APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

For the Year Ended

PROPRIETARY

(CASH OR BUDGETARY BASIS)

Painted Prairie Metropolitan District No. 10

NAME OF GOVERNMENT

Please indicate whether the following financial information is recorded

using Governmental or Proprietary fund types

ADDRESS	c/o White, Bear, Ankele, Tanaka and Waldron	12/31/22				
	2154 E. Commons Avenue, Suite 2000 or fiscal year ended					
	Centennial CO 80122					
CONTACT PERSON	Clint Waldron					
PHONE	303-858-1800					
EMAIL	cwaldron@wbapc.com					
P	ART 1 - CERTIFICATION OF PREPARER					
I certify that I am skilled in govern my knowledge.	nmental accounting and that the information in the application is comple	te and accurate, to the best of				
NAME: Diane Wheeler						
TITLE	District Accountant					
FIRM NAME (if applicable)	I NAME (if applicable) Simmons & Wheeler, P.C.					
ADDRESS	304 Inverness Way South, Suite 490, Englewood CO 80112					
PHONE	303-689-0833					
DATE PREPARED	3/6/2023					
PREPARER (SIGNATURE REQUIRED)						
Pione K Whale						

GOVERNMENTAL

(MODIFIED ACCRUAL BASIS)

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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#		Description		Round to nearest Dollar	Please use this
2-1	Taxes: Proper	ty (report mills levied in Question	on 10-6)	\$ 1	space to provide
2-2	Specif	ic ownership		\$ -	any necessary
2-3	Sales	and use		\$ -	explanations
2-4	Other	(specify):		\$ -	
2-5	Licenses and permits			\$ -	
2-6	Intergovernmental:	Grants		\$ -	
2-7		Conservation Trust Fu		\$ -	
2-8		Highway Users Tax Fu		\$ -	
2-9		Other (specify):	<u> </u>	\$ -	
2-10	Charges for services			\$ -	
2-11	Fines and forfeits			\$ -	
2-12	Special assessments			\$ -	
2-13	Investment income			\$ -	
2-14	Charges for utility services		<u> </u>	\$ -	
2-15	Debt proceeds	(should agree		\$ -	
2-16	Lease proceeds			\$ -	
2-17	Developer Advances receiv		-	\$ -	
2-18	Proceeds from sale of capit	al assets	_	\$ -	
2-19	Fire and police pension		_	\$ -	
2-20	Donations		<u> </u>	\$ -	
2-21	Other (specify):		<u> </u>	\$ -	_
2-22	Developer advance receival	ole		\$ 11,666	_
2-23				\$ -	J
2-24		(add lines 2-1 through 2-23)	TOTAL REVENUE	\$ 11,667	

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.

Line#	Description		d to nearest Dollar	Please use this
3-1	Administrative		\$	space to provide
3-2	Salaries		\$ -	any necessary
3-3	Payroll taxes		\$ -	explanations
3-4	Contract services		\$ -	
3-5	Employee benefits		\$ -	
3-6	Insurance		\$ 3,451	
3-7	Accounting and legal fees		\$ 2,660	
3-8	Repair and maintenance		\$ -	
3-9	Supplies		\$ -	
3-10	Utilities and telephone		\$ -	
3-11	Fire/Police		\$ -	
3-12	Streets and highways		\$ -	
3-13	Public health		\$ -	
3-14	Capital outlay		\$ -	
3-15	Utility operations		\$ -	
3-16	Culture and recreation		\$ -	
3-17	Debt service principal	(should agree with Part 4)	\$ -	
3-18	Debt service interest		\$ -	
3-19	Repayment of Developer Advance Principal (s	should agree with line 4-4)	\$ -	
3-20	Repayment of Developer Advance Interest		\$ -	
3-21	Contribution to pension plan	(should agree to line 7-2)	\$ -	
3-22	Contribution to Fire & Police Pension Assoc.	(should agree to line 7-2)	\$ -	
3-23	Other (specify): Transfer to Authority		\$ 5,556	
3-24			\$ -	
3-25			\$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPEND	ITURES/EXPENSES	\$ 11,667	

