

APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

NAME OF GOVERNMENT	Kiteley Ranch Metropolitan District
ADDRESS	8390 E Crescent Parkway
	Suite 300
	Greenwood Village, CO 80111
CONTACT PERSON	Carrie Bartow
PHONE	303-779-5710
EMAIL	Carrie.Bartow@claconnect.com

For the Year Ended  
12/31/2022  
or fiscal year ended:

CERTIFICATION OF PREPARER

I certify 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 independent 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.

NAME:	Carrie Bartow
TITLE	Accountant for the District
FIRM NAME (if applicable)	CliftonLarsonAllen LLP
ADDRESS	8390 E Crescent Parkway, Suite 300, Greenwood Village, CO 80111
PHONE	303-779-5710
DATE PREPARED	3/23/2023
RELATIONSHIP TO ENTITY	CPA Firm providing accounting services to the District

PREPARER (SIGNATURE REQUIRED)

SEE ATTACHED ACCOUNTANT'S COMPILATION REPORT

Has the entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status during the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-104 (3), C.R.S.]	YES	NO	If Yes, date filed:
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

## PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

\* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

		Governmental Funds		Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page				
Line #	Description	Fund*	Fund*	Description	Fund*		Fund*			
Assets				Assets						
1-1	Cash & Cash Equivalents	\$	12,391	\$	-	Cash & Cash Equivalents	\$	-	\$	-
1-2	Investments	\$	835,177	\$	-	Investments	\$	-	\$	-
1-3	Receivables	\$	813	\$	-	Receivables	\$	-	\$	-
1-4	Due from Other Entities or Funds	\$	-	\$	-	Due from Other Entities or Funds	\$	-	\$	-
1-5	Property Tax Receivable	\$	435,714	\$	-	Other Current Assets [specify...]				
	All Other Assets [specify...]						\$	-	\$	-
1-6	Prepaid Insurance	\$	3,044	\$	-	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	\$	1,287,139	\$	-	(add lines 1-1 through 1-10) TOTAL ASSETS	\$	-	\$	-
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	\$	-	\$	-
1-15	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$	1,287,139	\$	-	TOTAL ASSETS AND DEFERRED OUTFLOWS	\$	-	\$	-
Liabilities				Liabilities						
1-16	Accounts Payable	\$	3,148	\$	-	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	\$	3,148	\$	-	(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	\$	3,148	\$	-	(add lines 1-21 through 1-26) TOTAL LIABILITIES	\$	-	\$	-
Deferred Inflows of Resources:				Deferred Inflows of Resources						
1-28	Deferred Property Taxes	\$	435,714	\$	-	Pension/OPEB Related	\$	-	\$	-
1-29	Lease related (as lessor)	\$	-	\$	-	Other [specify...]	\$	-	\$	-
1-30	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	\$	435,714	\$	-	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	\$	-	\$	-
Fund Balance				Net Position						
1-31	Nonspendable Prepaid	\$	3,044	\$	-	Net Investment in Capital Assets	\$	-	\$	-
1-32	Nonspendable Inventory	\$	-	\$	-					
1-33	Restricted [specify...] TABOR Emergency Reserve	\$	6,300	\$	-	Emergency Reserves	\$	-	\$	-
1-34	Committed [specify...]	\$	-	\$	-	Other Designations/Reserves	\$	-	\$	-
1-35	Assigned [specify...]	\$	-	\$	-	Restricted	\$	-	\$	-
1-36	Unassigned:	\$	838,933	\$	-	Undesignated/Unreserved/Unrestricted	\$	-	\$	-
1-37	Add lines 1-31 through 1-36 This total should be the same as line 3-33 TOTAL FUND BALANCE	\$	848,277	\$	-	Add lines 1-31 through 1-36 This total should be the same as line 3-33 TOTAL NET POSITION	\$	-	\$	-
1-38	Add lines 1-27, 1-30 and 1-37 This total should be the same as line 1-15 TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND BALANCE	\$	1,287,139	\$	-	Add lines 1-27, 1-30 and 1-37 This total should be the same as line 1-15 TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET POSITION	\$	-	\$	-

## PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		Governmental Funds				Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
Line #	Description	Fund*	Fund*	Description	Fund*	Fund*		
<b>Tax Revenue</b>				<b>Tax Revenue</b>				
2-1	Property [include mills levied in Question 10-6]	\$ 193,160	\$ -	Property [include mills levied in Question 10-6]	\$ -	\$ -		
2-2	Specific Ownership	\$ 11,432	\$ -	Specific Ownership	\$ -	\$ -		
2-3	Sales and Use Tax	\$ -	\$ -	Sales and Use Tax	\$ -	\$ -		
2-4	Other Tax Revenue [specify...]:	\$ -	\$ -	Other Tax Revenue [specify...]:	\$ -	\$ -		
2-5		\$ -	\$ -		\$ -	\$ -		
2-6		\$ -	\$ -		\$ -	\$ -		
2-7		\$ -	\$ -		\$ -	\$ -		
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ 204,592	\$ -	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ -	\$ -		
2-9	Licenses and Permits	\$ -	\$ -	Licenses and Permits	\$ -	\$ -		
2-10	Highway Users Tax Funds (HUTF)	\$ -	\$ -	Highway Users Tax Funds (HUTF)	\$ -	\$ -		
2-11	Conservation Trust Funds (Lottery)	\$ -	\$ -	Conservation Trust Funds (Lottery)	\$ -	\$ -		
2-12	Community Development Block Grant	\$ -	\$ -	Community Development Block Grant	\$ -	\$ -		
2-13	Fire & Police Pension	\$ -	\$ -	Fire & Police Pension	\$ -	\$ -		
2-14	Grants	\$ -	\$ -	Grants	\$ -	\$ -		
2-15	Donations	\$ -	\$ -	Donations	\$ -	\$ -		
2-16	Charges for Sales and Services	\$ -	\$ -	Charges for Sales and Services	\$ -	\$ -		
2-17	Rental Income	\$ -	\$ -	Rental Income	\$ -	\$ -		
2-18	Fines and Forfeits	\$ -	\$ -	Fines and Forfeits	\$ -	\$ -		
2-19	Interest/Investment Income	\$ 5,177	\$ -	Interest/Investment Income	\$ -	\$ -		
2-20	Tap Fees	\$ -	\$ -	Tap Fees	\$ -	\$ -		
2-21	Proceeds from Sale of Capital Assets	\$ -	\$ -	Proceeds from Sale of Capital Assets	\$ -	\$ -		
2-22	All Other [specify...]:	\$ -	\$ -	All Other [specify...]:	\$ -	\$ -		
2-23		\$ -	\$ -		\$ -	\$ -		
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ 209,769	\$ -	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ -	\$ -		
<b>Other Financing Sources</b>				<b>Other Financing Sources</b>				
2-25	Debt Proceeds	\$ -	\$ -	Debt Proceeds	\$ -	\$ -		
2-26	Lease Proceeds	\$ -	\$ -	Lease Proceeds	\$ -	\$ -		
2-27	Developer Advances	\$ -	\$ -	Developer Advances	\$ -	\$ -		
2-28	Other [specify...]:	\$ -	\$ -	Other [specify...]:	\$ -	\$ -		
2-29	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES	\$ -	\$ -	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES	\$ -	\$ -		
2-30	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ 209,769	\$ -	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ -	\$ -	GRAND TOTALS	
								\$ 209,769

IF GRAND TOTAL REVENUES AND OTHER FINANCING SOURCES for all funds (Line 2-29) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

# PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES

		Governmental Funds		Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page	
Line #	Description	Fund*	Fund*	Description	Fund*		Fund*
	<b>Expenditures</b>			<b>Expenses</b>			
3-1	General Government	\$ 30,383	\$ -	General Operating & Administrative	\$ -	\$ -	
3-2	Judicial	\$ -	\$ -	Salaries	\$ -	\$ -	
3-3	Law Enforcement	\$ -	\$ -	Payroll Taxes	\$ -	\$ -	
3-4	Fire	\$ -	\$ -	Contract Services	\$ -	\$ -	
3-5	Highways & Streets	\$ -	\$ -	Employee Benefits	\$ -	\$ -	
3-6	Solid Waste	\$ -	\$ -	Insurance	\$ -	\$ -	
3-7	Contributions to Fire & Police Pension Assoc.	\$ -	\$ -	Accounting and Legal Fees	\$ -	\$ -	
3-8	Health	\$ -	\$ -	Repair and Maintenance	\$ -	\$ -	
3-9	Culture and Recreation	\$ -	\$ -	Supplies	\$ -	\$ -	
3-10	Transfers to other districts	\$ -	\$ -	Utilities	\$ -	\$ -	
3-11	Other [specify...]:	\$ -	\$ -	Contributions to Fire & Police Pension Assoc.	\$ -	\$ -	
3-12		\$ -	\$ -	Other [specify...]	\$ -	\$ -	
3-13		\$ -	\$ -		\$ -	\$ -	
3-14	Capital Outlay	\$ -	\$ -	Capital Outlay	\$ -	\$ -	
	Debt Service			Debt Service			
3-15	Principal (should match amount in 4-4)	\$ -	\$ -	Principal (should match amount in 4-4)	\$ -	\$ -	
3-16	Interest	\$ -	\$ -	Interest	\$ -	\$ -	
3-17	Bond Issuance Costs	\$ -	\$ -	Bond Issuance Costs	\$ -	\$ -	
3-18	Developer Principal Repayments	\$ 22,999	\$ -	Developer Principal Repayments	\$ -	\$ -	
3-19	Developer Interest Repayments	\$ 1,913	\$ -	Developer Interest Repayments	\$ -	\$ -	
3-20	All Other [specify...]:	\$ -	\$ -	All Other [specify...]:	\$ -	\$ -	
3-21		\$ -	\$ -		\$ -	\$ -	
3-22	<b>Add lines 3-1 through 3-21 TOTAL EXPENDITURES</b>	\$ 55,295	\$ -	<b>Add lines 3-1 through 3-21 TOTAL EXPENSES</b>	\$ -	\$ -	<b>GRAND TOTAL</b>
3-23	Interfund Transfers (In)	\$ -	\$ -	Net Interfund Transfers (In) Out	\$ -	\$ -	
3-24	Interfund Transfers Out	\$ -	\$ -	Other [specify...][enter negative for expense]	\$ -	\$ -	
3-25	Other Expenditures (Revenues):	\$ -	\$ -	Depreciation/Amortization	\$ -	\$ -	
3-26		\$ -	\$ -	Other Financing Sources (Uses) (from line 2-28)	\$ -	\$ -	
3-27		\$ -	\$ -	Capital Outlay (from line 3-14)	\$ -	\$ -	
3-28		\$ -	\$ -	Debt Principal (from line 3-15, 3-18)	\$ -	\$ -	
3-29	<b>(Add lines 3-23 through 3-28) TOTAL TRANSFERS AND OTHER EXPENDITURES</b>	\$ -	\$ -	<b>(Line 3-27, plus line 3-28, less line 3-26, less line 3-25, plus line 3-24) TOTAL GAAP RECONCILING ITEMS</b>	\$ -	\$ -	
3-30	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures Line 2-29, less line 3-22, less line 3-29	\$ 154,474	\$ -	Net Increase (Decrease) in Net Position Line 2-29, less line 3-22, plus line 3-29, less line 3-23	\$ -	\$ -	
3-31	Fund Balance, January 1 from December 31 prior year report	\$ 693,803	\$ -	Net Position, January 1 from December 31 prior year report	\$ -	\$ -	
3-32	Prior Period Adjustment (MUST explain)	\$ -	\$ -	Prior Period Adjustment (MUST explain)	\$ -	\$ -	
3-33	Fund Balance, December 31 Sum of Lines 3-30, 3-31, and 3-32 This total should be the same as line 1-37.	\$ 848,277	\$ -	Net Position, December 31 Sum of Lines 3-30, 3-31, and 3-32 This total should be the same as line 1-37.	\$ -	\$ -	

IF GRAND TOTAL EXPENDITURES for all funds (Line 3-22) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

## PART 4 - DEBT OUTSTANDING, ISSUED, AND RETIRED

Please answer the following questions by marking the appropriate boxes.

