

April 19, 2023

Moses Garcia, Esq. City of Loveland 500 East 3<sup>rd</sup> Street, Suite 330 Loveland, Colorado 80537 (Via Email: *Stephanie.Cardew@cityofloveland.org*)

Office of the State Auditor 1525 Sherman Street, 7<sup>th</sup> Floor Denver, Colorado 80203 (Via E-Portal)

Division of Local Government 1313 Sherman Street Room 521 Denver, Colorado 80203 (Via E-Portal)

Larimer County Clerk and Recorder Larimer County Colorado P.O. Box 1280 Fort Collins, Colorado 80522 (*Via Email: recording@larimer.org*)

### **Re: Supplement to Annual Report for Eagle Brook Meadows Metropolitan Districts** No. 2

To Whom It May Concern:

Enclosed for your information and records is a copy of the 2022 Application for Exemption from Audit (the "Application") for Eagle Brook Meadows Metropolitan District No. 2 (the "District"). This Application is being submitted pursuant to Section i of the District's 2022 Annual Report that was submitted on March 1, 2023. At the time of submitting the 2022 Annual Report, the Application was not yet available. The 2022 Audits for Eagle Brook Meadows Metropolitan District Nos. 1 and 3 will be submitted upon completion.

Should you have any questions regarding the enclosed, please do not hesitate to contact our office.

Sincerely,

ICENOGLE SEAVER POGUE A Professional Corporation

*Alexandra L. Moore* Alexandra L. Moore, Esq.

