DocuSian Envelope ID: 520FADB	80-BC4E-439D-AA6E-88FEDD094D8B							
	APPLICATION FO	R EXEMPT	TION FROM	M AUDIT				
		ONG FORI						
NAME OF GOVERNMENT	Severance South Metropolitan District 2	ONO I ON	IVI		For the Year Ended			
ADDRESS	c/o Pinnacle Consulting Group, Inc		12/31/2021					
ADDRESS	550 W. Eisenhower Blvd	or fiscal year ended:						
	Loveland, CO 805037	or noon year ended.						
CONTACT PERSON	Irene McCaffrey							
PHONE	970-669-3611							
EMAIL	irenem@pcgi.com							
FAX	970-669-3612							
	CERTIFICA	TION OF	DDEDADE					
	CERTIFICA	CHON OF I	PREPAREI					
	ant with knowledge of governmental accounting and that the information olication if revenues or expenditure are at least \$100,000 but not more than				e that the Audit Law requires that a person			
NAME:	Irene McCaffrey							
TITLE	Senior Accounting Manager							
FIRM NAME (if applicable)	Pinnacle Consulting Group, Inc.							
ADDRESS	550 W. Eisenhower Blvd, Loveland, CO 80537							
PHONE	970-669-3611							
DATE PREPARED	3/1/2022							
RELATIONSHIP TO ENTITY	District Accountant							
PREPARER (SIGNATURE REQU	JIRED)							
June M. Coffs								
Has the entity filed for, or has the distri								
during the year? [Applicable to Title 32 104 (3), C.R.S.]	special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-		Ø	If Yes, date filed:				

DocuSign Envelope ID: 520FADB0-BC4E-439D-AA6E-88FEDD094D8B PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

