## **Heather Kolin**

From:	Carroll, Jason <jason.carroll@claconnect.com></jason.carroll@claconnect.com>
Sent:	Thursday, March 20, 2014 4:29 PM
To:	Heather Kolin
Cc:	Ann Finn
Subject:	RE: Crowfoot Valley Ranch Metropolitan District Nos. 1 and 2; 2013 Audit Exemption
Attachments:	SIGNED AUDIT EXEMPTION_2013.pdf; SIGNED AUDIT EXEMPTION_2013(1).pdf

Here you are. These have been filed with the state.

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Information received by or sent from this system is subject to review by supervisory personnel, is retained and may be produced to regulatory authorities or others with a legal right to the information.

From: Heather Kolin [mailto:hkolin@sdmsi.com]
Sent: Tuesday, March 18, 2014 3:47 PM
To: Carroll, Jason
Cc: Larsen, Leslie H. (<u>LLarsen@spencerfane.com</u>); Anna Mercurio; Kristen Ebert (<u>Kristen.Ebert@Cliftonlarsonallen.com</u>)
Subject: Crowfoot Valley Ranch Metropolitan District Nos. 1 and 2; 2013 Audit Exemption

Hi, Jason,

I wanted to check with you on the above-referenced districts' applications for exemption from audit for 2013. Please let me know if you will need me to assist you with any part of this. I'm happy to help, but wanted to make sure we are on the same page. Please let me know how you would like to handle the applications this year.

Thank you!

Heather Kolin Administrative Assistant Special District Management Services, Inc.

## APPLICATION FOR EXEMPTION FROM AUDIT - <u>SHORT FORM</u> - FOR GOVERNMENTS WITH REVENUES AND EXPENDITURES OF \$100,000 OR LESS

Name of Government:	Crowfoot Valley Ranch Metropolitan District No. 2	For the Fiscal Year	
Address:	8390 E. Crescent Parkway	Ended December 31, 2013	
	Suite 600	or fiscal year ended:	
	Greenwood Village, CO 80111		
Contact Person:	Jason Carroll		
Telephone:	303-779-5710		
Email:	jason.carroll@claconnect.com		
Fax:	720-482-6668		

Return to: Office of the State Auditor Local Government Audit Division 1525 Sherman St., 7th Floor Denver, CO 80203 Fax: 303-866-4062 Email: OSA.LG@state.co.us Call (303) 869-3000 if you need help completing this form.

PLEASE READ THE ABOVE INSTRUCTIONS BEFORE SUBMITTING

Section 29-1-604, C.R.S., outlines the provisions for an exemption from audit. Generally, any local government for which neither revenues nor expenditures exceed \$500,000 in any fiscal year may qualify for an exemption. If either revenues or expenditures are \$100,000 or greater, but not more than \$500,000, you may NOT use this form. Please use the LONG FORM of this application. If both revenues and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides and expenditures are less than \$100,000 in any fixed provides are less

#### Please review ALL instructions prior to the completion of this form.

Instructions:

- 1. Prepare this form completely and accurately. Please note that there are 11 parts to this form, and all questions must be answered for the application to be considered complete.
- 2. File this form with the Office of the State Auditor within 3 months after the end of the fiscal year.
- For years ended December 31, the form must be received by the Office of the State Auditor by March 31.
- 3. The form must be completed by a person skilled in governmental accounting.
- 4. The application must be personally reviewed and approved by a majority of the governing body as evidenced by one of the following methods:
  - a. Resolution of the governing body application may be emailed, faxed, or mailed.
- b. Original signatures application must be mailed. Email or fax will NOT be accepted.
- 5. The preparer must sign the application that is submitted in order for it to be accepted.
- 6. Additional information may be attached to the exemption at the preparer's discretion.