YES

NO

Please use this space to provide any explanations or comments:

4-1 Does the entity have outstanding debt?

☐☒

4-2 Is the debt repayment schedule attached? If no, MUST explain:

☐☒

N/A

4-3 Is the entity current in its debt service payments? If no, MUST explain:

☐☒

N/A

4-4 Please complete the following debt schedule, if applicable: (please only include principal amounts)

	Outstanding at beginning of year*	Issued during year	Retired during year	Outstanding at year-end
General obligation bonds	\$ -	\$ -	\$ -	\$ -
Revenue bonds	\$ -	\$ -	\$ -	\$ -
Notes/Loans	\$ -	\$ -	\$ -	\$ -
Lease Liabilities	\$ -	\$ -	\$ -	\$ -
Developer Advances	\$ 33,375	\$ -	\$ 22,999	\$ 10,376
Other (specify):	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 33,375</b>	<b>\$ -</b>	<b>\$ 22,999</b>	<b>\$ 10,376</b>

\*must agree to prior year ending balance

Please answer the following questions by marking the appropriate boxes.

YES

NO

4-5 Does the entity have any authorized, but unissued, debt [Section 29-1-605(2) C.R.S.]?

☒☐

How much?

\$ 97,500,000

If yes:

Date the debt was authorized:

11/7/2006

4-6 Does the entity intend to issue debt within the next calendar year?

☐☒

How much?

\$ -

4-7 Does the entity have debt that has been refinanced that it is still responsible for?

☐☒

What is the amount outstanding?

\$ -

4-8 Does the entity have any lease agreements?

☐☒

What is being leased?

What is the original date of the lease?

Number of years of lease?

Is the lease subject to annual appropriation?

☐☐

What are the annual lease payments?

\$ -

## PART 5 - CASH AND INVESTMENTS

Please provide the entity's cash deposit and investment balances.

AMOUNT

TOTAL

Please use this space to provide any explanations or comments:

5-1 YEAR-END Total of ALL Checking and Savings accounts

\$ 12,391

5-2 Certificates of deposit

\$ -

TOTAL CASH DEPOSITS

\$ 12,391

Investments (if investment is a mutual fund, please list underlying investments):

5-3	COLOTRUST	\$ 835,177	
		\$ -	
		\$ -	
		\$ -	
		\$ -	
	<b>TOTAL INVESTMENTS</b>		\$ 835,177
	<b>TOTAL CASH AND INVESTMENTS</b>		\$ 847,568

Please answer the following question by marking in the appropriate box

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.)? If no, MUST explain:

☒☐☐

PART 6 - CAPITAL AND RIGHT-TO-USE ASSETS

Please answer the following question by marking in the appropriate box

YESNO

Please use this space to provide any explanations or comments:

6-1 Does the entity have capitalized assets?

☐☒

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

N/A - The District has no capital assets.

Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS:	Balance - beginning of the year <sup>1</sup>	Additions <sup>2</sup>	Deletions	Year-End Balance
Land	\$ -	\$ -	\$ -	\$ -
Buildings	\$ -	\$ -	\$ -	\$ -
Machinery and equipment	\$ -	\$ -	\$ -	\$ -
Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Leased Right-to-Use Assets	\$ -	\$ -	\$ -	\$ -
Intangible Assets	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ -	\$ -	\$ -	\$ -
Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -

6-4

Complete the following Capital & Right-To-Use Assets table for PROPRIETARY FUNDS:

