DocuSign Envelope ID: 520FADB0-BC4E-439D-AA6E-88FEDD094D8B										
	APPLICATION FOR EXEMPTION FROM AUDIT									
	L	ONG FORI	M							
NAME OF GOVERNMENT	For the Year Ended									
ADDRESS	c/o Pinnacle Consulting Group, Inc	12/31/2021								
	550 W. Eisenhower Blvd									
	Loveland, CO 805037									
CONTACT PERSON										
PHONE	970-669-3611									
EMAIL	irenem@pcgi.com									
FAX	970-669-3612									
	CERTIFICA	TION OF F	PREPARE	₹						
	it with knowledge of governmental accounting and that the information ication 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 REQUI	RED)	网络山外东西 亚南	學學學學		· · · · · · · · · · · · · · · · · · ·					
Chillippy										
Has the entity filed for, or has the distric										
during the year? [Applicable to Title 32 states 104 (3), C.R.S.]	If Yes, date filed:									

*

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ndicate	Name of	Fund
---------	---------	------

NOTE: At	ach additional sheets as necessary.	Gove	rnmental F	unds		Proprietary/Fiduc	ciary Funds
(S. 10 S. 10)					Description	Fund*	Please use this space to provide explanation of any
Line #	Description	General		Debt Service	Description		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	\$	92 \$	369	Due from Other Entities or Funds	\$ - \$	
1-5	Property Tax Receivable	\$ 10	,956 \$	43,823	Other Current Assets [specify]	\$ - \$	
	All Other Assets [specify]	·	γ				
1-6		\$	- \$	S=	10	19, 126 sessociation statistical and property	GERMOGEN BERCHERHORE BETWEEN GERMONE BESCH
1-7		\$	- \$	-	Capital Assets, net (from Part 6-4)	\$ - \$ \$ - \$	
1-8		\$	- \$	-	Other Long Term Assets [specify]	\$ - \$ \$ - \$	
1-9		\$	- \$	-		\$ - \$	
1-10		\$	- \$	-	(add lines 1-1 through 1-10) TOTAL ASSETS		
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS	\$ 11	,048 \$	44,192	(add lines 1-1 through 1-10) TOTAL ASSETS Deferred Outflows of Resources	2 - 2	gegroungestimisters controlled = Total
	Deferred Outflows of Resources					\$ - \$	
1-12	[specify]		\$	-	[specify]	\$ - \$	
1-13	[specify]	\$	- \$		[specify] (add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS	7	
1-14	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS	\$	- \$ 1,048 \$	44,192	TOTAL ASSETS AND DEFERRED OUTFLOWS		
1-15	TOTAL ASSETS AND DEFERRED OUTFLOWS	ф magazinasina see Is	1,046 Φ		Liabilities	DANGER STEELINGSCHIEDERSEID DA	ACCOUNTS OF SIGNATURE ADDRESS AND ACCOUNTS
	Liabilities Accounts Payable	\$	- \$	- 1	Accounts Payable	\$ - \$; -
1-16 1-17	Accrued Payroll and Related Liabilities	\$	- \$	-	Accrued Payroll and Related Liabilities	\$ - \$	j -
1-17	Unearned Property Tax Revenue	\$	- \$	-	Accrued Interest Payable	\$ - \$	j -
1-10	Due to Other Entities or Funds	\$	92 \$	369	Due to Other Entities or Funds	\$ - \$	<i>-</i>
1-20	All Other Current Liabilities	\$	- \$	-	All Other Current Liabilities	\$ - \$; –
1-21	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	\$	92 \$	369	(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	• • • • • • • • • • • • • • • • • • • •	\$	- \$	-	Other Liabilities [specify]:	\$ - \$	
1-24		\$	- \$	-		\$ - \$	
1-25		\$	- \$	-		\$ - \$	<u> </u>
1-26		\$	- \$	-		\$ - \$	
1-27	(add lines 1-21 through 1-26) TOTAL LIABILITIES	\$	92 \$	369	(add lines 1-21 through 1-26) TOTAL LIABILITIES	\$ - \$	<u>) </u>
	Deferred Inflows of Resources				Deferred Inflows of Resources		<u> </u>
1-28	Deferred Property Taxes		0,956 \$	43,823	Pension Related	\$ - \$	
1-29	Other [specify]	\$	- \$	-	Other[specify]	\$ - \$ \$ - \$	
1-30	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	\$ 1	0,956 \$	43,823	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	<u> </u>	District the second control of the second co
	Fund Balance				Net Position Net Investment in Capital Assets	\$ - \$	\$ -
-5 (325 5)	Nonspendable Prepaid	\$	- \$	-	Net livestillent in Capital Assets	Ψ - Ψ	,
1-32	Nonspendable Inventory	\$	- \$ - \$	-	Emergency Reserves	\$ - \$	\$ -
1-33	Restricted [specify]	\$	- \$	-	Other Designations/Reserves	\$ - \$	
1-34	Committed [specify]	\$	- \$		Restricted	\$ - \$	·
1-35	Assigned [specify]	\$	- \$		Undesignated/Unreserved/Unrestricted	\$ - \$	-
1-36	Unassigned:		- Ψ		Add lines 1-31 through 1-36	COLUMN TO SERVICE DE LA COLUMN TO SERVICE DESTRUCCION TO SERVICE DESTRUCCION TO SERVICE DE LA COLUMN T	
1-37	Add lines 1-31 through 1-30 This total should be the same as line 3-3				This total should be the same as line 3-33		
	TOTAL FUND BALANCE		- \$		TOTAL NET POSITION		\$ -
1-38	Add lines 1-27, 1-30 and 1-3	- 4	- 5		Add lines 1-27, 1-30 and 1-37	CONTRACTOR OF THE PROPERTY OF	
1-30	Add lines 1-27, 1-30 and 1-3 This total should be the same as line 1-1				This total should be the same as line 1-15		
	TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND				TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET	r	
	BALANCI		1,048 \$	44,192	POSITION	\$ - \$	\$ -