Indicate Nar	ne of	Fund
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NOTE: At	ach additional sheets as necessary.	Name of Street	Governmental Funds		Proprietary/Fiduciary Funds	
				Description	Fund* Fund*	Please use this space to provide explanation of any
Line #	Description		General Fund*	Search		items on this page
	Assets			Assets		
1-1	Cash & Cash Equivalents	\$	- \$ -	Cash & Cash Equivalents	\$ - \$ -	
1-2	Investments	\$	- \$ -	Investments	\$ - \$ -	
1-3	Receivables	\$	- \$ -	Receivables	\$ - \$ -	
1-4	Due from Other Entities or Funds	\$	2,673 \$ -	Due from Other Entities or Funds	\$ - \$ -	
1-5	Property Tax Receivable	\$	174,123 \$ -	Other Current Assets [specify]	C C	
	All Other Assets [specify]			Total Comment Access	\$ - \$ - \$ - \$ -	
1-6		\$	- \$ -	Total Current Assets	THE CHARLES STATES OF THE SECOND STATES OF THE SECOND STATES OF THE SECOND STATES OF THE SECOND SECO	
1-7		\$	- \$ -	Capital Assets, net (from Part 6-4)	\$ - \$ -	
1-8		\$	- \$ -	Other Long Term Assets [specify]	Ψ - Ψ	
1-9		\$	- \$ -		\$ - \$ - \$ - \$	
1-10		\$	- \$ -	(add lines 1-1 through 1-10) TOTAL ASSETS	\$ - \$ -	
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS	\$	176,796 \$ -	(add lines 1-1 through 1-10) TOTAL ASSETS Deferred Outflows of Resources	3 - 3 -	
	Deferred Outflows of Resources			[specify]	\$ - \$ -	
1-12	[specify]	\$	- \$ - - \$ -	[specify]	\$ - \$ -	
1-13	[specify]	\$	- \$ -	[specify] (add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS		
1-14	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS		176,796 \$ -	TOTAL ASSETS AND DEFERRED OUTFLOWS		
1-15	Liabilities	Ф		Liabilities	A A COMPOSITION SHOULD RESERVE TO A A COMPOSITION CONTROL OF A SHARE	Į.
1-16	Accounts Payable	\$	- \$ -	Accounts Payable	\$ - \$ -	
1-17	Accrued Payroll and Related Liabilities	\$	- \$ -	Accrued Payroll and Related Liabilities	\$ - \$ -	
1-18	Unearned Property Tax Revenue	\$	- \$ -	Accrued Interest Payable	\$ - \$ -	
1-19	Due to Other Entities or Funds	\$	2,673 \$ -	Due to Other Entities or Funds	\$ - \$ -	
1-20	All Other Current Liabilities	\$	- \$ -	All Other Current Liabilities	\$ - \$ -	
1-21	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	\$ \$	2,673 \$ -	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	\$ - \$ -	
1-22	All Other Liabilities [specify]	\$	- \$ -	Proprietary Debt Outstanding (from Part 4-4)	\$ - \$ -	
1-23	360000 860000000 0000 0	\$	- \$ -	Other Liabilities [specify]:	\$ - \$ -	
1-24		\$	- \$ -		\$ - \$ -	
1-25		\$	- \$ -		\$ - \$ -	
1-26		\$	- \$ -		\$ - \$ -	
1-27	(add lines 1-21 through 1-26) TOTAL LIABILITIES	S \$	2,673 \$ -	(add lines 1-21 through 1-26) TOTAL LIABILITIES	- \$	
	Deferred Inflows of Resources			Deferred Inflows of Resources		1
1-28	Deferred Property Taxes	\$	174,123 \$ -	Pension Related	\$ - \$ -	
1-29	Other [specify]	\$	- \$ -	Other [specify]	\$ - \$ -	
1-30	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	S \$	174,123 \$ -	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	\$ - \$ -	
	Fund Balance			Net Position	6 6	٦
	Nonspendable Prepaid	\$	- \$ -	Net Investment in Capital Assets	\$ - \$ -]
	Nonspendable Inventory	\$	- \$ -	Emergency Pecenyes	\$ - \$ -	1
1-33	Restricted [specify]	\$	- \$ -	Emergency Reserves Other Designations/Reserves	\$ - \$ -	-
1-34	Committed [specify]	\$	- \$ -	Restricted	\$ - \$ -	-
1-35	Assigned [specify]	\$	- \$ - - \$ -	Undesignated/Unreserved/Unrestricted	\$ - \$ -	-
1-36	Unassigned:	\$	- \$ -		CONTRACTOR OF THE PROPERTY OF	
1-37	Add lines 1-31 through 1-30			Add lines 1-31 through 1-36 This total should be the same as line 3-33		
	This total should be the same as line 3-3: TOTAL FUND BALANCE			TOTAL NET POSITION		
4		Ψ	- \$ -			
1-38	Add lines 1-27, 1-30 and 1-3	MINING CHAP		Add lines 1-27, 1-30 and 1-37 This total should be the same as line 1-15		
	This total should be the same as line 1-19 TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND			TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET		
	BALANCE		176 706 \$	POSITION		
		Ф	176,796 \$ -			