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 OUTSTANDING	3, I	SSUED), <i>A</i>	ND RE	TIF	RED		
	Please answer the following questions by marking the a	appro	priate boxes.				Yes		No
4-1	Does the entity have outstanding debt?		-				1		
	If Yes, please attach a copy of the entity's Debt Repayment So		lule.				_		_
4-2	Is the debt repayment schedule attached? If no, MUST explain					1			✓
	Developer advance subject to repayment with available funds	;							
4-3	Is the entity current in its debt service payments? If no, MUST	exp	olain:				J		
4-4	Please complete the following debt schedule, if applicable:								
	(please only include principal amounts)(enter all amount as positive		tstanding at	Iss	ued during	Retir	red during		standing at
	numbers)	end	of prior year*		year		year	7	ear-end
	General obligation bonds	\$	_	\$	_	\$	_	\$	_
	Revenue bonds	\$		\$		\$		\$	
	Notes/Loans	\$	<u> </u>	\$		\$	<u> </u>	\$	_
	Lease Liabilities	\$	<u> </u>	\$		\$		\$	<u>-</u>
				<u> </u>					
	Developer Advances	\$	1,263	\$	-	\$	-	\$	1,263
	Other (specify):	\$	<u>-</u>	\$	-	\$	-	\$	-
	TOTAL	\$	1,263	\$	-	\$	-	\$	1,263
	*must tie to prior year ending balance								
4.5	Please answer the following questions by marking the appropriate boxes. Yes No							No	
4-5 If yes:							Ш		
ii yes.									
	Date the debt was authorized:	L		2017		J	П		
4-6	Does the entity intend to issue debt within the next calendar	year	7			1			7
If yes:	How much?	\$			-				
4-7	Does the entity have debt that has been refinanced that it is s		esponsible	for?		1			7
If yes:	What is the amount outstanding?	\$			-		_		_
4-8	Does the entity have any lease agreements?					1			✓
If yes:	What is the original data of the lease?								
	What is the original date of the lease? Number of years of lease?					ł			
	•					J	П		√
	Is the lease subject to annual appropriation? What are the annual lease payments?	\$				1			
	Please use this space to provide any		anations or	COR	monte:				
	Flease use this space to provide any	ехрі	analions or	COII	iinenis.				

	PART 5 - CASH AND INVESTME	ENTS		
	Please provide the entity's cash deposit and investment balances.		Amount	Total
5-1	YEAR-END Total of ALL Checking and Savings Accounts		\$ -	
5-2	Certificates of deposit		\$ -	
	Total Cash Deposits			\$ -
	Investments (if investment is a mutual fund, please list underlying investments):			
			\$ -	
5-3			\$ -	
5-3			\$ -]
			-	
	Total Investments			\$ -
	Total Cash and Investments			\$ -
	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.	7		П
	seq., C.R.S.?	<u>~</u>		Ш
5-5	Are the entity's deposits in an eligible (Public Deposit Protection Act) public	7		П
	depository (Section 11-10.5-101, et seq. C.R.S.)?	ŭ		Ш
If no. MI	UST use this space to provide any explanations:			

	PART 6 - CAPITAL AND RI	GHT	-TO-U	SE A	SSE	TS			
	Please answer the following questions by marking in the appropriate box					Ye	s	ŀ	No
6-1	Does the entity have capital assets?								Z
6-2	Has the entity performed an annual inventory of capital asset 29-1-506, C.R.S.,? If no, MUST explain:	s in ac	cordance	with Se	ction	~		[
6-3	Complete the following capital & right-to-use assets table:	begin	alance - ning of the year*	Additions be inclu Part	ded in	Deletions		Year-End Balance	
	Land	\$	-	\$	-	\$	-	\$	-
	Buildings	\$	-	\$	-	\$	-	\$	-
	Machinery and equipment	\$	-	\$	-	\$	-	\$	-
	Furniture and fixtures	\$	-	\$	-	\$	-	\$	-
	Infrastructure	\$	-	\$	-	\$	-	\$	-
	Construction In Progress (CIP)	\$	-	\$	-	\$	-	\$	-
	Leased Right-to-Use Assets	\$	-	\$	-	\$	-	\$	-
	Other (explain):	\$	-	\$	-	\$	-	\$	-
	Accumulated Depreciation/Amortization (Please enter a negative, or credit, balance)	\$	-	\$	-	\$	-	\$	
	TOTAL	\$		\$	_	\$	_	\$	
	Please use this space to provide any	explar	nations or	comme	nts:	•		,	
	PART 7 - PENSION	INF	ORMA	TION					
	Please answer the following questions by marking in the appropriate box					Ye	s		No
7-1	Does the entity have an "old hire" firefighters' pension plan?							-	
7-2	Does the entity have a volunteer firefighters' pension plan?							7]
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?								
	Please use this space to provide any	explar	nations or	comme	nts:				
	DARTA BURGET			TION					
	PART 8 - BUDGET I		JKIVIA	HON					
0.4	Please answer the following questions by marking in the appropriate box		41	Ye	S	No)	N	I/A
8-1	Did the entity file a budget with the Department of Local Affai	rs for	tne	1]
	current year in accordance with Section 29-1-113 C.R.S.?)					
8-2				J					
0-2	Did the entity pass an appropriations resolution, in accordance	ce with	n Section	7]
	29-1-108 C.R.S.? If no, MUST explain:								
If ves:	Please indicate the amount budgeted for each fund for the ye	ar rep	orted:	l					
,									
	Governmental/Proprietary Fund Name		al Appropria	tions By F					
	General Fund	\$			15,912				
		-							
		-							
		L							