| ONE       970-669-3611         AlL       amandac@pcgi.com         CERTIFICATION OF PREPARER         Intrify 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 expendent 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.         ME:       Amanda Castle         LE       District Accountant         MINAME (if applicable)       Pinnacle Consulting Group, Inc         DRESS       550 W Eisenhower Blvd         ONE       970-669-3611   |                                     | APPLICATION F  |                        |                          | TAUDII  |  |
|--|-------------------------------------|--|------------------------|--------------------------|---|--|
| DRESS       C/O Pinnacle Consulting Group, Inc       12/31/2022       or fiscal year ended:         NTACT PERSON       Amanda Castle       0 </th <th></th> <th></th> <th>LONG FORM</th> <th>Λ</th> <th></th> <th></th>  |                                     |  | LONG FORM              | Λ                        |   |  |
| Image: specific difference of the specific d                                  |                                     |  |                        |                          |   | For the Year Ended                       |
| Loveland, CO 80537       Amanda Castle       Other State         ONE       970-669-3611       State       State         All       amandac@pcgi.com       CERTIFICATION OF PREPARER       State         rtify 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 pendent 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.         ME:       Amanda Castle       District Accountant         UN NAME (if applicable)       Plinnacle Consulting Group, Inc         DRESS       550 W Elsenhower Blvd         ONE       970-669-3611         TE PREPARED       2/28/2023         LATIONSHIP TO ENTITY       District Accountant         REPARED       2/28/2023         LATIONSHIP TO ENTITY       District Accountant         We applied for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status       YES       NO         sthe entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status       YES       NO         ing the year?       If Yes, date filed:       If Yes, date filed:  | DDRESS                              |  |                        |                          |   | 12/31/2022                               |
| NTACT PERSON Amanda Castle 970-669-3611 Al. amandac@pcgl.com CERTIFICATION OF PREPARER  Trify 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 perso appendent 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.  ME: L Mamada Castle District Accountant MNAME (# applicable) NPINABLE Consulting Group, Inc NRAME (# applicable) NESS 550 W Eisenhower Bivd 970-689-3811 ET PREPARED 2228/2023 LATIONSHIP TO ENTITY District Accountant REPAREM CIGNATURE REQUIRED  Attended to fr, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status YES NO If Yes, date filed:  |                                     |  |                        |                          |   | or fiscal year ended:                    |
| ONE       970-689-3611<br>amandac@pcgi.com         AlL       amandac@pcgi.com         CERTIFICATION OF PREPARER         Introperation 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.         Mi:       Amanda Castle         District Accountant       District Accountant         MNAME (if applicable)       Pinnacle Consulting Group, Inc         DRESS       550 W Elsenhower Blvd         SONE       970-669-3611         12728/2023       1         ALTONSHIP TO ENTITY       District Accountant         REPARED       2728/2023         ATTONSHIP TO ENTITY       District Motice of Inactive Status         YES       NO         at the entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status       YES         Wath of fight be to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1       If Yes, date filed:   |                                     |  |                        |                          |   |  |
| AlL amanda@pcgi.com  CERTIFICATION OF PREPARER   ritify 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 pendent 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.  ME:  Amanda Castle  LE  District Accountant  MAME (if applicable)  For Note and Castle  For Note Accountant  REPARED  ZZ82023  LATIONSHIP TO ENTITY  District Accountant  REPARER (SIGNATURE REQUIRED)  Amanda Castle  State entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status  State war? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1  | ONTACT PERSON                       | Amanda Castle  |                        |                          |   |  |
| CERTIFICATION OF PREPARER  | IONE                                | 970-669-3611   |                        |                          |   |  |
| In the part of the entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status ing the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-   | IAIL                                | amandac@pcgi.com   |                        |                          |   |  |
| apendent 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.  ME: LE Amanda Castle District Accountant Pinnacle Consulting Group, Inc 550 W Eisenhower Blvd 970-669-3611 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/ |                                     | CERTIFIC   | ATION OF F             | REPARE                   | 2   |  |
| apendent 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.  ME: LE Amanda Castle District Accountant Pinnacle Consulting Group, Inc 550 W Eisenhower Blvd 970-669-3611 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/2023 2/28/202 2/28/ | ertify that I am an independent ac  | countant with knowledge of governmental accounting and that the informati        | on in the Application  | s complete and a         | ccurate to the best of my knowledge. I am aware | that the Audit Law requires that a perso |
| LE District Accountant MNAME (if applicable) DRESS DRESS DRESS DRESS DRESS DRESPARED Z728/2023 LATIONSHIP TO ENTITY District Accountant  EPARER (SIGNATURE REQUIRED)  Attribute the district filed, a Title 32, Article 1 Special District Notice of Inactive Status ing the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1- I If Yes, date filed:   | ependent of the entity complete the | e application if revenues or expenditure are at least \$100,000 but not more th  | an \$750,000, and tha  | t independent mea        | ans someone who is separate from the entity.    |  |
| MNAME (if applicable)       Pinnacle Consulting Group, Inc         DRESS       550 W Eisenhower Blvd         ONE       970-669-3611         TE PREPARED       2/28/2023         LATIONSHIP TO ENTITY       District Accountant         REPARER (SIGNATURE REQUIRED)         Yes NO         If Yes, date filed:   | AME:                                | Amanda Castle  |                        |                          |   |  |
| DRESS       550 W Eisenhower Blvd         ONE       970-669-3611         TE PREPARED       2/28/2023         LATIONSHIP TO ENTITY       District Accountant         REPARER (SIGNATURE REQUIRED)         W Monto Description of the district filed, a Title 32, Article 1 Special District Notice of Inactive Status ing the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-   | ΓLE                                 | District Accountant  |                        |                          |   |  |
| DRESS       550 W Eisenhower Blvd         ONE       970-669-3611         TE PREPARED       2/28/2023         LATIONSHIP TO ENTITY       District Accountant         REPARER (SIGNATURE REQUIRED)         W Monto Description of the district filed, a Title 32, Article 1 Special District Notice of Inactive Status ing the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-   | RM NAME (if applicable)             | Pinnacle Consulting Group, Inc   |                        |                          |   |  |
| ONE 970-669-3611<br>ITE PREPARED 2/28/2023<br>LATIONSHIP TO ENTITY District Accountant<br>REPARER (SIGNATURE REQUIRED)<br>A monoble of the district filed, a Title 32, Article 1 Special District Notice of Inactive Status YES NO<br>ing the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-  | DRESS                               |  |                        |                          |   |  |
| TE PREPARED       2/28/2023         District Accountant         REPARER (SIGNATURE REQUIRED)         Image: State entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status ing the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-  | ONE                                 |  |                        |                          |   |  |
| LATIONSHIP TO ENTITY District Accountant   | TE PREPARED                         |  |                        |                          |   |  |
| REPARER (SIGNATURE REQUIRED)         Jmondo       Output         s the entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status ing the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-   |                                     |  |                        |                          |   |  |
| Jamoba Outcome         s the endty filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status         YES         NO         ing the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-   |                                     |  |                        |                          |   |  |
| ing the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-  | INEL ANEL (SIGNATURE)               | REQUIRED)  | than the Report Mary M | uter a north a second at |   |  |
| ing the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-  | Imanda                              | astra  |                        |                          |   |  |
|  |                                     | district filed, a Title 32, Article 1 Special District Notice of Inactive Status |                        | NO                       |   |  |
|  |                                     | tle 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-     |                        |                          | If Yes, date filed:                             |  |
|  | , (J), C.N.J.                       |  |                        |                          |   |  |
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## DocuSign Envelope ID: 17402267-BC33-43F8-99D0-4C2AAD8B5EA6 PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

