
3-8	Repair and maintenance		\$ -		
3-9	Supplies		\$		
3-10	Utilities and telephone		\$		
3-11	Fire/Police		\$ -		
3-12	Streets and highways		\$		
3-13	Public health		\$ -		
3-14	Capital outlay		\$ -		
3-15	Utility operations		\$ -		
3-16	Culture and recreation		\$ -		
3-17	Debt service principal (should	d agree with Part 4)	\$ -		
3-18	Debt service interest		\$ -		
3-19	1 2 1	agree with line 4-4)	\$ -		
3-20	Repayment of Developer Advance Interest		\$ -		
3-21		ld agree to line 7-2)	\$ -		
3-22	Contribution to Fire & Police Pension Assoc. (show	ld agree to line 7-2)	\$ -		
3-23	Other (specify):		<u> </u>		
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 - <u>STOP</u>. You may not use this form. Please use the "Application for Exemption from Audit - <u>LONG FORM</u>".

	PART 4 - DEBT OUTSTANDING	G, ISSUED	, AND RE	ETIRED	
	Please answer the following questions by marking the	appropriate boxes.		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:				
	TO THE GOLD AND A THE CONTRACT OF THE CONTRACT]	
4-3	Is the entity current in its debt service payments? If no, MUS	T explain:			
4-4	Please complete the following debt schedule, if applicable:	Outstanding at	Issued during	Retired during	Q Outstanding at
	(please only include principal amounts)(enter all amount as positive	end of prior year*	year	year	year-end
	numbers)		7		, , , , ,
	General obligation bonds	\$ -	\$ -	\$ -	\$ -
	Revenue bonds	\$ -	\$ -	\$ -	\$ -
	Notes/Loans	\$ -	\$ -	\$ -	\$ -
	Lease Liabilities	\$ -	\$ -	\$ -	\$ -
	Developer Advances	\$ -	\$ -	\$ -	\$ -
	Other (specify):	\$ -	\$ -	\$ -	\$ -
	TOTAL	*must tie to prior ye	\$ -	\$ -	\$ -
	Please answer the following questions by marking the appropriate boxes		ar enumy balance	Yes	No
4-5	Does the entity have any authorized, but unissued, debt?	•		√	
If yes:	How much?		25,000,000.00]	
	Date the debt was authorized:	11/8/2	2016]	
4-6	Does the entity intend to issue debt within the next calendar	year?			✓
If yes:	How much?	\$	-	J	
4-7	Does the entity have debt that has been refinanced that it is s		or?	_	✓
If yes:	What is the amount outstanding?	\$	-		
4-8 If yes:	Does the entity have any lease agreements? What is being leased?			1	✓
11 ycs.	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	explanations or	comments:		
	DARTE CACHAND	INVESTM	ENTS		
	PART 5 - CASH AND	TINVESTIM	ENIS		
E 4	Please provide the entity's cash deposit and investment balances.			Amount	Total
5-1 5-2	YEAR-END Total of ALL Checking and Savings Accounts Certificates of deposit			\$ - \$ -	\dashv
J-Z	Total Cash Deposits				\$ -
	Investments (if investment is a mutual fund, please list underlying	investments).			Ψ -
	The control of the co				
				\$ -	_
5-3				\$ -	_
				\$ - \$ -	\dashv
	Total Investments				\$ -
	Total Cash and Investments				\$ -
	Please answer the following questions by marking in the approp	riate boxe <u>s</u>	Yes	No	N/A
5-4	Are the entity's Investments legal in accordance with Section			•	· ·
	seg. C.R.S.?	- ,			✓

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 use this space to provide any explanations:

