APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT

ADDRESS

Eastern Hills Metropolitan District No. 1 c/o Spencer Fane, LLP

For the Year Ended 12/31/23 or fiscal year ended:

CONTACT PERSON

PHONE EMAIL 1700 Lincoln Street, Suite 2000
Denver, Colorado 80203-4554
Russ Dykstra
(303) 839-3800
rdykstra@spencerfane.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 the best of my knowledge.

NAME: TITLE

FIRM NAME (if applicable)

ADDRESS

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

304 Inverness Way South, Suite 490, Englewood, CO 80112

03-689-0833

PREPARER (SIGNATURE REQUIRED)		DATE PREPARED		
Dione K Whade		Mar 19	, 2024	
Please indicate whether the following financial information is recorded	GOVERNMENTAL (MODIFIED ACCRUAL BASIS)		PROPRIETARY (CASH OR BUDGETARY BASIS)	
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#		Des	scription	Round to nearest Dollar	Please use this
2-1	Taxes:	Property	(report mills levied in Question 10-6)	\$ -	space to provide
2-2		Specific owners	ship	\$ -	any necessary explanations
2-3		Sales and use		\$ -	explanations
2-4		Other (specify):		\$ -	
2-5	Licenses and permit	ts		\$ -	
2-6	Intergovernmental:		Grants	\$ -	
2-7			Conservation Trust Funds (Lottery)	\$ -	
2-8			Highway Users Tax Funds (HUTF)	\$ -	
2-9			Other (specify):	\$ -	
2-10	Charges for services	S		\$ -	
2-11	Fines and forfeits			\$ -	
2-12	Special assessment	S		\$ -	
2-13	Investment income			\$ -	
2-14	Charges for utility s	ervices		\$ -	
2-15	Debt proceeds		(should agree with line 4-4, column 2)	*	
2-16	Lease proceeds			\$ -	
2-17	Developer Advances		(should agree with line 4-4)		
2-18	Proceeds from sale	of capital assets	3	\$ -	
2-19	Fire and police pens	sion		\$ -	
2-20	Donations			\$ -	
2-21	Other (specify):			\$ -	
2-22				\$ -	
2-23				\$ -	
2-24		(add line	es 2-1 through 2-23) TOTAL REVENUE	\$	

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 include fund equity information.					
Line#	Description		Round to nearest Dollar	Please use this		
3-1	Administrative		\$ -	space to provide		
3-2	Salaries		\$ -	any necessary explanations		
3-3	Payroll taxes		\$ -	explanations		
3-4	Contract services		\$ -			
3-5	Employee benefits		\$ -			
3-6	Insurance		\$ -			
3-7	Accounting and legal fees		\$ -			
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):					
3-24			\$ -			
3-25			\$ -			
3-26	(add lines 3-1 through 3-24) TOTAL EXPEND	ITURES/EXPENSES	\$ -			

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>".

			1001175						
	PART 4 - DEBT OUTSTANDING), <i>F</i>	AND RI	ETH	RED		
4.4	Please answer the following questions by marking the	app	ropriate boxes.				Yes		lo
4-1	Does the entity have outstanding debt? If Yes, please attach a copy of the entity's Debt Repayment S	Sobo	dula					✓	
4-2	Is the debt repayment schedule attached? If no, MUST expla					1		☑	
4-2	N/A	III D	elow.			Ι ΄	_		
	WA								
4-3	Is the entity current in its debt service payments? If no, MUS	T e	xplain below:			J I	v		
	N/A]			
4-4	Please complete the following debt schedule, if applicable:					5 "			
	(please only include principal amounts)(enter all amount as positive		utstanding at did of prior year*	ISS	ued during	Retii	red during		nding at r-end
	numbers)	en	u or prior year		year		year	yea	-enu
	General obligation bonds	\$	-	\$	-	\$	-	\$	-
	Revenue bonds	\$	-	\$	-	\$	-	\$	-
	Notes/Loans	\$	-	\$	-	\$	-	\$	-
	Lease & SBITA** Liabilities [GASB 87 & 96]	\$	-	\$	-	\$	-	\$	-
	Developer Advances	\$	-	\$	-	\$	-	\$	-
	Other (specify):	\$	-	\$	-	\$	-	\$	-
	TOTAL	\$	-	\$	-	\$	-	\$	-
**Subscrip	ption Based Information Technology Arrangements		ust agree to prio	r yea	r-end balance				
	Please answer the following questions by marking the appropriate boxe	s.				_	Yes		lo
4-5	Does the entity have any authorized, but unissued, debt?	_	20.4	40.0	00 000 00	1	✓		
If yes:	How much?	\$			00,000.00				
	Date the debt was authorized:		11/5/2002 &	11/	4/2004				
4-6	-6 Does the entity intend to issue debt within the next calendar year?								
If yes:	How much?	\$			-	ļ			
4-7	Does the entity have debt that has been refinanced that it is	is still responsible for?)			✓	
If yes:	What is the amount outstanding?	\$			-				
4-8	Does the entity have any lease agreements?	_				1		✓	
If yes:	What is being leased?	-							
	What is the original date of the lease? Number of years of lease?	-							
	Is the lease subject to annual appropriation?							Z	
	What are the annual lease payments?	\$				1	_	_	
	Part 4 - Please use this space to provide any explanations/co	1 7	ents or attack	1 50	narate doc	umen	tation if r	hahaa	
	i ait - i lease use tills space to provide ally explanations/co		enta or attact	. 56	parate duc	umen	tation, II I	ieeueu	