\* Indicate Name of Fund

| NOTE: A | ttach additional sheets as necessary.                   |  |                 |   |        | Proprioton/Fiducio    | n Eundo                               |                            |
|---------|---|--|-----------------|---|--------|-----------------------|---------------------------------------|----------------------------|
|         |   | Governmer                              | ntal Funds      |   |        | Proprietary/Fiducia   | ry Funds                              | Please use this space to   |
| Line #  | Description   | General                                | Debt Service    | Description   |        | Fund*                 | Fund*                                 | provide explanation of any |
|         |   |  |                 |   |        |                       |                                       | 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                        |  | \$ -            | Due from Other Entities or Funds                        | \$     | - \$                  | -                                     | 8                          |
| 1-5     | Property Tax Receivable                                 | \$ 99,238                              | \$ 330,786      | Other Current Assets [specify]                          |        |                       |                                       |                            |
|         | All Other Assets [specify]                              |  |                 |   | \$     | - \$                  | -                                     | -                          |
| 1-6     | Lease Receivable (as Lessor)                            |  | \$ -            | Total Current Assets                                    | \$     | - \$                  |                                       |                            |
| 1-7     |   |  | \$ -            | Capital & Right to Use Assets, net (from Part 6-4)      | \$     | - \$                  | -                                     |                            |
| 1-8     |   |  | \$ -            | Other Long Term Assets [specify]                        | \$     | - \$                  | -                                     |                            |
| 1-9     |   |  | \$ -            |   | \$     | - \$                  | -                                     |                            |
| 1-10    |   |  | \$ -            |   | \$     | - \$                  | -                                     |                            |
| 1-11    | (add lines 1-1 through 1-10) TOTAL ASSETS               | \$ 99,238                              | \$ 330,786      | (add lines 1-1 through 1-10) TOTAL ASSETS               | \$     | - \$                  | - 10 -                                |                            |
|         | Deferred Outflows of Resources:                         |  |                 | Deferred Outflows of Resources                          |        |                       |                                       |                            |
| 1-12    | [specify]   | \$ -                                   | \$ -            | [specify]   | \$     | - \$                  | -                                     |                            |
| 1-13    | [specify]   | \$ -                                   | \$ -            | [specify]   | \$     | - \$                  | -                                     |                            |
| 1-14    | (add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS   | \$ -                                   | \$ -            | (add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS   | \$     | - \$                  | - 10 - 10 - 10 <del>-</del> 1         |                            |
| 1-15    | TOTAL ASSETS AND DEFERRED OUTFLOWS                      |  | \$ 330,786      | TOTAL ASSETS AND DEFERRED OUTFLOWS                      | \$     | - \$                  |                                       |                            |
|         | Liabilities   |  |                 | Liabilities   |        |                       |                                       |                            |
| 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                          | \$ -                                   | \$ -            | 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 | \$ -                                   | \$ -            | (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    |   | \$ -                                   | \$ -            |   | \$     | - \$                  |                                       |                            |
| 1-26    |   | \$ -                                   | \$ -            |   | \$     | - \$                  | -                                     |                            |
| 1-27    | (add lines 1-21 through 1-26) TOTAL LIABILITIES         | \$ -                                   | \$              | (add lines 1-21 through 1-26) TOTAL LIABILITIES         | \$     | - \$                  |                                       |                            |
|         | Deferred Inflows of Resources:                          | ······································ |                 | Deferred Inflows of Resources                           |        |                       |                                       | 7                          |
| 1-28    | Deferred Property Taxes                                 | \$ 99,238                              | \$ 330,786      | Pension/OPEB Related                                    | \$     | - \$                  | -                                     |                            |
| 1-29    | Lease related (as lessor)                               | \$ -                                   | \$ -            | Other [specify]   | \$     | - \$                  | -                                     |                            |
| 1-30    | (add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS    | \$ 99,238                              | \$ 330,786      | (add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS    | \$     | - \$                  | - 100000                              |                            |
|         | Fund Balance  |  |                 | Net Position  |        |                       |                                       | -                          |
| 1-31    | Nonspendable Prepaid                                    | \$-                                    | \$-             | Net Investment in Capital Assets                        | \$     | - \$                  | -                                     | ]                          |
| 1-32    | Nonspendable Inventory                                  | \$-                                    | \$ -            |   |        |                       |                                       | -                          |
| 1-33    | Restricted [specify]                                    | \$-                                    | \$-             | Emergency Reserves                                      | \$     | - \$                  | -                                     | _                          |
| 1-34    | Committed [specify]                                     | \$ -                                   | \$ -            | Other Designations/Reserves                             | \$     | - \$                  | -                                     | _                          |
| 1-35    | Assigned [specify]                                      | \$ -                                   | \$-             | Restricted  | \$     | - \$                  | -                                     | -                          |
| 1-36    | Unassigned:   | \$ -                                   | \$ -            | Undesignated/Unreserved/Unrestricted                    | \$     | - \$                  | -                                     | -                          |
| 1-37    | Add lines 1-31 through 1-36                             |  |                 | Add lines 1-31 through 1-3                              | 6      | LA CALL REAL PROPERTY |                                       |                            |
|         | This total should be the same as line 3-33              |  | A Barris of the | This total should be the same as line 3-3               | 3      |                       |                                       |                            |
|         | TOTAL FUND BALANCE                                      | s -                                    | \$ -            | TOTAL NET POSITION                                      | ۹<br>۲ | - \$                  |                                       |                            |
| 1-38    | Add lines 1-27, 1-30 and 1-37                           |  |                 | Add lines 1-27, 1-30 and 1-3                            | 7      |                       |                                       |                            |
|         | This total should be the same as line 1-15              | and the second                         |                 | This total should be the same as line 1-1               |        |                       |                                       |                            |
|         | TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND           |  |                 | TOTAL LIABILITIES, DEFERRED INFLOWS, AND NE             |        |                       |                                       |                            |
|         | BALANCE   | \$ 99,238                              | \$ 330,786      | POSITIO   | \$     | - \$                  |                                       |                            |
|         |   |  |                 |   |        |                       | 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 |                            |

