# **APPLICATION FOR EXEMPTION FROM AUDIT**

LONG FORM

Eastern Hills Metropolitan District No.4 NAME OF GOVERNMENT **ADDRESS** 

c/o White Bear Ankele & Tanaka, P.C.

2154 E Commons Ave., Suite 2000

Centennial, CO 80122 Clint Waldron

303-858-1800

EMAIL cwaldron@wbapc.com FAX

For the Year Ended 12/31/2020 or fiscal year ended:

## **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:

PHONE

**CONTACT PERSON** 

Diane K Wheeler TITLE District Accountant Simmons & Wheeler, P.C.

FIRM NAME (if applicable) **ADDRESS** 304 Inverness Way South, Suite 490 Englewood, CO 80112

303-689-0833 PHONE DATE PREPARED Mar 22, 2021

RELATIONSHIP TO ENTITY

CPA engaged to prepare financial statements for the District

PREPARER (SIGNATURE REQUIRED)

Diane Wheeler

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
	<b>⊠</b>

If Yes, date filed:

# PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

\* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

NOTE: A	ttach additional sheets as necessary.	Governme	ental Funds	1	Proprietary/Fiduciary Funds		
Line #	Description	General Fund	Fund*	Description	Fund*	Fund*	Please use this space to provide explanation of any
	Assets			Assets		•	items on this page
1-1	Cash & Cash Equivalents	\$ 930	\$ -	Cash & Cash Equivalents	\$ -	\$	-
1-2	Investments	\$ 686,935	\$ -	Investments	\$ -	\$	
1-3	Receivables	\$ 161,355	\$ -	Receivables	\$ -	\$	
1-4	Due from Other Entities or Funds	\$ 2,950	\$ -	Due from Other Entities or Funds	\$ -	\$	_
	All Other Assets [specify]			Other Current Assets	\$ -	\$	
1-5	Pepaid insurance	\$ 2,042	\$ -	Total Current Assets	\$ -	\$	-
1-6		\$ -	\$ -	Capital Assets, net (from Part 6-4)	\$ -	\$	
1-7		\$ -	\$ -	Other Long Term Assets [specify]	\$ -	\$	
1-8		\$ -	\$ -		\$ -	\$	-
1-9		\$ -	\$ -		\$ -	\$	
1-10		\$ -	\$ -		\$ -	\$	
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS		-	(add lines 1-1 through 1-10) TOTAL ASSETS	•	\$	_]
1-12	TOTAL DEFERRED OUTFLOWS OF RESOURCES	-	\$ -	TOTAL DEFERRED OUTFLOWS OF RESOURCES		\$	_]
1-13	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ 854,212	\$ -	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$ -	\$	
	Liabilities			Liabilities			_
1-14	Accounts Payable	\$ 752		Accounts Payable	•	\$	-
1-15	Accrued Payroll and Related Liabilities	\$ -	\$ -	Accrued Payroll and Related Liabilities		\$	<u>-</u>
1-16	Accrued Interest Payable	\$ -	\$ -	Accrued Interest Payable		\$	<u>-</u>
1-17	Due to Other Entities or Funds	\$ -	\$ -	Due to Other Entities or Funds		\$	<u>-</u>
1-18	All Other Current Liabilities	\$ -	\$ -	All Other Current Liabilities		\$	<u>-</u>
1-19	TOTAL CURRENT LIABILITIES		1 '	TOTAL CURRENT LIABILITIES	*	\$	·_
1-20	All Other Liabilities [specify]		7	Proprietary Debt Outstanding (from Part 4-4)		\$	<u>-</u>
1-21		\$ -	\$ -	Other Liabilities [specify]:	·	\$	<u>-</u>
1-22		\$ -	\$ -		\$ -	1 *	<u>.</u>
1-23		\$ -	\$ -		\$ -	1 *	<u>-</u>
1-24		\$ -	\$ -		\$ -	\$	<u>-</u>
1-25		\$ -	\$ -		\$ -	\$	<u>-</u>
1-26		\$ -	\$ -		\$ -	\$	<u>-</u>
1-27		\$ -	\$ -		\$ -	•	<u>-</u>
1-28	(add lines 1-19 through 1-27) TOTAL LIABILITIES			(add lines 1-19 through 1-27) TOTAL LIABILITIES	·	1 *	<u>-</u>
1-29	TOTAL DEFERRED INFLOWS OF RESOURCES	\$ 161,355		TOTAL DEFERRED INFLOWS OF RESOURCES	\$ -	\$	·
	Fund Balance			Net Position			_
	Nonspendable Prepaid		\$ -	Net Investment in Capital Assets	\$ -	\$	·
	Nonspendable Inventory	\$ -	\$ -		-		_
1-32	Restricted [specify]	\$ -	\$ -	Emergency Reserves	\$ -	\$	<u>-</u>
1-33	Committed [specify]	\$ -	\$ -	Other Designations/Reserves	\$ -	\$	<u>-</u>
1-34	Assigned [specify]	\$ -	\$ -	Restricted	\$ -	\$	긔
1-35	Unassigned:	\$ 692,105	-	Undesignated/Unreserved/Unrestricted	\$ -	\$	긔
1-36	Add lines 1-30 through 1-35			Add lines 1-30 through 1-35			
	This total should be the same as line 3-33			This total should be the same as line 3-33			
	TOTAL FUND BALANCE	Ψ 002,100	\$ -	TOTAL NET POSITION	\$ -	\$	<u>-</u> ]
1-37	Add lines 1-28, 1-29 and 1-36			Add lines 1-28, 1-29 and 1-36			
	This total should be the same as line 1-13			This total should be the same as line 1-13			
	TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND			TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET			
	BALANCE	\$ 854,212	-	POSITION	\$ -	\$	-

## PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		Governmental Funds			Proprietary/Fiduciary Funds		Discourse this second
Line #	Description	General Fund	Fund*	Description	Fund*	Fund*	Please use this space to provide explanation of any
Т	ax Revenue			Tax Revenue			items on this page
2-1	Property [include mills levied in Question 10-6]	\$ 602,896	\$ -	Property [include mills levied in Question 10-6]	\$ -	\$ -	
2-2	Specific Ownership	\$ 42,724	\$ -	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	\$ 645,620	\$ -	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)	\$ -	\$ -	1
2-11	Conservation Trust Funds (Lottery)	\$ -	\$ -	Conservation Trust Funds (Lottery)	\$ -	\$ -	1
2-12	Community Development Block Grant	\$ -	\$ -	Community Development Block Grant	\$ -	\$ -	1
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	\$ 2,064	\$ -	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	\$ 647,684	\$ -	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 2-27 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	\$ 647,684		Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ -	\$ -	\$ 647,684

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								
		Governme	ental Funds		Proprietary/F	iduciary Funds	Please use this space to		
Line #	Description	General Fund	Fund*	Description	Fund*	Fund*	provide explanation of any		
	Expenditures			Expenses			items on this page		
3-1	General Government	\$ 14,695		General Operating & Administrative	\$ -	\$	-		
3-2	Judicial	\$ -	\$ -	Salaries	\$ -	\$	<u>-</u>		
3-3	Law Enforcement	\$ -	\$ -	Payroll Taxes	\$ -	Ψ	<u>-</u>		
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	\$ -	\$ -	Utilities	\$ -	\$	-		
3-11	Other [specify]:	\$ -	\$ -	Contributions to Fire & Police Pension Assoc.	\$ -	\$	-		
3-12		\$ -	\$ -	Other [specify]	\$ -	\$	-		
3-13		\$ -	\$ -		\$ -	\$	-		
3-14	Capital Outlay	\$ -	\$ -	Capital Outlay	\$ -	\$	-		
	Debt Service			Debt Service		'	_		
3-15	Principal	\$ -	-	Principal	\$ -	\$	-		
3-16	Interest	\$ -	\$ -	Interest	\$ -	\$	-		
3-17	Bond Issuance Costs	\$ -	\$ -	Bond Issuance Costs	\$ -	\$	-1		
3-18	Developer Principal Repayments	\$ -	\$ -	Developer Principal Repayments	\$ -	\$			
3-19	Developer Interest Repayments	\$ -	\$ -	Developer Interest Repayments	\$ -	\$			
3-20	All Other [specify]:	\$ -	\$ -	All Other [specify]:	\$ -	1	-		
3-21		\$ -	\$ -		\$ -	\$	- GRAND TOTAL		
	Add lines 3-1 through 3-21		,	Add lines 3-1 through 3-21	<u> </u>	1			
3-22	TOTAL EXPENDITURES	\$ 14,695	\$ -	TOTAL EXPENSES	\$ -	\$	- \$ 14,695		
3-23	Interfund Transfers (In)	\$ -	\$ -	Net Interfund Transfers (In) Out	\$ -	, ·	_		
3-24	Interfund Transfers Out	\$ -	\$ -	Other [specify][enter negative for expense]	\$ -	\$	<u>-</u>		
3-25	Other Expenditures (Revenues):	\$ -	- \$	Depreciation	\$ -	\$	-		
3-26		\$ -	- \$	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 3-26, plus line 3-27, less line 3-24, less line 3-25) TOTAL GAAP RECONCILING ITEMS	\$ -				
2 22		<b>a</b> -	-		<b>5</b> -	\$	-		
3-30	Excess (Deficiency) of Revenues and Other Financing			Net Increase (Decrease) in Net Position Line 2-29, less line 3-22, plus line 3-29, plus line 3-23, less					
	Sources Over (Under) Expenditures	\$ 632.989	_	line 3-24	•	•			
	Line 2-29, less line 3-22, plus line 3-29	\$ 632,989	\$ -	line 3-24	\$ -	\$	<u>-</u>		
2 24	Fund Balance, January 1 from December 31 prior year			Net Position, January 1 from December 31 prior year					
3-31	report	¢ 50.440		report	•	•			
		\$ 59,116	1	- <u> </u>	\$ -	+*	-		
	Prior Period Adjustment (MUST explain)	\$ -	\$ -	Prior Period Adjustment (MUST explain)	\$ -	\$	_		
3-33	Fund Balance, December 31			Net Position, December 31					
	Sum of Line 3-30, 3-31, and 3-32	• • • • • • • • • • • • • • • • • • • •		Line 3-30 plus line 3-31					
	This total should be the same as line 1-36.	\$ 692,105	\$ -	This total should be the same as line 1-36.	\$ -	\$	-		

