APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

CONTACT PERSON PHONE BMAIL PART 1 - CERTIFICATION OF PREPARER I certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to my knowledge. NAME: TITLE FIRM NAME (if applicable) ADDRESS PHONE District Accountant Simmons & Wheeler, P.C. 304 Inverness Way South, Suite 490, Englewood, CO 80112 303-689-0833 PREPARER (SIGNATURE REQUIRED) Mar 18, 2024	NAME OF GOVERNMENT	RRC Metropolitan District No. 3		For the Year Ended
CONTACT PERSON PHONE BMAIL PART 1 - CERTIFICATION OF PREPARER I certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to my knowledge. NAME: TITLE FIRM NAME (if applicable) ADDRESS PHONE Diane Wheeler District Accountant Simmons & Wheeler, P.C. 304 Inverness Way South, Suite 490, Englewood, CO 80112 303-689-0833 PREPARER (SIGNATURE REQUIRED) Mar 18, 2024	ADDRESS	c/o Spencer Fane		12/31/23
Russ Dykstra 303-839-3800 rdykstra@spencefane.com PART 1 - CERTIFICATION OF PREPARER I certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to my knowledge. NAME: TITLE Diane Wheeler District Accountant FIRM NAME (if applicable) ADDRESS PHONE Diane Wheeler, P.C. 304 Inverness Way South, Suite 490, Englewood, CO 80112 303-689-0833 DATE PREPARED Mar 18, 2024		D 00 00000		or fiscal year ended:
PHONE EMAIL Tolertify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to my knowledge. NAME: TITLE District Accountant FIRM NAME (if applicable) ADDRESS PHONE Diane Wheeler District Accountant Simmons & Wheeler, P.C. 304 Inverness Way South, Suite 490, Englewood, CO 80112 PREPARER (SIGNATURE REQUIRED) DATE PREPARED Mar 18, 2024	***************************************			4
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my knowledge. NAME: TITLE District Accountant FIRM NAME (if applicable) ADDRESS PHONE District Accountant Simmons & Wheeler, P.C. 304 Inverness Way South, Suite 490, Englewood, CO 80112 303-689-0833 PREPARER (SIGNATURE REQUIRED) Mar 18, 2024		PART 1 - CERTIFICATIO	N OF PREPARER	
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FIRM NAME (if applicable) ADDRESS PHONE Simmons & Wheeler, P.C. 304 Inverness Way South, Suite 490, Englewood, CO 80112 303-689-0833 PREPARER (SIGNATURE REQUIRED) Mar 18, 2024	NAME:	Diane Wheeler		
## 304 Inverness Way South, Suite 490, Englewood, CO 80112 303-689-0833	TITLE	District Accountant		-
PREPARER (SIGNATURE REQUIRED) Mar 18, 2024	FIRM NAME (if applicable)	Simmons & Wheeler, P.C.		
PREPARER (SIGNATURE REQUIRED) Mar 18, 2024	ADDRESS	304 Inverness Way South, Suite 490, Er	nglewood, CO 80112	-
Mar 18, 2024	PHONE	303-689-0833		
Mar 18, 2024	DDED	ADED (SIGNATURE RESURES)	THE LAND WILLIAM	ATE DOEDADED
Mar 18, 2024	FNLF	ANCK (SIGNATURE REQUIRED)	THE RESERVE OF THE PERSON OF T	ATE PREPARED
Mai 16, 2024			Mar 18	1 2024
	Qion K Waln		I Wal 10	, 2027
Diago indicate whether the following financial information is recorded.	Please indicate whether the follow	lowing financial information is recorded		PROPRIETARY (CASH OR BUDGETARY BASIS)

Ø

0

using Governmental or Proprietary fund types

PART 2 - REVENUE

REVENUE: All revenues for all funds must be reflected in this section, including proceeds from the sale of the government's land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