# DocuSign Envelope ID: 17402267-BC33-43F8-99D0-4C2AAD8B5EA6 PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

|     |   |    | Governme  | ntal F | unds         |   | Proprietary | /Fiduciary Funds | Discourse this succession                            |
|-----|---|----|-----------|--------|--------------|---|-------------|------------------|--|
| ie# | Description   | (  | General   | E      | Debt Service | Description   | Fund*       | Fund*            | Please use this space to<br>provide explanation of a |
| Г   | ax Revenue  |    |           |        | •            | Tax Revenue   |             |                  | items on this page                                   |
| -1  | Property [include mills levied in Question 10-6]                    | \$ | 59,993    | \$     | 199,977      | Property [include mills levied in Question 10-6]                      | \$          | - \$             | -  |
| -2  | Specific Ownership  | \$ | 4,292     | \$     | 14,306       | Specific Ownership  | \$          | - \$             | -  |
| -3  | Sales and Use Tax   | \$ | -         | \$     | -            | Sales and Use Tax   | \$          | - \$             | -  |
| -4  | Other Tax Revenue [specify]:  | \$ | -         | \$     | -            | Other Tax Revenue [specify]:  | \$          | - \$             | -  |
| -5  |   | \$ | -         | \$     | -            |   | \$          | - \$             | -  |
| -6  |   | \$ | -         | \$     | -            |   | \$          | - \$             | -  |
| -7  |   | \$ | -         | \$     | -            |   | \$          | - \$             | -  |
| -8  | Add lines 2-1 through 2-<br>TOTAL TAX REVENU                        |    | 64,285    | \$     | 214,283      | Add lines 2-1 through 2-7<br>TOTAL TAX REVENUE                        | \$          | - \$             | -  |
| -9  | Licenses and Permits  | \$ | -         | \$     | -            | Licenses and Permits  | \$          | - \$             | -  |
| 10  | Highway Users Tax Funds (HUTF)                                      | \$ | -         | \$     | -            | Highway Users Tax Funds (HUTF)  | \$          | - \$             | -  |
| 11  | Conservation Trust Funds (Lottery)                                  | \$ | -         | \$     | -            | Conservation Trust Funds (Lottery)                                    | \$          | - \$             | -  |
| -12 | Community Development Block Grant                                   | \$ | -         | \$     | -            | Community Development Block Grant                                     | \$          | - \$             | -  |
| -13 | Fire & Police Pension   | \$ | -         | \$     | -            | Fire & Police Pension   | \$          | - \$             | -  |
| 14  | Grants  | \$ | -         | \$     | -            | Grants  | \$          | - \$             | -  |
| 15  | Donations   | \$ | -         | \$     | -            | Donations   | \$          | - \$             | -  |
| 16  | Charges for Sales and Services                                      | \$ | -         | \$     | -            | Charges for Sales and Services  | \$          | - \$             | -  |
| 17  | Rental Income   | \$ | -         | \$     | -            | Rental Income   | \$          | - \$             | -  |
| 18  | Fines and Forfeits  | \$ | -         | \$     | -            | Fines and Forfeits  | \$          | - \$             | -  |
| -19 | Interest/Investment Income  | \$ | 4         | \$     | 15           | Interest/Investment Income  | \$          | - \$             | -  |
| -20 | Tap Fees  | \$ | -         | \$     | -            | Tap Fees  | \$          | - \$             | -  |
| 21  | Proceeds from Sale of Capital Assets                                | \$ | -         | \$     | -            | Proceeds from Sale of Capital Assets                                  | \$          | - \$             | -  |
| -22 | All Other [specify]:  | \$ | -         | \$     | -            | All Other [specify]:  | \$          | - \$             | -  |
| 23  |   | \$ | -         | \$     | -            |   | \$          | - \$             | -  |
| -24 | Add lines 2-8 through 2-2<br>TOTAL REVENUE                          |    | 64,289    | \$     | 214,298      | Add lines 2-8 through 2-23<br>TOTAL REVENUES                          | \$          | - \$             | -  |
|     | Other Financing Sources   |    |           |        |              | Other Financing Sources   |             |                  |  |
| 25  | Debt Proceeds   | \$ | -         | \$     | -            | Debt Proceeds   | \$          | - \$             | -  |
| 26  | Lease Proceeds  | \$ | -         | \$     | -            | Lease Proceeds  | \$          | - \$             | -  |
| -27 | Developer Advances  | \$ | -         | \$     | -            | Developer Advances  | \$          | - \$             | -  |
| -28 | Other [specify]:  | \$ | -         | \$     | -            | Other [specify]:  | \$          | - \$             | -  |
| 29  | Add lines 2-25 through 2-2<br>TOTAL OTHER FINANCING SOURCE          |    | - Sec Sec | \$     |              | Add lines 2-25 through 2-28<br>TOTAL OTHER FINANCING SOURCES          | \$          | - \$             | GRAND TOTALS   |
| 30  | Add lines 2-24 and 2-2<br>TOTAL REVENUES AND OTHER FINANCING SOURCE | 29 | 64,289    |        | 214,298      | Add lines 2-24 and 2-29<br>TOTAL REVENUES AND OTHER FINANCING SOURCES |             | - \$             | - \$ 278,  |