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		Gover	nmental Fui	nds		Proprietar	y/Fiduciary Funds	Blace was this space to
Line #	Description	General Fund*		Fund*	Description	Fund* Fund*		Please use this space to provide explanation of any
	ax Revenue	Character (Source) (1997)			Tax Revenue			items on this page
2-1	Property [include mills levied in Question 10-6]	\$ 643,3	01 \$		Property [include mills levied in Question 10-6]	\$	- \$	
2-2	Specific Ownership	\$ 32,3	25 \$	-	Specific Ownership	\$	- \$	-
2-3	Sales and Use Tax	\$	- \$	-	Sales and Use Tax	\$	- \$	-
2-4	Other Tax Revenue [specify]:	\$	- \$	-	Other Tax Revenue [specify]:	\$	- \$	-
2-5		\$	- \$	-		\$	- \$	-
2-6		\$	- \$	-		\$	- \$	-
2-7		\$	- \$	-		\$	- \$	<u>-</u>
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ 675,6	\$26 \$		Add lines 2-1 through 2-7 TOTAL TAX REVENUE		- \$	
2-9	Licenses and Permits	\$	- \$	-	Licenses and Permits	\$	- \$	-
2-10	Highway Users Tax Funds (HUTF)	\$	- \$	-	Highway Users Tax Funds (HUTF)	\$	- \$	_
2-11	Conservation Trust Funds (Lottery)	\$	- \$	-	Conservation Trust Funds (Lottery)	\$	- \$	_
2-12	Community Development Block Grant	\$	- \$	-	Community Development Block Grant	\$	- \$	-
2-13	Fire & Police Pension	\$	- \$	-	Fire & Police Pension	\$	- \$	-
2-14	Grants	\$	- \$	-	Grants	\$	- \$	-
2-15	Donations	\$	- \$	-	Donations	\$	- \$	-
2-16	Charges for Sales and Services	\$	- \$	-	Charges for Sales and Services	\$	- \$	-
2-17	Rental Income	\$	- \$	-	Rental Income	\$	- \$	-
2-18	Fines and Forfeits	\$	- \$	-	Fines and Forfeits	\$	- \$	-
2-19	Interest/Investment Income	\$	- \$	-	Interest/Investment Income	\$	- \$	-
2-20	Tap Fees	\$	- \$	-	Tap Fees	\$	- \$	-
2-21	Proceeds from Sale of Capital Assets	\$	- \$	-	Proceeds from Sale of Capital Assets	\$	- \$	-
2-22	All Other [specify]:	\$	- \$	-	All Other [specify]:	\$	- \$	-
2-23	· · · · · · · · · · · · · · · · · · ·	\$	- \$	-		\$	- \$	
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES		\$26 \$		Add lines 2-8 through 2-23 TOTAL REVENUES		- \$	-
	Other Financing Sources				Other Financing Sources			
2-25	Debt Proceeds	\$	- \$	-1	Debt Proceeds	\$	- \$	_
2-26	Developer Advances	\$	- \$	-	Developer Advances	\$	- \$	-
2-27	Other [specify]:	\$	- \$	-	Other [specify]:	\$	- \$	-
2-28	Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES	\$	- \$		Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES		- \$	GRAND TOTALS
2-29	Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES		626 \$		Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$	- \$	- \$ 675,626

IF GRAND TOTAL REVENUES AND OTHER FINANCING SOURCES for all funds (Line 2-29) 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.

PART 3 - FINANCIAL STATEMENTS	 OPERATING STATEMEN 	T - EXPENDITURES/EXPENSES
-------------------------------	--	---------------------------