 \checkmark

	PART 6 - CAPITAL AND RI	GH	T-TO-U	SE AS	SE	TS		
	Please answer the following questions by marking in the appropriate box					Yes		No
6-1	Does the entity have capital assets?							✓
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:			n				
6-3	Complete the fallowing equital 9 wight to use contactable.		Balance -	Additions (M		Deletions	Ye	ear-End
	Complete the following capital & right-to-use assets table:	Ĭ	inning of the year*	be included Part 3)	ın	Deletions	В	alance
	Land	\$	-	\$ -		\$ -	\$	-
	Buildings	\$	-	\$ -		\$ -	\$	-
	Machinery and equipment	\$	-	\$ -		\$ -	\$	-
	Furniture and fixtures	\$	-	\$ -		\$ -	\$	-
	Infrastructure	\$	-	\$ - \$ -		\$ - \$ -	\$	-
	Construction In Progress (CIP)	\$	-	_			\$	-
	Leased Right-to-Use Assets Other (explain):	\$	-	\$ - \$ -		\$ - \$ -	\$	-
	Accumulated Depreciation/Amortization	Φ_	-	Φ -		Φ -	1 2	-
	(Please enter a negative, or credit, balance)	\$	-	\$ -		\$ -	\$	_
	TOTAL	\$	-	\$ -		\$ -	\$	
	Please use this space to provide any	expl	anations or			•		
		18.15						
	PART 7 - PENSION		ORMA	TION				
7.4	Please answer the following questions by marking in the appropriate box	es.				Yes		No
7-1 7-2	Does the entity have an "old hire" firefighters' pension plan?							
If yes:	Does the entity have a volunteer firefighters' pension plan?							
11 ycs.	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 retires as of lan							
	1?							
	Please use this space to provide any	expl	anations or	comments				
	PART 8 - BUDGET	INIE	ODMA"	TION				
	Please answer the following questions by marking in the appropriate box		ORIVIA	Yes		No		N/A
8-1	Did the entity file a budget with the Department of Local Affai		r the			<u> </u>	•	_
٠.	current year in accordance with Section 29-1-113 C.R.S.?			✓				
8-2	Did the entity were an enverying one receiving in exceeden		th Coetion					
-	Did the entity pass an appropriations resolution, in accordanged 29-1-108 C.R.S.? If no, MUST explain:	ce wi	in Section	✓				
	29-1-100 C.N.S.: II 110, WIOST Explain.			i				
If yes:	Please indicate the amount budgeted for each fund for the ye	ar re	ported:	ļ				
	Governmental/Proprietary Fund Name	L To	otal Appropria	tions By Fund	d			
	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.	✓	
f no, Ml	JST explain:		
	PART 10 - GENERAL INFORMATION		
	Please answer the following questions by marking in the appropriate boxes.	Yes	No
	Is this application for a newly formed governmental entity?	П	
10-1		_	
If yes:	Date of formation:		
10-2	Has the entity changed its name in the past or current year?		\checkmark
If yes:	Please list the NEW name & PRIOR name:		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
10-3	Is the entity a metropolitan district?	~	
	Please indicate what services the entity provides:		
	See attached		
10-4	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	Ш	✓
If yes:	Date Filed:		
		_	
10-6	Does the entity have a certified Mill Levy?	✓	
If yes:	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):		
	Bond Redemption mills		
	General/Other mills		

Please use this space to provide any explanations or comments:

Total mills

7

PART 11 - GOVERNING BODY APPROVAL					
	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?	V			

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.				
	Print Board Member's Name	I, attest I am a duly elected or				
Board		appointed board member, and that I have personally reviewed and approve this				
Member	Patrick Chelin	application for exemption from audit. Signed				
1		Signed Pavack Charles				
		Date) 3 / 23 / 2023				
		My term Expires:May 2023				
	Print Board Member's Name	I, attest I am a duly elected or				
Board		appointed board member, and that I have personally reviewed and approve this				
Member	Kevin Collins	application for exemption from audit. Signed Seven Follows				
2		Date03 / 23 / 2023				
		My term Expires:May 2023				
	Print Board Member's Name	I, attest I am a duly elected or appointed board				
	Time Board Member 3 Hame	member, and that I have personally reviewed and approve this application for				
Board		exemption from audit.				
Member		Signed				
3		Date:				
		My term Expires:				
	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				
Board Member		exemption from audit.				
4		Signed				
7		Date:				
		My term Expires:				
	Print Board Member's Name	I, attest I am a duly elected or appointed board				
Board		member, and that I have personally reviewed and approve this application for				
Member		exemption from audit.				
5		Signed Date:				
		My term Expires:				
	Print Board Member's Name	I, attest I am a duly elected or appointed board				
	Thir board member 3 Name	member, and that I have personally reviewed and approve this application for				
Board		exemption from audit.				
Member		Signed				
6		Date:				
		My term Expires:				
Board Member 7	Print Board Member's Name	I, attest I am a duly elected or appointed board				
		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

File name 01060003.PDF, 01060004.PDF and 2 others

Document ID ca90164144d1fc5499d1dd76485a9cca89729953

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