# **APPLICATION FOR EXEMPTION FROM AUDIT**

#### SHORT FORM

Golden Overlook Metropolitan District

44 Cook Street, Suite 620

Denver, CO 80206

(303) 218-7200

Matthew P. Ruhland

c/o Cockrel Ela Glesne Greher & Ruhland, P.C.

NAME OF	GOVERNMENT
ADDRESS	

CONTACT PERSON PHONE EMAIL For the Year Ended 12/31/22 or fiscal year ended:

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<u>mruhland@cegrlaw.com</u> 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 the best of my knowledge.

NAME:	Cathy Fromm
TITLE	Partner
FIRM NAME (if applicable)	Fromm & Company LLC
ADDRESS	8200 S. Quebec Street, Suite A3 - 305, Centennial, CO 80112
PHONE	(970) 875-7047
DATE PREPARED	March 27, 2023

### PREPARER (SIGNATURE REQUIRED)

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Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types

ENTAL	PROPRIETARY
JAL BASIS)	(CASH OR BUDGETARY BASIS)

#### 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: Property	(report mills levied in Question 10-6)	\$ -	space to provide
2-2	Specific	ownership	\$	any necessary
2-3	Sales and	luse	\$	explanations
2-4	Other (sp	ecify):	\$	
2-5	Licenses and permits		\$	
2-6	Intergovernmental:	Grants	\$	-
2-7		Conservation Trust Funds (Lottery)	\$	-
2-8		Highway Users Tax Funds (HUTF)	\$	-
2-9		Other (specify):	<u> </u>	-
2-10	Charges for services			-
2-11	Fines and forfeits		- 	4
2-12	Special assessments		- \$	-
2-13	Investment income		T	_
2-14	Charges for utility services		\$	_
2-15	Debt proceeds	(chould arrea with line 4.4 and we are	-	
2-16	Lease proceeds	(should agree with line 4-4, column 2)		_
2-17	Developer Advances received		-	_
2-18	Proceeds from sale of capital	(should agree with line 4-4)	\$ 1,231	
2-19		assets		
2-19	Fire and police pension Donations		\$	
2-20			\$	
	Other (specify):		\$ -	]
2-22			\$ -	]
2-23			\$ -	]
2-24		add lines 2-1 through 2-23) TOTAL REVENUE	\$ 1,231	

#### **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	in the second seco	liacio	Round 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		\$	_	
3-7	Accounting and legal fees		\$	1,231	
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	(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):	(	÷		
3-24			\$	_	
3-25			\$	_	
3-26	(add lines 3-1 through 3-24) TOTAL EX	PENDITURES/EXPENSES	· ·	1,231	
IF TOTAL	REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line				ot use this

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	G. I	SSUE	). A	ND R	ETIF	RED		
	Please answer the following questions by marking the	appro	priate boxes.	,			Yes		No
4-1	Does the entity have outstanding debt?						~		
4.0	If Yes, please attach a copy of the entity's Debt Repayment S	ched	ule.						
4-2	4-2 Is the debt repayment schedule attached? If no. MUST explain:								7
	The Developer will be repaid when funds are available.								
4-3							_		_
4-0	Is the entity current in its debt service payments? If no, MUS See 4-2 above.	Г ехр	lain:			1			~
	000 4-2 above.								
4-4	Please complete the following debt schedule, if applicable:								
	(please only include principal amounts)(enter all amount as positive	Out	standing at	Issi	ed during	Retii	ed during	Outs	standing at
	numbers)	end	of prior year*		year		year	У	ear-end
	General obligation bonds	\$		\$		6		•	
	Revenue bonds	\$	-	\$	-	\$ \$	-	\$ \$	-
	Notes/Loans	\$	-	\$	-	\$	_	\$	
	Lease Liabilities	\$	_	\$	_	\$	-	\$	-
	Developer Advances	\$	19,321	\$	1,231	\$	-	\$	20,552
	Other (specify):	\$	10,021	\$	1,201	\$	-	\$ \$	20,552
	TOTAL	\$	19,321	\$	1,231	\$	-	\$	20,552
		Ŧ	t tie to prior ye	1		Ψ		Ψ	20,002
	Please answer the following questions by marking the appropriate boxes				g		Yes		No
4-5	Does the entity have any authorized, but unissued, debt?						1		
If yes:		\$			0,000.00				
	Date the debt was authorized:		11/4/2	2014					
4-6	Does the entity intend to issue debt within the next calendar	year?							~
If yes:	How much?	\$			-				
4-7	Does the entity have debt that has been refinanced that it is s	till re	sponsible	for?					~
If yes:	What is the amount outstanding?	\$			-				
4-8	Does the entity have any lease agreements? What is being leased?								7
If yes:	What is the original date of the lease?								
	Number of years of lease?								
	Is the lease subject to annual appropriation?								1
	What are the annual lease payments?	\$			-				
	Please use this space to provide any	expla	nations or	com	nents:		1333 - A. A.		Statistics.
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	PART 5 - CASH AND INVESTM	ENTS		
<b>E</b> 4	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):			_Ψ
			\$ -	
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. seq., C.R.S.?			
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.)?			7
If no, M	UST use this space to provide any explanations:	A STREET		