	Governmental Funds				Proprietary	/Fiduciary Funds	Please use this space to
ine#	Description	General	Fund*	Description	Fund*	Fund*	provide explanation of an
	Expenditures			Expenses			items on this page
3-1		\$ -	\$ -	General Operating & Administrative	\$	- \$	
3-2	Judicial	\$ -	\$ -	Salaries	\$	- \$	-
3-3	Law Enforcement	\$ -	\$ -	Payroll Taxes	\$	- \$	-
3-4	Fire		\$ -	Contract Services	\$	- \$	-
3-5	Highways & Streets	\$ -	\$ -	Employee Benefits	\$	- \$	-
3-6	Solid Waste	\$ -	\$ -	Insurance	\$	- \$	-
3-7	Contributions to Fire & Police Pension Assoc.		\$ -	Accounting and Legal Fees	\$	- \$	-
3-8	Health	\$ -	\$ -	Repair and Maintenance	\$	- \$	·-
3-9	Culture and Recreation	\$ -	\$ -	Supplies	\$	- \$	a -
3-10	Transfers to other districts	\$ 665,976	\$ -	Utilities	\$	- \$	-
3-11	Other [Treasurer's Fees]:	\$ 9,650		Contributions to Fire & Police Pension Assoc.	\$	- \$	-
3-12	<u> </u>		\$ -	Other [specify]	\$	- \$	-
3-13		7	\$ -		\$	- \$	-
3-14	Capital Outlay	\$ -	\$ -	Capital Outlay	\$	- \$	-
	Debt Service			Debt Service			
3-15	Principal (should match amount in 4-4)	\$ -		Principal (should match amount in 4-4)	\$	- \$	-
3-16	Interest	\$ -		Interest	\$	- \$	-
3-17	Bond Issuance Costs	T.	\$ -	Bond Issuance Costs	\$	- \$	-
3-18	Developer Principal Repayments		\$ -	Developer Principal Repayments	\$	- \$	
3-19	Developer Interest Repayments	T	\$ -	Developer Interest Repayments	\$	- \$	-
3-20	All Other [specify]:	T	\$ -	All Other [specify]:	\$	- \$	-
3-21		\$ -	\$ -		\$	- \$	- GRAND TOTAL
3-22	Add lines 3-1 through 3-21 TOTAL EXPENDITURES	\$ 675,626		Add lines 3-1 through 3-21 TOTAL EXPENSES		- \$	- \$ 675,620
3-23	Interfund Transfers (In)	\$ -	\$ -	Net Interfund Transfers (In) Out	\$	- \$	-
3-24	Interfund Transfers Out	\$ -	\$ -	Other [specify][enter negative for expense]	\$	- \$	-
3-25	Other Expenditures (Revenues):	\$ -	\$ -	Depreciation	\$	- \$	-
3-26	A	\$ -	\$ -	Other Financing Sources (Uses) (from line 2-28)	\$	- \$	-
3-27		\$ -	\$ -	Capital Outlay (from line 3-14)	\$	- \$	-
3-28		\$ -	\$ -	Debt Principal (from line 3-15, 3-18)	\$	- \$	-
3-29	(Add lines 3-23 through 3-28) TOTAL TRANSFERS AND OTHER EXPENDITURES	\$ -	\$	(Line 3-27, plus line 3-28, less line 3-26, less line 3-25, plus line 3-24) TOTAL GAAP RECONCILING ITEMS	\$	- \$	_
3-30	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures Line 2-29, less line 3-22, less line 3-29	\$ -	s	Net Increase (Decrease) in Net Position Line 2-29, less line 3-22, plus line 3-29, less line 3-23	\$	- \$	-
3-31	Fund Balance, January 1 from December 31 prior year report		\$	Net Position, January 1 from December 31 prior year report	\$	- \$	
	D. I. D. Ivol A. I. voto and (MIIOT applein)	\$ -		- Prior Period Adjustment (MUST explain)		- S	
	Prior Period Adjustment (MUST explain)	\$ -	\$		\$	- 3	-
3-33	Fund Balance, December 31			Net Position, December 31 Sum of Lines 3-30, 3-31, and 3-32			
	Sum of Lines 3-30, 3-31, and 3-32			This total should be the same as line 1-37.		- \$	

IP GRAND TOTAL EXPENDITURES for all funds (Line 3-22) 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.