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.

	PART 4 - DE	BT OUTSTAN	DING, ISSUED,	AND RETIRED	
	Please answer the following questions by marking the appropr	riate boxes.	YES	NO	Please use this space to provide any explanations or comments:
4-1 4-2	Does the entity have outstanding debt? 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:				
4-4	5 (p	•	- \$ - - \$ - - \$ - - \$ - - \$ -	Outstanding at year-ends \$ \$ \$ \$ \$ \$ \$ \$ \$	d
	*mus	st agree to prior year ending b	alance		_
4-7 If yes: 4-8		29,113,000,000   22002 & 11/2/2004   -	YES	NO G	
	P.F	ART 5 - CASH	AND INVESTME	ENTS	
	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit  Investments (if investment is a mutual fund, please list underlying investments):	TOTAL CASH E	### AMOUNT   \$ 930	* 930	Please use this space to provide any explanations or comments:
5-3	Colotrust		\$ 686,935 \$ - \$ -		
		TOTAL INVE		\$ 686,935	
		OTAL CASH AND INVE		\$ 687,865	5
5-4	Please answer the following question by marking in the appropriate box  Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.F.		YES NO	N/A	
5-5	Are the entity's deposits in an eligible (Public Deposit Protection Act) public deposit 11-10.5-101, et seq. C.R.S.)? If no, MUST explain:		- -	-	

		PART	6 - CAPITA	L ASSETS		
	Please answer the following question 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?				□	
6-2	Has the entity performed an annual inventory of capital assets in accordance w MUST explain:	vith Section 29-1-50	6, C.R.S.? If no,	Ø		
		Balance -				I
6-3	Complete the following Capital Assets table for GOVERNMENTAL FUNDS:	beginning of the year*	Additions	Deletions	Year-End Balance	
	Land			- \$ -		
	Buildings		\$ -	Ψ		
	Machinery and equipment		\$ -	Ψ		
	Furniture and fixtures Infrastructure		\$ - \$ -	1		
	Construction In Progress (CIP)		\$ -   \$ -	-		$\forall$
	Other (explain):		\$ -			
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	1 2		_
	TOTAL	\$ -	\$ -	. \$ -	\$ -	7
		Balance -	<u> </u>		•	
6-4	Complete the following Capital Assets table for PROPRIETARY FUNDS:	beginning of the	Additions	Deletions	Year-End Balance	
0-4	complete the following cupital receits table for the thin 1711 to the c.	year*	Additions	Deletions	rear-Ena Dalance	
	Land		\$ -	- \$ -	\$ -	
	Buildings		\$ -	\$ -		
	Machinery and equipment	\$ -	\$ -	- \$ -	\$ -	
	Furniture and fixtures		\$ -	- \$ -		
	Infrastructure		\$ -	Ψ		
	Construction In Progress (CIP)		\$ -	Ψ		
	Other (explain):		\$ -	Ψ		-
	Accumulated Depreciation (Enter a negative, or credit, balance)	<u> </u>	\$ -	Ψ	<u>'</u>	-
	TOTAL	1 1		- \$ -	\$ -	
		*must agree to prior ye	ar ending balance			
		PART 7 F	PENSION IN	NFORMATION	ON	
	Please answer the following question 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" firemen's pension plan?					
	Does the entity have a volunteer firemen's pension plan?			-	_	
	Who administers the plan?			<del>-</del>	_	
	Indicate the contributions from:			_		
	Tax (property, SO, sales, etc.):		\$ -			
	State contribution amount:		\$ -	. ]		
	Other (gifts, donations, etc.):		\$ -			
	Other (girts, donations, etc.):		φ -	. [		