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

	•		Governmen	tal Funds		Proprietary/F	iduciary Funds		
Line#	Description		General	Debt Service	Description	Fund*	Fund*	Please use this space to provide explanation of any	
	Tax Revenue	of Englishment of Street, Street, St.	A SANDERS OF THE SAND		Tax Revenue			items on this page	
2-1	Property [include mills levied in Question 10-6]	\$	30,286	\$ 121,143	Property [include mills levied in Question 10-6]	\$ -	\$	- CARLESTON STOLEN STOLEN	
2-2	Specific Ownership	\$	1,114	\$ 4,454	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		\$	-	\$ -		\$ -	\$	_	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE		31,400	\$ 125,597	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 (нитг)	\$ -	. \$	-	
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	\$ -	- \$	<u>- </u>	
2-17	Rental Income	\$	-	\$ -	Rental Income	\$ -	- \$		
2-18	Fines and Forfeits	\$	-	\$ -	Fines and Forfeits	\$.	- \$	<u>-</u>	
2-19	Interest/Investment Income	\$	125	\$ 503	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]:	Ψ	- \$	_	
2-23		\$	-	\$ -	6	Ψ	- \$	-	
2-24	Add lines 2-8 through 2-2: TOTAL REVENUES		31,525	\$ 126,100	Add lines 2-8 through 2-23 TOTAL REVENUES		- \$	-	
	Other Financing Sources				Other Financing Sources				
2-25	Debt Proceeds	\$	-	\$ -	Debt Proceeds	\$	- \$	-	
2-26	Developer Advances	\$	-	\$ -	Developer Advances	\$	- \$	-	
2-27	Other [specify]:	\$	-	\$ -	Other [specify]:	\$	- \$	-	
2-28	Add lines 2-25 through 2-2' TOTAL OTHER FINANCING SOURCES			\$ -	Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES		- \$	GRAND TOTALS	
2-29	Add lines 2-24 and 2-2: TOTAL REVENUES AND OTHER FINANCING SOURCES	8	31,525	\$ 126,100	Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ 1000000000000000000000000000000000000	- \$	- \$ 157,625	