Doci	uSign Envelope ID: 520FADB0-BC4E-439D-AA6E-88FEDD094D8B			
	PART 4 - DEBT OUTSTANDING	G, ISSUED,	AND RETIRED	
	Please answer the following questions by marking the appropriate boxes.	YES	NO	Please use this space to provide any explanations or comments:
4-1	Does the entity have outstanding debt?			
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 complete the following debt schedule, if applicable: (please only include principal beginning of year* lssued dur year	ring Retired durin	Outstanding at year-end	
	General obligation bonds \$ - \$	- \$	- \$ -	
	Revenue bonds \$ - \$	- \$	- \$ -	
	Notes/Loans \$ - \$	- \$	- \$ -	
	Leases \$ - \$		- \$ -	
	Developer Advances \$ - \$	T	- \$ -	
	Other (specify):		- \$ -	
	TOTAL \$ - \$		- \$ -	
-	Please answer the following questions by marking the appropriate boxes.	YES	NO	
4-5	Does the entity have any authorized, but unissued, debt [Section 29-1-605(2) C.R.S.]?	7		
	How much? \$ 135,832,954			
If yes:	Date the debt was authorized: 11/7/2017	_		
4-6	Does the entity intend to issue debt within the next calendar year?		V	
	How much?		☑	
	Does the entity have debt that has been refinanced that it is still responsible for?		<u>~</u>	
			☑	
	Does the entity have any lease agreements? What is being leased?			
ii yes.	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	DINVESTME	ENTS	
	Please provide the entity's cash deposit and investment balances.	AMOUNT	TOTAL	Please use this space to provide any explanations or comments:
	YEAR-END Total of ALL Checking and Savings accounts	\$	-	
5-2	Certificates of deposit	\$	-	
	TOTAL CASH DEPC	13113	-	
	Investments (if investment is a mutual fund, please list underlying investments):			
		\$	-	
5-3		\$	-	
• •		\$	-	
	TOTAL INVESTMI		\$ -	
	TOTAL INVESTMI		\$ -	
			THE RESERVE THE PARTY OF THE PA	
	Please answer the following question by marking in the appropriate box YES As the article level the second near with Section 24.75 604 et seq. C.R.S.2	NO	N/A	
5-4	Are the entity's investments legal in accordance with Section 24-75-601, et. seq., c.n.s.:			
5-5	Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-			
0.0	10.5-101, et seq. C.R.S.)? If no, MUST explain:			