Line#		Di	scription	Round to nearest Dollar	Please use this
2-1	Taxes:	Property	(report mills levied in Question 10-6)	\$ 65,177	space to provide
2-2		Specific owner	ship	\$ 4,664	any necessary
2-3		Sales and use		\$ -	explanations
2-4		Other (specify)	:	\$ -	LA SHAM
2-5	Licenses and permit	s		\$ -	
2-6	Intergovernmental:		Grants	\$ -	1
2-7			Conservation Trust Funds (Lottery)	\$ -	
2-8			Highway Users Tax Funds (HUTF)	\$ •	1
2-9			Other (specify):	\$ _	1
2-10	Charges for services	\$		\$ -	
2-11	Fines and forfeits			\$ -	1
2-12	Special assessment	S		\$ 	
2-13	Investment income			\$ 2,483	
2-14	Charges for utility se	ervices		\$ -	
2-15	Debt proceeds		(should agree with line 4-4, column 2)	\$ -	
2-16	Lease proceeds			\$ -	
2-17	Developer Advances	received	(should agree with line 4-4)	\$ -	
2-18	Proceeds from sale	of capital asset	S	\$ -	
2-19	Fire and police pens	ion		\$ -	
2-20	Donations			\$ -	
2-21	Other (specify):			\$ -	
2-22				\$	
2-23				\$ 	
2-24		(add lin	es 2-1 through 2-23) TOTAL REVENUE	\$ 72,324	

PART 3 - EXPENDITURES/EXPENSES

EXPENDITURES: All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

	interest payments on long-term debt. Financial information will not incl	uae tuna equity inforn		61 (1)
Line#	Description		Round to nearest Dollar	Please use this
3-1	Administrative		\$ 1,208	space to provide any necessary
3-2	Salaries		\$ -	explanations
3-3	Payroll taxes		\$ -	explanations
3-4	Contract services		\$ -	
3-5	Employee benefits		\$ -	
3-6	Insurance		\$ 2,828	1
3-7	Accounting and legal fees		\$ 13,518	1
3-8	Repair and maintenance		\$ -	1
3-9	Supplies	Ī	\$ -	1
3-10	Utilities and telephone	1	\$ -	1
3-11	Fire/Police		\$ -	1
3-12	Streets and highways		\$ -	1
3-13	Public health		\$ -	1
3-14	Capital outlay		\$ -	1
3-15	Utility operations		\$ -]
3-16	Culture and recreation		\$ -	1
3-17		ould agree with Part 4)	\$ -]
3-18	Debt service interest		\$ -]
3-19		uld agree with line 4-4)	\$ -]
3-20	Repayment of Developer Advance Interest		\$ -]
3-21		nould agree to line 7-2)	\$]
3-22	Contribution to Fire & Police Pension Assoc. (sl	rould agree to line 7-2)	\$ -]
3-23	Other (specify):			1
3-24		Γ	\$ -]
3-25		Γ	\$ -	1
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDIT	JRES/EXPENSES	\$ 17,554	
× = 0 = 11	DELICING AT A CAR TOTAL EMPENDIZABLE AT A CON-		* · · · · · · · · OTOD	The same of the sa

If TOTAL REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER than \$100,000 - <u>STOP</u>. You may not use this form. Please use the "Application for Exemption from Audit - <u>LONG FORM</u>".

	PART 4 - DEBT OUTSTANDIN Please answer the following questions by marking the						'es		No
4-1	Does the entity have outstanding debt?	appic	priate boxes.		_		C3	1	
	If Yes, please attach a copy of the entity's Debt Repayment								
4-2	is the debt repayment schedule attached? If no, MUST explain	ain be	low:					-	0
4-3	Is the entity current in its debt service payments? If no, MU	ST exp	olain below	:		, 		,	Ø
4-4	Please complete the following debt schedule, if applicable:			0.3				140	3 3
	(please only include principal amounts)(enter all amount as positive		tstanding at of prior year	ISS	ued during year		d during ear		tanding at ear-end
	numbers)	Cria	or prior year		year	, v	ear	ye	ai-enu
	General obligation bonds	\$	_	\$	-	\$	-	\$	-
	Revenue bonds	\$	-	\$	-	\$	-	Š	
	Notes/Loans	\$		\$	-	\$	-	\$	-
	Lease & SBITA** Liabilities [GASB 87 & 96]	\$	_	\$	-	\$		\$	
	Developer Advances	\$	42,253	\$		\$		\$	42.253
	Other (specify):	\$	-	\$		\$	-	\$	
	TOTAL	\$	42,253	\$		\$		\$	42,253
**Subscrip	otion Based Information Technology Arrangements	-	st agree to prio	_	end balance			<u> </u>	12,200
	Please answer the following questions by marking the appropriate boxe		, , , , , , , , , , , , , , , , , , ,	,,,,,,			'es		No
4-5	Does the entity have any authorized, but unissued, debt?					2		- 8	
If yes:	How much?	\$	5	00,0	00,000.00				
	Date the debt was authorized:		11/8/2	2016					
4-6	Does the entity intend to issue debt within the next calendar	r year	?						Ø
If yes:	How much?]				
4-7	Does the entity have debt that has been refinanced that it is still responsible for?						Ø		
If yes:	What is the amount outstanding?	\$	-		-	1			
4-8	Does the entity have any lease agreements?								2
If yes:	What is being leased?								
	What is the original date of the lease?	_							
	Number of years of lease?								2
	Is the lease subject to annual appropriation?								
	What are the annual lease payments? Part 4 - Please use this space to provide any explanations/co	\$_			•				