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 STATEMENT - EXPENDITURES/EXPENSES

		Governmental Funds				Propr	ietary/Fiduciary Funds	Please use this space to	
Line #	Description	General Debt Service			e	Description	Fund* Fund*		provide explanation of any
Line #	Expenditures				-	Expenses			items on this page
3-1	General Government	\$	-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	\$	- \$ -	
3-10	Transfers to other districts	\$	31,069	\$ 124	,275	Utilities	\$	- \$ -	
3-11	Other [Treasurer's Fees]:	\$	456	\$ 1	,825	Contributions to Fire & Police Pension Assoc.	\$	- \$ -	
3-12		\$	-	\$	-	Other [specify]	\$	- \$ -	4
3-13		\$	-	\$	-		\$	- \$ -	
3-14	Capital Outlay	\$	-	\$	-	Capital Outlay	\$	- \$ -	
0-14	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	\$	-	\$	-	Bond Issuance Costs	\$	- \$ -	
3-18	Developer Principal Repayments	\$	-	\$	-	Developer Principal Repayments	\$	- \$	
3-19	Developer Interest Repayments	\$	-	\$	-	Developer Interest Repayments	\$	- \$	
3-20	All Other [specify]:	\$		\$	-	All Other [specify]:	\$	- \$	
3-21	, in Carto. [open,jin].	\$		\$	-		\$	- \$	GRAND TOTAL
3-22	Add lines 3-1 through 3-21 TOTAL EXPENDITURES		31,525	\$ 126	5,100	Add lines 3-1 through 3-21 TOTAL EXPENSES	\$	- \$	\$ 157,625
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	\$	- \$	<u>-</u>
3-26	to the second se	\$	-	\$	-	Other Financing Sources (Uses) (from line 2-28)	\$	- \$	-
3-27		\$	-	\$	-	Capital Outlay (from line 3-14)	\$	- \$	<u>-</u>
3-28		\$	-	\$	-	Debt Principal (from line 3-15, 3-18)	\$	- \$	-
3-29	(Add lines 3-23 through 3-28) TOTAL TRANSFERS AND OTHER EXPENDITURES			\$	<u> </u>	(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					Net Increase (Decrease) in Net Position Line 2-29, less line 3-22, plus line 3-29, less line 3-23	s	- 8	
	Line 2-29, less line 3-22, less line 3-29	\$		\$	_	Net Position, January 1 from December 31 prior year	<u> </u>		_
3-31	Fund Balance, January 1 from December 31 prior year report	\$	-	\$	_	report	\$	- \$	_
3-32	Prior Period Adjustment (MUST explain)	\$	-	\$	_	Prior Period Adjustment (MUST explain)	\$	- \$	-
	Fund Balance, December 31 Sum of Lines 3-30, 3-31, and 3-32					Net Position, December 31 Sum of Lines 3-30, 3-31, and 3-32			
	This total should be the same as line 1-37.	\$		\$		This total should be the same as line 1-37.	\$	- \$	

IF 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.