	Please provide the entity's cash deposit and investment balances.		Ar	nount		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):					
			\$	-		
i-3			\$	-	╛	
,-5			\$	-	╛	
			\$	-		
	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.?	V	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.)?	Ø				

	PART 6 - CAPITAL AND RIC	GHT-TO-U	ISE ASSE	TS	
	Please answer the following questions by marking in the appropriate box	es.		Yes	No
6-1	Does the entity have capital assets?				Ø
6-2	Has the entity performed an annual inventory of capital asset 29-1-506, C.R.S.,? If no, MUST explain:	with Section	☑		
6-3	Complete the following capital & right-to-use assets table:	Balance - beginning of the year*	Additions (Must be included in Part 3)	Deletions	Year-End Balance
	Land	\$ -	\$ -	\$ -	\$ -
	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)	\$ -	\$ -	\$ -	\$ -
	TOTAL	\$ -	\$ -	\$ -	\$ -

*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	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?				v		
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	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 explanations	or c	omments	:			

	PART 8 - BUDGET II	VFORMA1	ION		
	Please answer the following questions by marking in the appropriate boxe	s.	Yes	No	N/A
8-1	Did the entity file a budget with the Department of Local Affairs for in accordance with Section 29-1-113 C.R.S.? If no, MUST explain:	id the entity file a budget with the Department of Local Affairs for the current year		_	
8-2	Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:				
If yes:	Please indicate the amount budgeted for each fund for the year	r reported:			
	Governmental/Proprietary Fund Name	Total Appropriati	ons By Fund		
		\$	30,900		

	PART 9 - TAXPAYER'S BILL OF RIGHTS (TABOR)				
	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)]?	Ø			
	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.	<u> </u>			

If no, MUST explain:

	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?		. ☑			
If yes:	Date of formation:]				
10-2	Has the entity changed its name in the past or current year?		☑			
If yes:	Please list the NEW name & PRIOR name:	1				
40.0	In the position a maximum eliterary district O	_	_			
10-3	Is the entity a metropolitan district?	☑				
	Please indicate what services the entity provides: Street, trafficy control, water, sewer, park and recreation	1				
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:	J	Ξ.			
11 you.	List the hame 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		☑			
If yes:	Date Filed:	1				
,						
10-6	Does the entity have a certified Mill Levy?		v			
If yes:						
, ,	Please provide the following mills levied for the year reported (do not report \$ amounts):					
	Bond Redemption mills		-			
	General/Other mills -					
	Total mills		-			
	Yes	No	N/A			
	NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has					
10-7	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.	1				

Please use this space to provide any additional explanations or comments not previously 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?	v	_		

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	I Thomas 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 Date: Mar 20, 2024 My term Expires:May 2025
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. Signet
Board Member 3	Print Board Member's Name Josh Brgoch	IJosh Brgoch, 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 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

Eastern Hills MD 1 2023

Final Audit Report 2024-03-20

Created: 2024-03-20

By: Diane Wheeler (diane@simmonswheeler.com)

Status: Signed

Transaction ID: CBJCHBCAABAAhf7xXtDdY08nQ2OldHRqmMew_DC9IMMS

"Eastern Hills MD 1 2023" History

- Document created by Diane Wheeler (diane@simmonswheeler.com) 2024-03-20 0:59:42 AM GMT
- Document emailed to Diane Wheeler (diane@simmonswheeler.com) for signature 2024-03-20 1:00:45 AM GMT
- Document emailed to Tom Clark (tclark@ventanacap.com) for signature 2024-03-20 1:00:45 AM GMT
- Document emailed to Bryan Horan (bhoran@ventanacap.com) for signature 2024-03-20 1:00:45 AM GMT
- Document emailed to Joshua Brgoch (jbrgoch@ventanacap.com) for signature 2024-03-20 1:00:45 AM GMT
- Document e-signed by Diane Wheeler (diane@simmonswheeler.com)

 Signature Date: 2024-03-20 1:00:52 AM GMT Time Source: server
- Email viewed by Tom Clark (tclark@ventanacap.com) 2024-03-20 1:54:08 PM GMT
- Email viewed by Joshua Brgoch (jbrgoch@ventanacap.com)
 2024-03-20 1:55:07 PM GMT
- Document e-signed by Tom Clark (tclark@ventanacap.com)
 Signature Date: 2024-03-20 1:55:12 PM GMT Time Source: server
- Document e-signed by Joshua Brgoch (jbrgoch@ventanacap.com)
 Signature Date: 2024-03-20 1:55:44 PM GMT Time Source: server
- Email viewed by Bryan Horan (bhoran@ventanacap.com) 2024-03-20 5:33:01 PM GMT



Document e-signed by Bryan Horan (bhoran@ventanacap.com)
Signature Date: 2024-03-20 - 5:33:11 PM GMT - Time Source: server

Agreement completed. 2024-03-20 - 5:33:11 PM GMT