	Please provide the entity's cash deposit and investment balances.		Amount		Total
5-1	YEAR-END Total of ALL Checking and Savings Accounts		\$ 19,440		
5-2	Certificates of deposit		\$ •		
	Total Cash Deposits	18		\$	19,440
	Investments (if investment is a mutual fund, please list underlying investments):	30 10			
	Colotrust	2000	\$ 38,575	1	
5-3			\$ -		
			\$ -		
			\$ -		
	Total Investments			\$	38,575
	Total Cash and Investments		- 0	\$	58,015
	Please answer the following questions by marking in the appropriate boxes	Yes	No		N/A
5-4	Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?	D	0		0
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.)?	0			0

Please answer the following questions by marking in the appropri	ate boxes.					Yes	No
Does the entity have capital assets?					9	0	Ø
Has the entity performed an annual inventory of capital 29-1-506, C.R.S.,? If no, MUST explain:	assets in ac	cordance	with S	Section		0	0
Complete the following capital & right-to-use assets table:	beginn	lance - ning of the	be inc	ons (Must luded in art 3)	D	eletions	Year-En Balance
Land	\$	-	\$	-	\$	٠ -	\$
Buildings	\$	-	\$	-	\$	-	\$
Machinery and equipment	\$	-	\$	-	\$	-	\$
Furniture and fixtures	\$	-	\$	-	\$	-	\$
Infrastructure	\$	-	\$	-	\$	-	\$
Construction In Progress (CIP)	\$		\$	-	\$	-	\$
Leased & SBITA Right-to-Use Assets	\$	•	\$	- [\$	-	\$
Other (explain):	\$	-	\$	-	\$	•	\$
Accumulated Depreciation/Amortization	\$	-	\$	-	\$	-	\$
(Please enter a negative, or credit, balance)							

'must tie to prior year ending balance
Part 6 - Please use this space to provide any explanations/comments or attach documentation, if needed:

	PART 7 - PENSION INFORMA	TIC	N		
	Please answer the following questions by marking in the appropriate boxes.			Yes	No
7-1	Does the entity have an "old hire" firefighters' pension plan?				Ø
7-2	Does the entity have a volunteer firefighters' pension plan?				
If yes:	Who administers the plan?				
	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?	\$.		
	Part 7 - Please use this space to provide any explanation	s or c	comments:		

	Please answer the following questions by marking in the appropriat	e boxes.	Yes	No	N/A
8-1	Did the entity file a budget with the Department of Local Affai in accordance with Section 29-1-113 C.R.S.? If no, MUST exp	•	2	D	а
8-2	Did the entity pass an appropriations resolution, in acco 29-1-108 C.R.S.? If no, MUST explain:	rdance with Section	Ø	0	Ö
f yes:	Please indicate the amount budgeted for each fund for the	ne year reported:			
	Governmental/Proprietary Fund Name Total Appropriation		ons By Fund		
		· ·	70,391		
	Governmental Fund	Ψ	,		

1	PART 9 - TAXPAYER'S BILL OF RIGHTS (TAB	OR)	
	Please answer the following question by marking in the appropriate box	Yes	No
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]?	5_0	
	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.	Ø	
no, Ml	UST explain:		