Do	ocuSign Envelope ID: 520FADB0-BC4E-439D-AA6E-88FEDD094D8B				
	PART 4 - DEBT OUTSTAN	DING, IS	SUED, A	AND RETIRED	
	Please answer the following questions by marking the appropriate boxes.		YES	NO	Please use this space to provide any explanations or comments:
	Does the entity have outstanding debt? Is the debt repayment schedule attached? If no, MUST explain:				
- 1	Is the entity current in its debt service payments? If no, MUST explain:				
4-5	is the chary current in the description payments in my more appropriate				
4-4	Flease Complete the following debt somedate, it approaches (please only metate primerpa.	ed during Re	etired during year	Outstanding at year-end	
	General obligation bonds \$ - \$ Revenue bonds \$ - \$ Notes/Loans \$ - \$ Leases \$ - \$ Developer Advances \$ - \$ Other (specify): \$ - \$	- \$ - \$ - \$	-	\$ - \$ - \$ -	
	*must agree to prior year ending	g balance			
	Please answer the following questions by marking the appropriate boxes. Does the entity have any authorized, but unissued, debt [Section 29-1-605(2) C.R.S.]? How much? \$ 135,832,954		YES	NO 🗆	
f yes: 4-6	Date the debt was authorized: Does the entity intend to issue debt within the next calendar year?			v	
4-7	How much? Does the entity have debt that has been refinanced that it is still responsible for? What is the amount outstanding?			\square	
4-8	What is the amount outstanding? Does the entity have any lease agreements? What is being leased?			V	
ıı 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? \$ -				
1/2	PART 5 - CASH	AND INV	ESTME	NTS	
	Please provide the entity's cash deposit and investment balances.		AMOUNT	TOTAL	Please use this space to provide any explanations or comments:
5-1 5-2	YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit TOTAL CASH	\$ DEBOSITS		\$ -	
	Investments (if investment is a mutual fund, please list underlying investments):	\			
5-3		3	-		
5-5		9			
	TOTAL INV	/ESTMENTS		\$ - \$ -	
	Please answer the following question 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.?	7			
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:	7			

Do	ocuSign Envelope ID: 520FADB0-BC4E-439D-AA6E-88FEDD094D8B			7207127-1-101			
5)VI)		PART 6 -	CAPITAL A	ASSETS			
	Please answer the following question by marking in the appropriate box			YES	NO	Ple	ase use this space to provide any explanations or comments:
6-1	Does the entity have capitalized assets?				7		
6-2	Has the entity performed an annual inventory of capital assets in accordance with	Section 29-1-506, C.F	R.S.? If no,				
-	MUST explain:		1				
6-3		Balance -	Additions		Year Fool Boll	27722	
	Complete the following Capital Assets table for GOVERNMENTAL FUNDS:	beginning of the	2	Deletions	Year-End Bal	ance	
		year 1	-	œ	- \$		
		\$ - \\$ \$ - \\$			- \$ - \$	-	
	Buildings Machinery and equipment	\$ - \$		Т	- \$	-	
	Furniture and fixtures	\$ - \$		· ·	- \$	-	
	Infrastructure	\$ - 9		•	- \$	-	
	Construction In Progress (CIP)	\$ - \$			- \$	-	
	Other (explain):	\$ - 9		T	- \$ - \$	-	
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ - 9				-	
	TOTAL		-	\$	- \$	-	
	A CONTRACTOR OF THE PROPERTY FUNDS	Balance -	6 delisione	Deletions	Year-End Bal	lance	
6-4	Complete the following Capital Assets table for PROPRIETARY FUNDS:	beginning of the year*	Additions	Deletions	Tear-Ellu Bai	alice	
	Land	\$ - \$	- 8	\$	- \$	-	
	Buildings	\$ - 5	-		- \$	-	
	Machinery and equipment	\$ - 5		-	- \$	-	
	Furniture and fixtures	\$ - 5		*	- \$ - \$		
	Infrastructure	\$ - S			- \$ - \$		
	Construction In Progress (CIP) Other (explain):	\$ - 5			- S	-	
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ - 5			- \$	-	
	TOTAL	\$ - 5	\$ -	\$	- \$	-	
		* Must agree to prior year-				!!-!!!	
		- Generally capital asset as in accordance with the gov	dditions should be rep vernment's capitalizati	orted at capital on policy. Please	e explain any discrepance	apitalized Y	
						31	
(F)		PART 7 - PEI	<u>NSION INF</u>	ORMAT	ION		
				YES	NO	Ple	ease use this space to provide any explanations or comments:
7-1	Does the entity have an "old hire" firefighters' pension plan?		2		7		
7-2	Does the entity have a volunteer firefighters' pension plan?						
If yes:	Who administers the plan?			Ш			
	Indicate the contributions from:						
	Tax (property, SO, sales, etc.):	Г	\$ -				
	State contribution amount:	-	\$ -				
		1	\$ -				
	Other (gifts, donations, etc.):	TOTAL					
		The second second second second	\$ - \$ -				
	What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?	L	φ -				