	PART 6 - CAPITAL AND RI		-TO-U	SE	ASSE	ET	S	
	Please answer the following questions by marking in the appropriate box	es.					Yes	No
6-1	6-1 Does the entity have capital assets?							1
6-2	6-2 Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.,? If no, MUST explain:							
6-3	Complete the following capital & right-to-use assets table:	beginn	ing of the	be ind	ons (Must luded in		Deletions	Year-End Balance
	Land	у \$	ear* -	Pa \$	art 3) -	\$	<u>-</u>	\$ 
	Buildings	\$	_	\$	-	\$	_	\$ -
	Machinery and equipment	\$	-	\$	-	\$	-	\$ _
	Furniture and fixtures	\$	-	\$	-	\$	_	\$ _
	Infrastructure	\$	-	\$	-	\$	-	\$ -

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	Please use this space to provide any explanations or	comn	nents:	San The same	E granter Tarih
					and the second
	PART 7 - PENSION INFORMA	TIO	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?				~
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?

Construction In Progress (CIP)

Accumulated Depreciation/Amortization (Please enter a negative, or credit, balance)

Leased Right-to-Use Assets

Other (explain):

TOTAL

Please use this space to provide any explanations or comments:

PART 8 - BUDGET INFORMATION						
	Please answer the following questions by marking in the appropriate boxes.	Yes	No	N/A		
8-1	Did the entity file a budget with the Department of Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.?	J				
8-2	Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:	7				
If yes:	Please indicate the amount budgeted for each fund for the year reported:					

Governmental/Proprietary Fund Name	Total Appro	priations By Fund
General Fund	\$	43,650

PART 9 - TAXPAYER'S BILL OF RIGHTS (TA		
Please answer the following question by marking in the appropriate box		
9-1 Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]	Yes	No
Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent emerger reserve requirement. All governments should determine if they meet this requirement of TABOR.	ncy	
If no, MUST explain:		
PART 10 - GENERAL INFORMATION		
Please answer the following questions by marking in the appropriate boxes.	Yes	No
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?		
y source hante in the part of our ent year i		$\checkmark$
If yes: Please list the NEW name & PRIOR name:		
10-3 Is the entity a metropolitan district?		
Please indicate what services the entity provides:		
Finance and construct all or part of public improvements notated within Service Plan		
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:		~
If yes: List the name of the other governmental entity and the services provided:		
10-5 Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during		~
If yes: Date Filed:		
10-6 Does the entity have a certified Mill Levy?		~
If yes: Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):		
Bond Redemption mills		
General/Other mills		-
Total mills		-
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?

#### 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 current governing body below.	A <u>MAJORITY</u> of the members of the governing body must complete and sign in the column below.
Board	Print Board Member's Name	I James R. Blumenthal, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from
Member 1	James R. Blumenthal	audit. Signed Date: My term Expires: May, 2025
Board	Print Board Member's Name	I Reatha Blumenthal, attest I am a duly elected or appointed board member, and that I have <u>neuronally reviewed</u> and approve this application for exemption from audit.
Member 2	Reatha Blumenthal	Signed State: 3/30/2023 My term Expires: May, 2025
Board	Print Board Member's Name	I James R. Blumenthal II, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from
Member 3	James R. Blumenthal II	audit. Signed <u>James &amp; Blumenthal II</u> Date: <u>03.23.2023</u> My term Expires: May, 2025
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 exemption from audit.
Member 4	Vacant	Signed Date: My term Expires: May, 2025
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 exemption from audit.
Member 5	Vacant	Signed Date: My term Expires: May, 2025
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 6	N/A	exemption from audit. 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 7	N/A	exemption from audit. Signed Date: My term Expires:

# GOMD-Audit Exemption App-2022 (002)

Interim Agreement Report

2023-03-31

Created:	2023-03-30
By:	Corbin Fromm (corbin@frommco.us)
Status:	Out for Signature
Transaction ID:	CBJCHBCAABAAdwuTyLOHXlpc5lexpxlXK62AJBm2WM5J

#### 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.

# "GOMD-Audit Exemption App-2022 (002)" History

- Document created by Corbin Fromm (corbin@frommco.us) 2023-03-30 - 5:07:27 PM GMT- IP address: 67.165.255.82
- Document emailed to jim.blumenthal@trailersourceinc.com for signature 2023-03-30 - 5:09:14 PM GMT
- Email viewed by jim.blumenthal@trailersourceinc.com 2023-03-30 - 5:19:17 PM GMT- IP address: 65.132.98.42
- Signer jim.blumenthal@trailersourceinc.com entered name at signing as James R Blumenthal II 2023-03-30 - 5:20:03 PM GMT- IP address: 65.132.98.42
- Document e-signed by James R Blumenthal II (jim.blumenthal@trailersourceinc.com) Signature Date: 2023-03-30 - 5:20:05 PM GMT - Time Source: server- IP address: 65.132.98.42
- Document emailed to Reatha Blumenthal (reathab1@gmail.com) for signature 2023-03-30 - 5:20:08 PM GMT
- Email viewed by Reatha Blumenthal (reathab1@gmail.com) 2023-03-30 - 6:27:25 PM GMT- IP address: 198.49.6.230
- Document e-signed by Reatha Blumenthal (reathab1@gmail.com) Signature Date: 2023-03-30 - 6:29:40 PM GMT - Time Source: server- IP address: 198.49.6.230
- Document emailed to gayle blumenthal (bloomiemail@gmail.com) for signature 2023-03-30 - 6:29:43 PM GMT

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