	PART 10 - GENERAL INFORMATION		
	Please answer the following questions by marking in the appropriate boxes.	Yes	No
10-1 If yes:	Is this application for a newly formed governmental entity? Date of formation:	<u> </u>	Ø
10-2	Has the entity changed its name in the past or current year?		Ø
If yes:	Please list the NEW name & PRIOR name:	1	
10-3	Is the entity a metropolitan district? Please indicate what services the entity provides:	J Ø	D
10-4 If yes:	Streets, traffic control, water, sewer, park and recreation Does the entity have an agreement with another government to provide services? List the name of the other governmental entity and the services provided:] -	Ø
10-5 If yes:	Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during Date Filed:]]	2
10-6 If yes:	Does the entity have a certified Mill Levy?	Ø	0
	Please provide the following mills levied for the year reported (do not report \$ amounts):		
	Bond Redemption mills		•
	General/Other mills Total mills		23.000
	Yes	No	N/A
10-7	NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has the entity filed its preceding year annual report with the State Auditor as required under SB 21-262 [Section 32-1-207 C.R.S.]? If NO, please explain.	0	0
	Please use this space to provide any additional explanations or comments not previous	ously included:	

	PART 11 - GOVERNING BODY APPROVAL		
	Please answer the following question by marking in the appropriate box	YES	NO
12-1	If you plan to submit this form electronically, have you read the new Electronic Signature Policy?	Ø	0

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedure

Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as Docusign or Echosign. Required elements and safeguards are as follows:

- The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.
- The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.
- Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

- 1) Submit the application in hard copy via the US Mail including original signatures.
- 2) Submit the application electronically via email and either,
- a. Include a copy of an adopted resolution that documents formal approval by the Board, or
- b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

Print th	ne names of ALL members of current governing body below.	A <u>MAJORITY</u> of the members of the governing body must sign below.
Board Member 1	Print Board Member's Name Thomas Clark	IThomas Clark, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed
Board Member 2	Print Board Member's Name Bryan Horan	I_Bryan Horan, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Mar 18, 2024 My term Expires:May 2027
Board Member 3	Print Board Member's Name	I
Board Member 4	Print Board Member's Name	I
Board Member 5	Print Board Member's Name	I
Board Member 6	Print Board Member's Name	I
Board Member 7	Print Board Member's Name	I

RRC _3 2023

Final Audit Report

2024-03-18

Created: 2024-03-18

By: Diane Wheeler (diane@simmonswheeler.com)

Status: Signed

Transaction ID: CBJCHBCAABAAd1QLiUKhiTxCIGHUxqu1bY-j4QER8kWx

"RRC _3 2023" History

- Document created by Diane Wheeler (diane@simmonswheeler.com) 2024-03-18 3:04:19 PM GMT
- Document emailed to Diane Wheeler (diane@simmonswheeler.com) for signature 2024-03-18 3:05:11 PM GMT
- Document emailed to Tom Clark (tclark@ventanacap.com) for signature 2024-03-18 3:05:11 PM GMT
- Document emailed to Bryan Horan (bhoran@ventanacap.com) for signature 2024-03-18 3:05:11 PM GMT
- Document e-signed by Diane Wheeler (diane@simmonswheeler.com)

 Signature Date: 2024-03-18 3:05:28 PM GMT Time Source: server
- Email viewed by Tom Clark (tclark@ventanacap.com) 2024-03-18 3:12:28 PM GMT
- Signer Tom Clark (tclark@ventanacap.com) entered name at signing as Thomas M Clark 2024-03-18 3:12:39 PM GMT
- Document e-signed by Thomas M Clark (tclark@ventanacap.com)
 Signature Date: 2024-03-18 3:12:41 PM GMT Time Source: server
- Email viewed by Bryan Horan (bhoran@ventanacap.com) 2024-03-18 8:52:18 PM GMT
- Document e-signed by Bryan Horan (bhoran@ventanacap.com)
 Signature Date: 2024-03-18 8:52:41 PM GMT Time Source: server
- Agreement completed. 2024-03-18 - 8:52:41 PM GMT