Please answer the following question by marking in the appropriate box 6-1 Does the entity have capitalized 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,	Doc	suSign Envelope ID: 520FADB0-BC4E-439D-AA6E-88FEDD094D8B					
6-1 Does the entity have capitalized 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, MIUST exciain:			PART 6 -	CAPITAL	ASSETS		
4.4 Start entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.? If no, MUST explain: Balance		Please answer the following question by marking in the appropriate box			YES		Please use this space to provide any explanations or comments:
Additions Complete the following Capital Assets table for GOVERNIMENTAL FUNDS: Balance- beginning of the year i Buildings S - S - S - S - S - S - S - S - S - S	6-1	Does the entity have capitalized assets?				✓	
Complete the following Capital Assets table for GOVERNMENTAL FUNDS: Land S - \$ - \$ - \$ - \$ - \$ Buildings Machinery and equipment S - \$ - \$ - \$ - \$ - \$ Furniture and fixtures Infrastructure Construction in Progress (cip) Other (register): Land Buildings TOTAL Balance Buildings TOTAL Balance Buildings S - \$ - \$ - \$ - \$ - \$ S - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance Buildings Balance Buildings S - \$ - \$ - \$ - \$ - \$ Balance Buildings S - \$ - \$ - \$ - \$ Balance Buildings S - \$ - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance Buildings S - \$ - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance Buildings S - \$ - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance Buildings S - \$ - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance Buildings S - \$ - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance Buildings S - \$ - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance Buildings S - \$ - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance Buildings S - \$ - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance Buildings S - \$ - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance Buildings S - \$ - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance Buildings S - \$ - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance S - \$ - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance S - \$ - \$ - \$ - \$ Complete the following Capital Assets table for PROPRIETARY FUNDS: Balance S - \$ - \$ - \$ - \$ Complete the following Capital A	6-2		n Section 29-1-506, C.	R.S.? If no,			
Complete the following Capital Assets table for GOVERNMENTAL FUNDS: Land Buildings \$		WUST EXPIRIT.					
Land	6-3		Balance -				
Buildings Machinery and equipment Furniture and fixtures Infrastructure Construction In Progress (ciP) Other (explain): Land Buildings Machinery and equipment Land Buildings Machinery and equipment Furniture and fixtures S - S - S - S - S - S - S - S - S - S		Complete the following Capital Assets table for GOVERNMENTAL FUNDS:			Deletions	Year-End Balance	ce
Buildings Machinery and equipment SS-SS-SS-SS-SS-SS-SS-SS-SS-SS-SS-SS-SS-		Land	\$ -:	\$ -	\$ -	. \$	-
Furniture and fixtures Infrastructure Construction In Progress (cip) Other (explain): Accumulated Depreciation (Enter a negative, or credit, balance) TOTAL S - S - S - S - S - S - S - S - S - S			\$ - :	\$ -	\$ -	. \$	-
Infrastructure Construction in Progress (citP) Chef (explain): Accumulated Depreciation (Enter a negative, or credit, balance) Eaglance- beginning of the Buildings Machinery and equipment Furniture and fixtures Infrastructure Construction in Progress (citP) Construction in Progress (citP) Construction in Progress (citP) Construction (Enter a negative, or credit, balance) S			\$ - :	\$ -			-
Construction In Progress (cip) Other (explain): Accumulated Depreciation (Enter a negative, or credit, balance) FOTAL Complete the following Capital Assets table for PROPRIETARY FUNDS: Ealance - beginning of the Suidings - S - S - S - S - S - S - S - S - S -		Furniture and fixtures	\$ - :	\$ -	\$ -		-
Other (explain): Accumulated Depreciation (Enter a negative, or credit, balance) TOTAL TOTAL Balance - beginning of the year' Land Buildings Machinery and equipment Furniture and fixtures Infrastructure Construction In Progress (cip) Other (explain): Accumulated Depreciation (Enter a negative, or credit, balance) TOTAL S - S - S - S - S - S - S - S - S - S		Infrastructure	\$ - :	\$ -			-
Accumulated Depreciation (Enter a negative, or credit, balance) TOTAL S - S - S - S - S - S - S - S - S - S		Construction In Progress (CIP)					_
TOTAL \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$		Other (explain):		*	7		
Ealance - beginning of the year* Land Buildings Machinery and equipment Furniture and fixtures Infrastructure Construction In Progress (cip) Other (explain): Accumulated Depreciation (Enter a negative, or credit, balance) TOTAL Balance - beginning of the year* Additions Deletions Year-End Balance Year-End Balance Year-End Balance Year-End Balance - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -				\$ -			-
Complete the following Capital Assets table for PROPRIETARY FUNDS: Land		TOTAL	\$ -	\$ -	\$ -	- \$	-
Land			Balance -				
Land Buildings \$ - \$ - \$ - \$ - \$ Machinery and equipment \$ - \$ - \$ - \$ - \$ Furniture and fixtures Infrastructure \$ - \$ - \$ - \$ - \$ Construction In Progress (cip) Other (explain): Accumulated Depreciation (Enter a negative, or credit, balance) TOTAL TOTAL \$ - \$ - \$ - \$ - \$ * Must agree to prior year-end balance - Generally capital asset additions should be reported at capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy	6-4	Complete the following Capital Assets table for PROPRIETARY FUNDS:		Additions	Deletions	Year-End Balan	se l
Buildings Machinery and equipment Furniture and fixtures Infrastructure S - S - S - S - S - S - S - S - S - S							
Machinery and equipment Furniture and fixtures Infrastructure Construction In Progress (CIP) Other (explain): Accumulated Depreciation (Enter a negative, or credit, balance) TOTAL * Must agree to prior year-end balance - Generally capital asset additions should be reported at capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy							
Furniture and fixtures S			7	T	T	T	
Infrastructure S			7				
Construction In Progress (CIP) Other (explain): Accumulated Depreciation (Enter a negative, or credit, balance) TOTAL * Must agree to prior year-end balance * Must agree to prior year-end balance - Generally capital asset additions should be reported at capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy			-				
Other (explain): Accumulated Depreciation (Enter a negative, or credit, balance) * Must agree to prior year-end balance - Generally capital asset additions should be reported at capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy				T			
Accumulated Depreciation (Enter a negative, or credit, balance) S - S - S - S - TOTAL * Must agree to prior year-end balance - Generally capital asset additions should be reported at capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy					T		
* Must agree to prior year-end balance - Generally capital asset additions should be reported at capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy							
* Must agree to prior year-end balance - Generally capital asset additions should be reported at capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy							
- Generally capital asset additions should be reported at capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy		TOTAL	T	*	- \$ -	- \$	
PART 7 - PENSION INFORMATION			- Generally capital asset a	additions should be r	eported at capital ou ation policy. Please	utlay on line 3-14 and capit explain any discrepancy	alized
PART 7 - PENSION INI ORNIATION						M 178 E 184	
* YES NO Please use this space to provide any explanations or comments:			PART / - PE	NSION IIV		The same of the sa	Discount this country would are applications of the country of the
							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?					님		
If yes: Who administers the plan?	If yes:	Who administers the plan?			ш		
Indicate the contributions from:		Indicate the contributions from:					
Tax (property, SO, sales, etc.):		Tay (property SO sales etc.):	Γ	\$ -			
State contribution amount: \$ -			-				