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A VINE		PART 8 - BU	DGET INF	ORMATION		
Pleas	se answer the following question by marking in the appropriate box		YES	NO	N/A	Please use this space to provide any explanations or comments:
o d Did t	the entity file a current year budget with the Department of Local Affairs, in acc	cordance with	Ø			
Section 5	ion 29-1-113 C.R.S.? If no, MUST explain: the entity pass an appropriations resolution in accordance with Section 29-1-1	08 C.R.S.?	⊡			
o-2 If no.	, MUST explain:				_	
yes: Pleas	se indicate the amount appropriated for each fund separately for the year repo					
	Governmental/Proprietary Fund Name	Total Appropriation	ons By Fund 31,608			
		\$	126,100			
Dent		\$	-			
		\$				
HEAL	PART 9	- TAX PAYE	R'S BILL C	F RIGHTS	(TABOR)	
Plea	se 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 th	e entity in compliance with all the provisions of TABOR [State Constitution, Ar	rticle X, Section 20(5)]?	Ø		
Note:	An election to exempt the government from the spending limitations of TABOR does not exempt the government. All governments should determine if they meet this requirement of TABOR.	nment from the 3 percent em	ergency reserve			
requir	F	PART 10 - GE	NERAL IN	FORMATIC	N	
Plea	ise 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 th	is application for a newly formed governmental entity?					
f yes:						
Date	e of formation:					
10-2 Has	the entity changed its name in the past or current year?				v	
f Yes: NEV	Vinamo					
NEV	v Hame					
PRIC	OR name					
10-3 Is th	ne entity a metropolitan district?			· Ø		
	ase indicate what services the entity provides:			1		
	tation/storm, streets, traffic & safety controls, parks & rec, transportation, mosquito control, security,	covenant enforcement, wa	ater			
10-5 Doe	s 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:					
All s	services provided by Severance South Metropolitan District 1					
	es the entity have a certified mill levy?					
If yes: Plea	ase provide the number of <u>mills</u> levied for the year reported (do not enter \$ amo	ounts):		1		
	Bond Redemption mills General/Other mills	0.000 50.00				
	Total mills	50.00				
ASSESS OF	Please use this space t	o provide any addit	ional explanation	ons or comments	not previously in	cluded:
Committee on Laboratory						

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THE REPORT OF THE PARTY OF THE	SALE ALL DESCRIPTION		THE RESERVE OF	OSA USE ON	LY		
Entity Wide:		General Fund			Governmental Funds		Notes
Inrestricted Cash & Investments	S	- Unrestricted Fund Bala	1 \$		Total Tax Revenue	\$	156,997
Current Liabilities	S	461 Total Fund Balance	\$		Revenue Paying Debt Service	\$	
Deferred Inflow	S	54,779 PY Fund Balance	\$		Total Revenue	\$	157,625
cicited iiiiiow		Total Revenue	\$	31,525	Total Debt Service Principal	\$	
		Total Expenditures	\$	31,525	Total Debt Service Interest	\$	
Sovernmental		Interfund In	\$	-			
otal Cash & Investments	\$	- Interfund Out	\$		Enterprise Funds		
ransfers In	s	- Proprietary			Net Position	S	
ransfers Out	\$	- Current Assets	\$		- PY Net Position	\$	
Property Tax	\$	151,429 Deferred Outflow	\$		- Government-Wide		
Debt Service Principal	\$	- Current Liabilities	\$		- Total Outstanding Debt	\$	
Total Expenditures	S	157,625 Deferred Inflow	\$		- Authorized but Unissued	\$	135,832,954
Total Developer Advances	s	- Cash & Investments	\$		- Year Authorized		11/7/2017
Total Developer Repayments	s	- Principal Expense	\$				