Complete the following Capital & Right-To-Use Assets table for PROPRIETARY FUNDS:	Balance - beginning of the year <sup>*</sup>	Additions	Deletions	Year-End Balance
Land	\$ -	\$ -	\$ -	\$ -
Buildings	\$ -	\$ -	\$ -	\$ -
Machinery and equipment	\$ -	\$ -	\$ -	\$ -
Furniture and fixtures	\$ -	\$ -	\$ -	\$ -
Infrastructure	\$ -	\$ -	\$ -	\$ -
Construction In Progress (CIP)	\$ -	\$ -	\$ -	\$ -
Leased Right-to-Use Assets	\$ -	\$ -	\$ -	\$ -
Intangible Assets	\$ -	\$ -	\$ -	\$ -
Other (explain):	\$ -	\$ -	\$ -	\$ -
Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -
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

PART 7 - PENSION INFORMATION

\*

YESNO

Please use this space to provide any explanations or comments:

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?

\$ -

PART 8 - BUDGET INFORMATION						
Please answer the following question by marking in the appropriate box			YES	NO	N/A	Please use this space to provide any explanations or comments:
8-1	Did the entity file a current year budget with the Department of Local Affairs, in accordance with Section 29-1-113 C.R.S.? If no, MUST explain:		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8-2	Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If yes: Please indicate the amount appropriated for each fund separately for the year reported						
Governmental/Proprietary Fund Name			Total Appropriations By Fund			
General Fund - Amended			\$ 61,000			
			\$ -			
			\$ -			
			\$ -			

PART 9 - TAX PAYER'S BILL OF RIGHTS (TABOR)					
Please answer the following question by marking in the appropriate box			YES	NO	Please use this space to provide any explanations or comments:
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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					
Please answer the following question by marking in the appropriate box			YES	NO	Please use this space to provide any explanations or comments:
10-1	Is this application for a newly formed governmental entity?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
If yes: Date of formation:					
10-2	Has the entity changed its name in the past or current year?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
If Yes: NEW name					
PRIOR name					
10-3	Is the entity a metropolitan district?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10-4	Please indicate what services the entity provides:				
see below					
10-5	Does the entity have an agreement with another government to provide services?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
If yes: List the name of the other governmental entity and the services provided:					
10-6	Does the entity have a certified mill levy?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If yes: Please provide the number of <u>mills</u> levied for the year reported (do not enter \$ amounts):					
Bond Redemption mills			0.000		
General/Other mills			65.000		
Total mills			65.000		
Please use this space to provide any additional explanations or comments not previously included:					
10-4: The primary purposes of the District are as follows: providing financing for the acquisition, completion, and construction of public improvements as well as equipping, managing, operating, and providing maintenance for public improvements and the other services needed to serve the Kiteley Ranch Development.					

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## PART 12 - 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 Procedures

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 EchSign. 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 EchSign 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 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 ALL 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	
1	Chad Ellington	I, Chad Ellington, 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 <u>Chad Ellington</u> Date: <u>3/24/2023</u> My term Expires: 2023
2	Donald Jobe	I, Donald Jobe, 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 <u>Donald Jobe</u> Date: <u>3/27/2023</u> My term Expires: 2025
3	Anthony Loeffler	I, Anthony Loeffler, 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 <u>Anthony Loeffler</u> Date: <u>3/24/2023</u> My term Expires: 2023
4	Christine Loeffler	I, Christine Loeffler, 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: 2025
5	Shallene Ellington	I, Shallene Ellington, 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 <u>Shallene Ellington</u> Date: <u>3/27/2023</u> My term Expires: 2023
6		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: _____
7		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: _____



**CliftonLarsonAllen LLP**

8390 East Crescent Pkwy., Suite 300  
Greenwood Village, CO 80111

phone 303-779-5710 fax 303-779-0348

**CLAAconnect.com**

## **Accountant's Compilation Report**

Board of Directors  
Kiteley Ranch Metropolitan District  
Weld, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Kiteley Ranch Metropolitan District as of and for the year ended December 31, 2022, included in the accompanying prescribed form. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the American Institute of Certified Public Accountants. We did not audit or review the financial statements included in the accompanying prescribed form nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the financial statements included in the accompanying prescribed form.