	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)]? 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.	V			
f no, Ml	JST explain:				
	<u> </u>				
	PART 10 - GENERAL INFORMATION				
	Please answer the following questions by marking in the appropriate boxes.	Yes	No		
10-1	Is this application for a newly formed governmental entity?		7		
If yes:	Date of formation:				
10-2	Has the entity changed its name in the past or current year?	, 			
	γ				
If yes:	Please list the NEW name & PRIOR name:	1			
]			
10-3					
	Please indicate what services the entity provides:	1			
	Streets, traffic control, water, water sewer, park and recreation				
10-4	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:	1			
10-5	Has the district filed a <i>Title 32</i> , <i>Article 1 Special District Notice of Inactive Status</i> during) 	7		
If yes:	Date Filed:	1			
ii yes.	Date Flied.				
10-6	Does the entity have a certified Mill Levy?	J Z			
If yes:	, , , , , , , , , , , , , , , , , , ,				
,	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):				
	Bond Redemption mills		-		
	General/Other mills		59.164		
	Total mills		59.164		
	Please use this space to provide any explanations or comments:				

	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?	J			

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 the names of ALL members of	A MAJORITY of the members of the governing body must complete and sign in the column below.
	current governing body below.	
Board	Print Board Member's Name	IChristopher Fellows, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for
Member 1	Christopher Fellows	exemption from audit. Signed Date:May 2022
Doord	Print Board Member's Name	ITim O'Connor, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for
Board Member 2	Tim O'Connor	exemption from audit. Signed Tuncting Oceanor Date: Mar 8, 2023 My term Expires: May 2023
Board	Print Board Member's Name	IDustin Anderson, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for
Member 3	Dustin Anderson	exemption from audit. Signed Mar 8, 2023 My term Expires: May 2023
Board Member 4	Print Board Member's Name	IDouglas Hatfield, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this
	Douglas Hatfield	application for exemption from audit. Signed Description of the Second S
	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for
Board Member		exemption from audit.
5		Signed Date: My term Expires:
Board	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for
Member		exemption from audit. Signed
6		Date: My term Expires:
	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for
Board Member		exemption from audit.
7		Signed Date:
		My term Expires:

Painted Prairie MD 10

Interim Agreement Report

2023-03-21

Created: 2023-03-08

By: Diane Wheeler (diane@simmonswheeler.com)

Status: Out for Signature

Transaction ID: CBJCHBCAABAA7dr15flMJkH683L9tDckkXvfR3LeKuoC

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.

"Painted Prairie MD 10" History

- Document created by Diane Wheeler (diane@simmonswheeler.com) 2023-03-08 4:45:22 PM GMT
- Document emailed to Diane Wheeler (diane@simmonswheeler.com) for signature 2023-03-08 4:46:29 PM GMT
- Document emailed to chris@fellowscos.com for signature 2023-03-08 4:46:29 PM GMT
- Document emailed to Dustin Anderson (dma@albdev.com) for signature 2023-03-08 4:46:29 PM GMT
- Document emailed to Timothy OConnor (tim@albdev.com) for signature 2023-03-08 4:46:29 PM GMT
- Document emailed to dhatfield@albdev.com for signature 2023-03-08 4:46:30 PM GMT
- Document e-signed by Diane Wheeler (diane@simmonswheeler.com)
 Signature Date: 2023-03-08 4:46:36 PM GMT Time Source: server
- Email viewed by Dustin Anderson (dma@albdev.com) 2023-03-08 4:50:39 PM GMT
- Document e-signed by Dustin Anderson (dma@albdev.com)
 Signature Date: 2023-03-08 4:50:46 PM GMT Time Source: server



Email viewed by Timothy OConnor (tim@albdev.com) 2023-03-08 - 5:00:59 PM GMT

Document e-signed by Timothy OConnor (tim@albdev.com)

Signature Date: 2023-03-08 - 5:01:11 PM GMT - Time Source: server

Email viewed by dhatfield@albdev.com

2023-03-08 - 5:15:35 PM GMT

Signer dhatfield@albdev.com entered name at signing as Douglas Hatfield 2023-03-08 - 5:16:04 PM GMT

Document e-signed by Douglas Hatfield (dhatfield@albdev.com)

Signature Date: 2023-03-08 - 5:16:06 PM GMT - Time Source: server

Names and email addresses are entered into the Acrobat Sign service by Acrobat Sign users and are unverified unless otherwise noted.