## DocuSign Envelope ID: 17402267-BC33-43F8-99D0-4C2AAD8B5EA6 PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES

|      |  |                       | Governmen                           | ntal Funds   |         |  | Pro | oprietary/Fic | luciary Funds | Please use this space to  |
|------|--|-----------------------|-------------------------------------|--|---------|--|-----|---------------|---------------|---------------------------|
| ne # | Description  | Ge                    | neral                               | Debt Ser   | vice    | Description  | F   | und*          | Fund*         | provide explanation of an |
|      | Expenditures   | and the second second | a new restored in the second second | and the second |         | Expenses   |     |               |               | items on this page        |
| 3-1  | General Government   | \$                    | 63,089                              | \$   | -       | General Operating & Administrative   | \$  | -             |               |                           |
| 3-2  | Judicial   | \$                    | -                                   | \$   | -1      | Salaries   | \$  | -             |               | -                         |
| 3-3  | Law Enforcement  | \$                    | <b>H</b>                            | \$   | -       | Payroll Taxes  | \$  | -             |               | -                         |
| 3-4  | Fire   | \$                    | -                                   | \$   | -       | Contract Services  | \$  | -             |               | -                         |
| 3-5  | Highways & Streets   | \$                    | -                                   | \$   | -       | Employee Benefits  | \$  | -             |               | -                         |
| 8-6  | Solid Waste  | \$                    |                                     | \$   | -       | Insurance  | \$  | -             |               | -                         |
| 3-7  | Contributions to Fire & Police Pension Assoc.              | \$                    | -                                   | \$   | -       | Accounting and Legal Fees  | \$  | -             |               | -                         |
| 8-8  | Health   | \$                    |                                     | \$   | -       | Repair and Maintenance   | \$  | -             |               | -                         |
| 3-9  | Culture and Recreation                                     | \$                    |                                     | \$   | -       | Supplies   | \$  |               | \$            | <u> </u>                  |
| -10  | Transfers to other districts                               | \$                    | -                                   |  | -       | Utilities  | \$  | -             |               | -                         |
| -11  | Other [specify]:   | \$                    | -                                   |  | -       | Contributions to Fire & Police Pension Assoc.  | \$  |               | \$            | -                         |
| -12  |  | \$                    | -                                   |  | -       | Other [specify]  | \$  |               | \$            | -                         |
| -13  |  | \$                    | -                                   |  | -       |  | \$  |               | \$            | -                         |
| -14  | Capital Outlay   | \$                    | -                                   | \$   | -       | Capital Outlay   | \$  | -             | \$            | -                         |
|      | Debt Service   |                       |                                     |  |         | Debt Service   | •   |               | •             |                           |
| -15  | Principal (should match amount in 4-4)                     | \$                    | -                                   |  | -       | Principal (should match amount in 4-4)   | \$  |               | \$            | -                         |
| -16  | Interest   | \$                    | -                                   |  | -       | Interest   | \$  |               | \$            | -                         |
| -17  | Bond Issuance Costs  | \$                    |                                     | \$   | -       | Bond Issuance Costs  | \$  |               | \$            | -                         |
| -18  | Developer Principal Repayments                             | \$                    |                                     | \$   | -       | Developer Principal Repayments   | \$  |               | \$            | -                         |
| -19  | Developer Interest Repayments                              | \$                    | -                                   |  | -       | Developer Interest Repayments  | \$  |               | \$            | -                         |
| -20  | All Other [specify]:                                       | \$                    |                                     | \$   | -       | All Other [specify]:   | \$  |               | \$            | - GRAND TOTAL             |
| -21  | Treasurer's Fees   | \$                    | 1,200                               | \$   | 4,000   | Add lines 0.4 through 0.04   | \$  | -             | \$            | - GRAND TOTAL             |
| -22  | Add lines 3-1 through 3-21<br>TOTAL EXPENDITURES           |                       | 64,289                              | \$   | 4,000   | Add lines 3-1 through 3-21<br>TOTAL EXPENSES   | \$  |               | \$            | - \$ 68,28                |
| -23  | Interfund Transfers (In)                                   | \$                    | -                                   | \$   | -       | Net Interfund Transfers (In) Out   | \$  |               | \$            | -                         |
| -24  | Interfund Transfers Out                                    | \$                    | -                                   | \$   | -       | Other [specify][enter negative for expense]  | \$  | -             |               | -                         |
| -25  | Other Expenditures (Revenues):                             | \$                    | -                                   | \$   | -       | Depreciation/Amortization  | \$  | -             |               | -                         |
| -26  | Payment for Debt Service to District No 3                  | \$                    | -                                   | \$ 2   | 210,298 | Other Financing Sources (Uses) (from line 2-28)  | \$  |               | \$            |                           |
| -27  |  | \$                    | -                                   | \$   | -       | Capital Outlay (from line 3-14)  | \$  | ,             | \$            |                           |
| -28  |  | \$                    | -                                   | \$   | -       | Debt Principal (from line 3-15, 3-18)  | \$  | -,            | \$            |                           |
| -29  | (Add lines 3-23 through 3-28) TOTAL                        |                       |                                     |  |         | (Line 3-27, plus line 3-28, less line 3-26, less line 3-25,  |     |               |               |                           |
|      | TRANSFERS AND OTHER EXPENDITURES                           | \$                    | -                                   | \$ 2   | 210,298 | plus line 3-24) TOTAL GAAP RECONCILING ITEMS   | \$  | - // // -     | \$            |                           |
| 3-30 | Excess (Deficiency) of Revenues and Other Financing        |                       |                                     |  |         | Net Increase (Decrease) in Net Position  |     |               |               |                           |
|      | Sources Over (Under) Expenditures                          |                       |                                     |  |         | Line 2-29, less line 3-22, plus line 3-29, less line 3-23  |     | 10.000        |               |                           |
|      | Line 2-29, less line 3-22, less line 3-29                  | \$                    | -                                   | \$   | - 11    | ,  | \$  | -             | \$            | -                         |
|      |  |                       |                                     |  |         | Net Position, January 1 from December 31 prior year  |     |               |               |                           |
| -31  | Fund Balance, January 1 from December 31 prior year report |                       |                                     |  |         | report   |     |               | •             |                           |
|      |  | \$                    | -                                   | \$   | -       |  | \$  | -             | \$            | -                         |
| 3-32 | Prior Period Adjustment (MUST explain)                     | \$                    |                                     | \$   | -       | Prior Period Adjustment (MUST explain)   | \$  | -             | \$            | -                         |
| 3-33 | Fund Balance, December 31                                  | Sold as               |                                     |  |         | Net Position, December 31  |     |               |               |                           |
|      | Sum of Lines 3-30, 3-31, and 3-32                          |                       |                                     |  |         | Sum of Lines 3-30, 3-31, and 3-32  |     | 11/17/14/14   |               |                           |
|      | This total should be the same as line 1-37.                | \$                    |                                     | \$   | -       | This total should be the same as line 1-37.<br>ot use this form. An audit may be required. See Section 29- | \$  | -             | \$            | -                         |