TOTAL \$

Other (gifts, donations, etc.):

What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?

Doc	cuSign Envelope ID: 520FADB0-BC4E-439D-AA6E-88FEDD094D8B	IDGET INF	FORMATION		
	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:
0.4	Did the entity file a current year budget with the Department of Local Affairs, in accordance with				reduce due tillo opade to provide any explanations of comments
8-1	Section 29-1-113 C.R.S.? If no, MUST explain: Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.?	_	_	_	
	If no, MUST explain:	V			
If yes:	Please indicate the amount appropriated for each fund separately for the year reported				
	Governmental/Proprietary Fund Name Total Appropriat		4		
	General Fund \$	695,116	-		
	S S	-			
alet	PART 9 - TAX PAYE	R'S BILL (DE RIGHTS	(TABOR)	
	Please answer the following question by marking in the appropriate box	IVO DILL C	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)]?	7		
	Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent enguirement. All governments should determine if they meet this requirement of TABOR.				
	PART 10 - G	ENERAL II	NFORMATIC	N	
Ÿ.	Please answer the following question 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?			V	
If yes:	Date of formation:				
	Date of formation.				
10-2	Has the entity changed its name in the past or current year?			✓	
If Yes:	NEW name		7		
	NEW Halle		-		
	PRIOR name				
	Is the entity a metropolitan district?		✓		
10-4	Please indicate what services the entity provides:		٦		
	Sanitation/storm, streets, traffic & safety controls, parks & rec, transportation, mosquito control, security, covenant enforcement, v	water			
	Does the entity have an agreement with another government to provide services?				
ir yes.	List the name of the other governmental entity and the services provided: All services provided by Severance South Metropolitan District 1		٦		
40.0	Does the entity have a certified mill levy?				
	Please provide the number of mills levied for the year reported (do not enter \$ amounts):		ш		
, 00.	Bond Redemption mills 0.00				
	General/Other mills 50.0 Total mills 50.0		-		
A 73 C	Please use this space to provide any add		ions or comments	not previously in	ocluded:
	- Todos dos tino opuso to provide any add				