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PART 12 - GOVERNING BODY APPROVAL										
Please answer	the following question by marking in the appropriate box		ES	NO						
	submit this form electronically, have you read the new Electronic Signature Policy?									
Office of the Stat	te Auditor — Local Government Division - Exemption Form Elec	ctronic Signatures Po	licy and Prod	edures						
olicy - Requirements	i.									
Required elements and The preparer of the ap of the governing body. The application must be arties, and include the Office of the State Auc The application for exert) Submit the application. Include a copy of an application and accopy of an application electronic significant and accopy of an application and accopy of an application.	Auditor Local Government Audit Division may accept an electronic submission of an applic safeguards are as follows: plication is responsible for obtaining board signatures that comply with the requirement in the accompanied by the signature history document created by the electronic signature soft dates the individual board members signed the document. The signature history must also ditor staff will not coordinate obtaining signatures. Imption from audit form created by our office includes a section for governing body approved in hard copy via the US Mail including original signatures. In electronically via email and either, adopted resolution that documents formal approval by the Board, or gnatures obtained through a software program such as Docusign or Echosign in accordance.	n Section 29-1-604 (3), C.R.S., t ftware. The signature history d to show the individuals' email a val. Local governing boards no ce with the requirements noted	hat states the appi ocument must sho iddresses and IP a ote their approval a I above.	lication shall be pow when the docur ddress. and submit the app	ersonally reviewed, approved, and signed by a majority of the members ment was created and when the document was emailed to the various plication through one of the following three methods:					
his Application for Exem	and approval of the governing body. By signing, each individual member is certifying they are a c ption from Audit has been prepared consistent with Section 29-1-604, C.R.S., which states that a stal accounting; completed to the best of their knowledge and is accurate and true. Use additional	governmental agency with rever	of the local governmore and expenditure	nent. Governing me es of \$750,000 or le	embers may be verified. Also by signing, the individual member certifies that ess must have an application prepared by an independent accountant with					
and the second s	Print the names of <u>ALL</u> members of the governing body below.		<u>TY</u> of the member	s of the governir	ng body must complete and sign in the column below.					
1	Full Name Kris Pickett	I, Kris Pickett personally reviewed and Signed knic My term Expires: May			m a duly elected or appointed board member, and that I have aption from 2022 13:33:39 MST late:					
	Full Name	I, Lar Voss		, attest that	I am a duly elected or appointed board member, and that I have					
	Lar Voss		√oss	olication for exem	nption 139/189/121022 15:28:58 PST Date:					
	Full Name	I,Jana Pickett			am a duly elected or appointed board member, and that I have					
	Jana Pickett	personally reviewed and SignedMa term Expires:Ma	approve this app y 2022		nption from audit. Date:					
CONTRACTOR OF THE	Full Name	I, Eric McCarty		, attest that I	am a duly elected or appointed board member, and that I have					
4	Eric McCarty	personally reviewed and Signed Fric M My term Expires		olication for exen	nption from audit Date: 3/8/2022 12:45:33 PST					
	Full Name	<u> </u>		. attest that	I am a duly elected or appointed board member, and that I have					
5		personally reviewed and Signed My term Expires:		olication for exen						
6	Full Name	I, personally reviewed and Signed My term Expires:	approve this app	olication for exer	I am a duly elected or appointed board member, and that I have aption from audit. Date:					
7	Full Name	I,	approve this app	olication for exen	I am a duly elected or appointed board member, and that I have mption from audit. Date:					