(303) 869-3000 for assistance.

|                                  | ivelope ID: 17402267-BC33-43F8-99D0-4C2AAD8B5EA6<br>PART 4 - DEBT OUT  | rstanding, i             | SSUED,                | AND RETIRED                                    |   |
|----------------------------------|--|--------------------------|-----------------------|--|---|
|                                  | Please answer the following questions by marking the appropriate boxes.  |                          | YES                   | NO   | Please use this space to provide any explanations or comments |
|                                  | the entity have outstanding debt?<br>e debt repayment schedule attached? If no, MUST explain:  | ]                        |                       | ₹<br>  |   |
| Is the                           | e entity current in its debt service payments? If no, MUST explain:  |                          |                       |  |   |
| Pleas                            | se complete the following debt schedule, if applicable: (please only include principal Outstanding trs)  |                          | Retired durin<br>year | <sup>g</sup> Outstanding at year-end           |   |
| Reve<br>Notes<br>Leas            | eral obligation bonds \$<br>enue bonds \$<br>s/Loans \$<br>e Liabilities \$  | - \$ -<br>- \$ -         | \$<br>\$<br>\$        | - \$ -<br>- \$ -<br>- \$ -<br>- \$ -<br>- \$ - |   |
|                                  | Stoper Advances         \$           I'r (specify):         \$           TOTAL         \$  |                          | \$                    | - \$ -<br>- \$ -<br>- \$ -                     |   |
|                                  |  | or year ending balance   | V/50                  | NO   |   |
| Does<br>How                      | se answer the following questions by marking the appropriate boxes.<br>s the entity have any authorized, but unissued, debt [Section 29-1-605(2) C.R.S.]?<br>much? | -                        | YES                   | NO<br>I  |   |
| Date<br>Does                     | the debt was authorized:<br>s the entity intend to issue debt within the next calendar year?   |                          |                       | I  |   |
| Does                             | much? \$ s the entity have debt that has been refinanced that it is still responsible for? t is the amount outstanding?  | -                        |                       | J  |   |
| Does<br>What                     | the entity have any lease agreements? t is being leased? t is the original date of the lease?  |                          |                       | <b>v</b>                                       |   |
| Num<br>Is the                    | ber of years of lease?   |                          |                       |  |   |
| what                             |  | CASH AND IN              | VESTME                | INTS   |   |
|                                  | se provide the entity's cash deposit and investment balances.<br>R-END Total of ALL Checking and Savings accounts  |                          | AMOUNT<br>\$          | TOTAL  | Please use this space to provide any explanations or comments |
|                                  | ificates of deposit  | OTAL CASH DEPOSITS       |                       | -<br>\$  |   |
| Inves                            | Stments (if investment is a mutual fund, please list underlying investments):  |                          |                       |  |   |
|                                  |  |                          | \$                    | -  |   |
|                                  |  | TOTAL INVESTMENTS        | \$                    | -<br>\$  |   |
| Block                            |  | H AND INVESTMENTS<br>YES | NO                    | \$ -<br>N/A                                    |   |
| And I wanted by the second state | se answer the following question by marking in the appropriate box<br>the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?       |                          |                       |  |   |
| Aret                             | the entity's deposition is an eligible (Public Deposit Protection Act) public depository (Section -101, et seq. C.R.S.)? If no, MUST explain:                      | 11-                      |                       |  |   |