			STATE OF STATE	OSA USE ONI	-Y		
Entity Wide:		General Fund			Governmental Funds		Notes
Unrestricted Cash & Investments	S	- Unrestricted Fund Bala	n \$		Total Tax Revenue	S	675,626
Current Liabilities	S	2,673 Total Fund Balance	\$		Revenue Paying Debt Service	\$	
Deferred Inflow	S	174,123 PY Fund Balance	\$		Total Revenue	\$	675,626
Deletted Itiliow		Total Revenue	\$	675,626	Total Debt Service Principal	\$	
		Total Expenditures	S	675,626	Total Debt Service Interest	\$	
Governmental		Interfund In	\$				
Total Cash & Investments	\$	- Interfund Out	\$		Enterprise Funds		
Fransfers In	\$	- Proprietary			Net Position	\$	
Fransfers Out	\$	- Current Assets	\$		PY Net Position	\$	
Property Tax	\$	643,301 Deferred Outflow	\$		Government-Wide		
Debt Service Principal	\$	- Current Liabilities	\$		Total Outstanding Debt	\$	
Total Expenditures	\$	675,626 Deferred Inflow	\$	•	Authorized but Unissued	\$	135,832,954
Total Developer Advances	\$	- Cash & Investments	\$		Year Authorized		11/7/2017
Total Developer Repayments	\$	- Principal Expense	\$				

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		VERNING BODY			
Please answer the	following question by marking in the appropriate box		YES	NO 🗆	
12-1 If you plan to subn	nit this form electronically, have you read the new Electronic Signature Policy?		<u> </u>	Ц	
ffice of the State A	Auditor — Local Government Division - Exemption Form Elec	ctronic Signatures P	olicy and P	rocedures	
olicy - Requirements					
equired elements and safe The preparer of the applica f the governing body. The application must be a	ation is responsible for obtaining board signatures that comply with the requirement in ccompanied by the signature history document created by the electronic signature sof	n Section 29-1-604 (3), C.R.S.	that states the a	application shall b	e personally reviewed, approved, and signed by a majority of the members
	es the individual board members signed the document. The signature history must also staff will not coordinate obtaining signatures.	o show the individuals' emai	addresses and	P address.	
Submit the application in Submit the application el Include a copy of an adop	on from audit form created by our office includes a section for governing body approving hard copy via the US Mail including original signatures. ectronically via email and either, oted resolution that documents formal approval by the Board, or ures obtained through a software program such as Docusign or Echosign in accordance.			al and submit the	application through one of the following three methods:
is Application for Exemption	approval of the governing body By signing, each individual member is certifying they are a d i from Audit has been prepared consistent with Section 29-1-604, C.R.S., which states that a	governmental agency with rev	r of the local gove enue and expend	ernment. Governing itures of \$750,000 o	members may be verified. Also by signing, the individual member certifies that or less must have an application prepared by an independent accountant with
nowledge of governmental a	ccounting; completed to the best of their knowledge and is accurate and true. Use additional Print the names of ALL members of the governing body below.		ITY of the mem	hers of the gover	ning body must complete and sign in the column below.
	Full Name		iri or the mem		I am a duly elected or appointed board member, and that I have
1	Kris Picket	I, Kris Pickett personally reviewed an Signed My term Expires:			rain a duly elected of appointed board ineliner, and that reave temption 69/1101/2022 13:33:39 MST Date:
Production of the	Full Name	I. Lar Voss		attest th	at I am a duly elected or appointed board member, and that I have
2	Lar Voss				temption \$9/89/2022 15:28:58 PST
A CONTRACTOR OF	Full Name	I, Jana Picket		. attest tha	at I am a duly elected or appointed board member, and that I have
3	Jana Picket	personally reviewed an Signed	d approve this		
	Full Name	I. Eric McCarty		, attest tha	at I am a duly elected or appointed board member, and that I have
4	Eric McCarty	personally reviewed ar Signed	d approve this Ent McCarly lay 2023		Remption 39/789/200 22 12:45:33 PST Date:
	Full Name	1,		, attest th	nat I am a duly elected or appointed board member, and that I have
5		personally reviewed ar Signed	d approve this	application for ex	cemption from audit. Date:
		My term Expires:	y-add-ac-11		
	Full Name	l,		, attest ti	nat I am a duly elected or appointed board member, and that I have
6		personally reviewed ar Signed	d approve this	application for ex	xemption from audit. Date:
		My term Expires:			

Signed____ My term Expires:_

I, ______, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.

Date: _