The Application for Exemption from Audit is presented in accordance with the requirements of the Colorado Office of the State Auditor, which differ from accounting principles generally accepted in the United States of America.

This report is intended solely for the information and use of the Colorado Office of the State Auditor and is not intended to be and should not be used by anyone other than this specified party.

We are not independent with respect to Kiteley Ranch Metropolitan District.

Greenwood Village, Colorado  
March 23, 2023

**Certificate Of Completion**

Envelope Id: 4537AA9ECE044C8DBDDAA9BA53606F71

Status: Completed

Subject: Complete with DocuSign: Kiteley Ranch MD - 2022 Audit Exemption.pdf

Client Name: Kiteley Ranch Metropolitan District

Client Number: A172911

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Document Pages: 10

Signatures: 4

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Spencer Johnson

220 S 6th St Ste 300

Minneapolis, MN 55402-1418

spencer.johnson@claconnect.com

IP Address: 50.169.146.162

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3/24/2023 3:17:07 PM

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spencer.johnson@claconnect.com

Location: DocuSign

**Signer Events**

Anthony Loeffler

anthony@ssprops.com

Security Level: Email, Account Authentication  
(None)**Signature**DocuSigned by:  
  
2F3013C097384D3...

Signature Adoption: Pre-selected Style

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**Timestamp**

Sent: 3/24/2023 3:32:24 PM

Viewed: 3/24/2023 3:34:27 PM

Signed: 3/24/2023 3:34:36 PM

**Electronic Record and Signature Disclosure:**

Accepted: 3/24/2023 3:34:27 PM

ID: 70c8f66d-4b0d-4c6d-920d-a299e742ad78

Chad Ellington

chad@peakdevgrp.com

Manager

Security Level: Email, Account Authentication  
(None)DocuSigned by:  
  
90429E1E0A384C3...

Signature Adoption: Pre-selected Style

Using IP Address: 50.218.89.150

Sent: 3/24/2023 3:32:25 PM

Viewed: 3/24/2023 3:41:10 PM

Signed: 3/24/2023 3:41:19 PM

**Electronic Record and Signature Disclosure:**

Accepted: 3/24/2023 3:41:10 PM

ID: 2fa55ce2-cb26-466e-9b9b-4eb6f283b309

Donald Jobe

Don\_Jobe@oxy.com

Attorney-in-fact

OXY, Inc.

Security Level: Email, Account Authentication  
(None)DocuSigned by:  
  
F2D7F29ADFE0436...

Signature Adoption: Pre-selected Style

Using IP Address: 161.69.54.14

Sent: 3/24/2023 3:32:26 PM

Viewed: 3/27/2023 8:47:41 AM

Signed: 3/27/2023 8:56:24 AM


**Electronic Record and Signature Disclosure:**

Accepted: 9/17/2020 2:21:32 PM

ID: 8c1e70a5-c25e-4386-b908-804bc9f4c12a

Shellene Ellington

shellene.ellington@gmail.com

Security Level: Email, Account Authentication  
(None)DocuSigned by:  
  
1869403B7FB04D4...

Signature Adoption: Drawn on Device

Using IP Address: 8.53.106.29

Signed using mobile

Sent: 3/24/2023 3:32:27 PM

Viewed: 3/27/2023 7:06:03 AM

Signed: 3/27/2023 7:07:47 AM

**Electronic Record and Signature Disclosure:**

Signer Events	Signature	Timestamp
Accepted: 9/20/2020 2:07:01 PM ID: d787e7f2-270f-4c88-9b59-4985af8e3268		
In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	3/24/2023 3:32:27 PM
Envelope Updated	Security Checked	3/27/2023 10:59:32 AM
Certified Delivered	Security Checked	3/27/2023 7:06:03 AM
Signing Complete	Security Checked	3/27/2023 7:07:47 AM
Completed	Security Checked	3/27/2023 10:59:32 AM
Payment Events	Status	Timestamps
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ii. send us an email to [BusinessTechnology@CLAconnect.com](mailto:BusinessTechnology@CLAconnect.com) and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

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