TOTAL \$

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

	DAD	FO DUDCET IN	EODMATIO	NI	
		Γ8 - BUDGET IN			
	Please answer the following question by marking in the appropriate box  Did the entity file a current year budget with the Department of Local Affairs, in accordance	YES	NO	N/A	Please use this space to provide any explanations or comments:
8-1	Section 29-1-113 C.R.S.? If no, MUST explain:	e with			
8-2	Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S	S.?	п		
	If no, MUST explain:	<del>-</del>	_	u u	
If yes:	Please indicate the amount budgeted for each fund for the year reported				
		Expenditures/Expenses			
	General Fund \$	706,779			
	3   5	-			
	\$	-			
	PART 9 - TA	( 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,				
	government from the 3 percent emergency reserve requirement. All governments should d	etermine if they meet this			
	PART	10 - GENERAL II	NFORMATI	ON	
	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?		0	☑	riodo do tino opaco to provide any explanatione of commente.
If yes:	Date of formation:				
10-2	Has the entity changed its name in the past or current year?			<b>2</b>	
If Yes:	NEW name				
	PRIOR name				
10-3	Is the entity a metropolitan district?		. ⊠		
10-4	Please indicate what services the entity provides:				
	Streets, Water, Traffic Control, Sewer, Parks & Recreation				
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:				
	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 enter \$ amounts):				
	Bond Redemption mills  General/Other mills	0.000 70.000			
	Total mills	70.000			
	Please use this space to provide	any additional explanat	ions or comment	s not previou <u>sly ir</u>	ncluded:

OSA USE ONLY							
Entity Wide:		General Fund		Governmental Funds			Notes
Unrestricted Cash & Investments	\$	687,865 Unrestricted Fund Balan	\$	692,105 Total Tax Revenue	\$	645,620	
Current Liabilities	\$	752 Total Fund Balance	\$	692,105 Revenue Paying Debt Service	\$	-	
Deferred Inflow	\$	161,355 PY Fund Balance	\$	59,116 Total Revenue	\$	647,684	
		Total Revenue	\$	647,684 Total Debt Service Principal	\$	-	
		Total Expenditures	\$	14,695 Total Debt Service Interest	\$	-	
Governmental		Interfund In	\$				
Total Cash & Investments	\$	687,865 Interfund Out	\$	- Enterprise Funds			
Transfers In	\$	- Proprietary		Net Position	\$	-	
Transfers Out	\$	- Current Assets	\$	- PY Net Position	\$	-	
Property Tax	\$	602,896 Deferred Outflow	\$	- Government-Wide			
Debt Service Principal	\$	- Current Liabilities	\$	- Total Outstanding Debt	\$		
Total Expenditures	\$	14,695 Deferred Inflow	\$	- Authorized but Unissued	\$	29,113,000,000	
Total Developer Advances	\$	- Cash & Investments	\$	- Year Authorized		11/5/2002 & 11/2/2004	
Total Developer Repayments	\$	- Principal Expense	\$				

## PART 12 - 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?		

#### Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures 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 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.

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, each 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 revenue and expenditures of \$750,000 or less 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 the names of ALL members of the governing body below.	A MAJORITY of the members of the governing body must complete and sign in the column below.
1	Full Name Steven Cohen	I,Steven Cohen, 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.  Signed
2	Full Name  Jonathan Alpert	I,Jonathan Alpert, 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.  Signed Date: My term Expires:May 2023
3	Full Name  Marc Cooper	I,Marc Cooper, 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.  Signed Marc Cooper Date: Mar 22, 2021  My term Expires:Mau 2022
4	Full Name	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.  Signed Date: My term Expires:
5	Full Name	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.  Signed Date: My term Expires:
6	Full Name	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.  Signed Date: My term Expires:
7	Full Name	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.  Signed  My term Expires:

# Eastern Hills MD #4 2020

## Interim Agreement Report

2021-03-30

Created: 2021-03-22

By: Diane Wheeler (diane@simmonswheeler.com)

Status: Out for Signature

Transaction ID: CBJCHBCAABAAYAFw1T47NxhjT7tR-ZfKgniHG5XTRDbI

### Agreement History

Agreement history is the list of the events that have impacted the status of the agreement prior to the final signature. A final audit report will be generated when the agreement is complete.

# "Eastern Hills MD #4 2020" History

- Document created by Diane Wheeler (diane@simmonswheeler.com) 2021-03-22 7:29:44 PM GMT- IP address: 208.187.187.252
- Document emailed to Diane Wheeler (diane@simmonswheeler.com) for signature 2021-03-22 7:31:25 PM GMT
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