|    | Please answer the following question by marking in the appropriate box                          |  |        |   |    | YES       | NO   | Please use this space to provide any explanations or comme |
|----|---|--|--------|---|----|-----------|--|--|
| -1 | Does the entity have capitalized assets?  |  |        |   |    |           | 2  |  |
| -2 | Has the entity performed an annual inventory of capital assets in accordance with MUST explain: | 1 Section 29-1-50                      | 6, C.F | R.S.? If no,                                  | Т  |           | V  |  |
| -3 |   |  |        |   |    |           | and the star of the second second second second second |  |
| -3 | Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS:              | Balance -<br>beginning of th<br>year 1 | ıe     | Additions<br>2                                | 1  | Deletions | Year-End Balance                                       |  |
|    | Land  | \$                                     | -   9  | β -   | \$ | -         | \$   | -  |
|    | Buildings   | \$                                     | - 9    |   | \$ | -         |  | -  |
|    | Machinery and equipment   | \$                                     | - 9    |   | \$ | -         |  |  |
|    | Furniture and fixtures  | \$                                     | - 9    |   | \$ | -         |  | -  |
|    | Infrastructure  | \$                                     | - 3    | r   | \$ | -         |  | -  |
|    | Construction In Progress (CIP)  | \$                                     | - 9    |   | \$ | -         |  | -  |
|    | Leased Right-to-Use Assets  | \$                                     | - 1    |   | \$ |           | \$   | -  |
|    | Intangible Assets   | \$                                     | - 5    |   | \$ | -         |  | -  |
|    | Other (explain):  | \$                                     | - 3    | •   | \$ | -         |  | -  |
|    | Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)      | \$                                     | - 3    |   | \$ |           | \$   | -  |
|    | Accumulated Depreciation (Enter a negative, or credit, balance)                                 | \$                                     | - 5    |   | \$ | -         | \$   | -  |
|    | TOTAL   | \$                                     | - 5    | \$-   | \$ | -         | \$   | -  |
| -4 | Complete the following Capital & Right-To-Use Assets table for PROPRIETARY FUNDS:               | Balance -<br>beginning of th<br>year*  | ne     | Additions                                     |    | Deletions | Year-End Balance                                       |  |
|    | Land  | \$                                     | - 3    | \$-   | \$ |           | \$   | -  |
|    | Buildings   | \$                                     | - 3    |   | \$ |           | \$   | -  |
|    | Machinery and equipment   | \$                                     | - 3    | -   | \$ |           | \$   | -  |
|    | Furniture and fixtures  | \$                                     | - 3    | <u>,                                     </u> | \$ |           | \$   | -  |
|    | Infrastructure  | \$                                     | - 3    |   | -  |           | \$   | <u>-</u>   |
|    | Construction In Progress (CIP)  | \$                                     | - 3    |   | Ψ. | -         |  | -  |
|    | Leased Right-to-Use Assets  | \$                                     | - 3    |   | \$ | -         |  | -  |
|    | Intangible Assets   | \$                                     | - 3    |   | \$ | -         |  | <u> </u>   |
|    | Other (explain):  | \$                                     | - 3    |   | -  | -         |  | -  |
|    | Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)      | \$                                     | - 3    | •   | \$ | -         |  | <u> </u>   |
|    | Accumulated Depreciation (Enter a negative, or credit, balance)                                 | \$                                     | - 3    | \$ -  | \$ | -         | \$   |  |

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

- \$

- \$

- -

| PAR   | T 7 - PE | NSION IN | FORMATION | N  |  |
|---|----------|----------|-----------|----|--|
|   |          |          | YES       | NO | Please use this space to provide any explanations or comments: |
| <ul><li>7-1 Does the entity have an "old hire" firefighters' pension plan?</li><li>7-2 Does the entity have a volunteer firefighters' pension plan?</li><li>If yes: Who administers the plan?</li></ul> |          |          |           |    |  |
| Indicate the contributions from:  |          |          |           |    |  |
| Tax (property, SO, sales, etc.):  |          | \$ -     |           |    |  |
| State contribution amount:  |          | \$ -     | •         |    |  |
| Other (gifts, donations, etc.):   |          | \$ -     |           |    |  |
|   | TOTAL    | \$ -     |           |    |  |
| What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?   |          | \$ -     |           |    |  |

### DocuSign Envelope ID: 17402267-BC33-43F8-99D0-4C2AAD8B5EA6 PART 8 - BUDGET INFORMATION N/A NO Please answer the following question by marking in the appropriate box YES Please use this space to provide any explanations or comments: Did the entity file a current year budget with the Department of Local Affairs, in accordance with -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.? 1 8-2 If no, MUST explain: If yes: Please indicate the amount appropriated for each fund separately for the year reported Total Appropriations By Fund Governmental/Proprietary Fund Name General Fund \$ 66.093 Debt Service Fund \$ 216,975 \$ \$ -PART 9 - TAX PAYER'S BILL OF RIGHTS (TABOR) Please use this space to provide any explanations or comments: YES NO Please answer the following question by marking in the appropriate box 2 Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]? 9-1 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. PART 10 - GENERAL INFORMATION YES NO Please answer the following question by marking in the appropriate box Please use this space to provide any explanations or comments: 1 10-1 Is this application for a newly formed governmental entity? If yes: Date of formation: -10-2 Has the entity changed its name in the past or current year? If Yes: NEW name **PRIOR** name 10-3 Is the entity a metropolitan district? ~ 10-4 Please indicate what services the entity provides: Streets, Safety Protection, Park and Recreation, Potable Water, Sanitary Sewer, Storm Drainage, Covenant Enforcement and D 1 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: All services are provided by Eagle Brook Meadow Metropolitan District No. 1. 10-6 Does the entity have a certified mill levy? 1 If yes: Please provide the number of mills levied for the year reported (do not enter \$ amounts): 50.000 Bond Redemption mills 15.000 General/Other mills 65.000 Total mills Please use this space to provide any additional explanations or comments not previously included:

### DocuSign Envelope ID: 17402267-BC33-43F8-99D0-4C2AAD8B5EA6

| · · · · · · · · · · · · · · · · · · · |    |                          |      | OSA USE ONLY                                    |                                      |  |
|---------------------------------------|----|--------------------------|------|---|--------------------------------------|--|
| Intity Wide:                          |    | General Fund             |      | Governmental Funds                              |                                      | Notes  |
| nrestricted Cash & Investments        | \$ | - Unrestricted Fund Bala | n \$ | Total Tax Revenue                               | \$                                   | 278,568  |
| urrent Liabilities                    | 5  | - Total Fund Balance     | \$   | <ul> <li>Revenue Paying Debt Service</li> </ul> | \$                                   |  |
| eferred Inflow                        | \$ | 430,024 PY Fund Balance  | \$   | - Total Revenue                                 | \$                                   | 278,587  |
|                                       |    | Total Revenue            | \$   | 64,289 Total Debt Service Principal             | \$                                   |  |
|                                       |    | Total Expenditures       | \$   | 64,289 Total Debt Service Interest              | \$                                   |  |
| overnmental                           |    | Interfund In             | \$   |   |                                      |  |
| tal Cash & Investments                | \$ | - Interfund Out          | \$   | - Enterprise Funds                              | personal company and a second second | the second s   |
| ansfers In                            | \$ | - Proprietary            |      | Net Position                                    | \$                                   | enderstand in the second second  |
| ansfers Out                           | \$ | - Current Assets         | \$   | <ul> <li>PY Net Position</li> </ul>             | \$                                   |  |
| operty Tax                            | \$ | 259,970 Deferred Outflow | \$   | - Government-Wide                               |                                      |  |
| bt Service Principal                  | \$ | - Current Liabilities    | \$   | <ul> <li>Total Outstanding Debt</li> </ul>      | \$                                   |  |
| tal Expenditures                      | \$ | 68,289 Deferred Inflow   | \$   | <ul> <li>Authorized but Unissued</li> </ul>     | \$                                   | <ul> <li>A second s</li></ul> |
| tal Developer Advances                | \$ | - Cash & Investments     | \$   | - Year Authorized                               |                                      | 1/0/1900   |
| otal Developer Repayments             | \$ | - Principal Expense      | \$   |   | and the second second second second  |  |

.

| PART 12 - GOVERNIN<br>Please answer the following question by marking in the appropriate box   | YES   | NO                  |   |
|--|---|---------------------|---|
|  | The second se |                     |   |
| 1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?   | 7   |                     |   |
| licy - Requirements  |   |                     |   |
|  | motion from audit that include  | les governing board | signatures obtained through a program such as Docusion or Echosic |
| e Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exe  | mption from audit that includ   | les governing board | signatures obtained through a program such as Docusign or Echosi  |
| ne Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exe<br>equired elements and safeguards are as follows:  |   | 0 0                 |   |
| Policy - Requirements<br>The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exe<br>Required elements and safeguards are as follows:<br>• The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1 |   | 0 0                 |   |

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, the individual member is certifying they are a duly elected or appointed officer of the local government. Governing members may be verified. Also by signing, the 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 <u>ALL</u> members of the governing body below. | A MAJORITY of the members of the governing body must complete and sign in the column below.   |
|---|--|---|
|   | Full Name  | I,  |
|   | Robert Eck, II   | that I have personally reviewed and approve this application for <u>3910972623</u> and <u>16:26:17</u> PST<br>Signed  |
|   | Full Name  | I Des Des Martinet and Antonio State Stat |
|   | Hope Pruett  | I,Hope Pruett, 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 17:00:02 MST Signed Date: Date:Date:  |
|   | Full Name  | I, Erich Menzel , attest that I am a duly elected or appointed board member, and that   |
|   | Erich Menzel   | I have personally reviewed and approve this application for exempting 1/2025 it. 10:43:48 PDT<br>Signed <u>Crick Wanged</u> Date:   |
| 100000000000000000000000000000000000000 | Full Name  |   |
| 4                                       | Jeanne Findley   | I,Jeanne Findley, 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  |
|   | Full Name  | I, , attest that I am a duly elected or appointed board member, and that I have   |
| 5                                       |  | personally reviewed and approve this application for exemption from audit. Signed Date: Date:   |
|   | 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:   |
|   | - Full Name  |   |
|   |  | I, attest that I am a duly elected or appointed board member, and that I have   |
| 7                                       |  | personally reviewed and approve this application for exemption from audit. Signed Date:   |
|   |  | Signed Date:<br>My term Expires:  |
|   |  | my term expres  |