CERTIFICATION OF PREPARER			
certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to the best of my			
Name:	Jason Carroli		
Title:	Accountant for the District		
Firm Name (if applicable):	CliftonLarsonAllen LLP		
Address:	8390 E. Crescent Parkway, Suite 600, Greenwood Village, CO 80111		
Telephone Number:	303-779-5710		
Date Prepared:	February 19, 2014		

# Preparer Signature (Required): The application will be rejected if not signed by the preparer. SEE ACCOUNTANT'S COMPILATION REPORT

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

	PART 2 - REVENUE		
	REVENUE: All revenues for all funds must be reflected in this section, including proceeds fr equipment, and proceeds from debt or lease transactions. Financial information will not inclu	om the sale of the gov ude fund equity informa	ernment's land, building, and ation.
Line#	Description		(Omit cents)
2-1	Taxes: Property	\$	22,045
2-2	Specific ownership	\$	1,849
2-3	Sales and use	\$	
2-4	Other (specify):	\$	-
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):	\$	-
2~10	Charges for services	\$	_
2-11	Fines and forfeits	\$	
2-12	Special assessments	\$	-
2-13	Investment income	\$	9
2-14	Charges for utility services	\$	
2-15	Debt proceeds (should agree with line 4-3, column 2)	\$	-
2-16	Lease proceeds	\$	
2-17	Developer Advances received (should agree with line 4-3)	\$	-
2-18	Proceeds from sale of capital assets	\$	-
2-19	Fire and police pension	\$	-
2-20	Other (specify):	\$	
2-21		\$	
2-22		\$	*
2-23		\$	•
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE all sour	ces \$	23,903

PAR	ТЗ-	EXP	END	ITUR	ES

F

Line#	Description	(Omit cents)	
3-1	Administrative	\$	331
3-2	Salaries	\$	-
3-3	Payroll taxes	\$	-
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	Culture and recreation	\$	-
3-15	Utility operations	\$	-
3-16	Capital outlay (should agree with line 6-1, column 2)	\$	-
3-17	Debt service principal (should agree with line 4-3, column 2)	\$	-
3-18	Debt service interest	\$	-
3-19	Repayment of Developer Advances (should agree with line 4-3)	\$	-
3-20	Contribution to pension plan (should agree to line 7-2)	\$	-
3-21	Contribution to Fire & Police Pension Assoc. (should agree to line 7-2)	\$	-
3-22	Other (specify): Transfer to Crowfoot Valley Ranch Metro District No. 1	\$	21,65
3-23	Payment to Town of Castle Rock - Fire Protection IGA	\$	1,91
3-24		\$	~
3-25	(add lines 3-1 through 3-24) TOTAL EXPENDITURES all categories	\$	23,89

not use this form. Please use the "Application for Exemption from Audit - Long Form".

	PART 4 - DEBT OUTSTANDING				T
	Please answer the following questions by marking	the appropriate bo	xes.	Yes	No
4-1	Does the entity have outstanding debt?				X
	Is the debt repayment schedule attached? If no, please explain:				
4-2	Is the entity current in its debt service payments? If no, please expla	in <sup>.</sup>			N/A
-1-2					
4-3	Disease complete the following debt ashed data if englishing				
	Please complete the following debt schedule, if applicable:	Outstanding at	Issued during	Retired during	Outstanding
	(please only include principal amounts)	end of prior year	fiscal year	fiscal year	fiscal year-er
	General obligation bonds	\$ -	\$ -	\$ -	\$ -
	Revenue bonds	\$ -	\$-	\$ -	\$ -
	Notes/Loans	\$ -	\$ -	\$ -	\$ -
	Leases	\$ -	\$ -	- S	\$ -
	Developer Advances	\$ -	\$ -	\$ -	\$ -
	Other (specify):	\$ -	\$ -	\$ -	\$ -
	Total:	\$ -	\$ -	- -	\$ -
	Please answer the following questions by marking the appropri	ate boxes.		Yes	No
4-4	Does the entity have any authorized, but unissued, debt?			x x	1
If yes:	How much?	1\$ 1	,066,700,000.00	- <del>1</del>	
ii yeo.	Date the debt was authorized:	11/05/02, 11/07			
		1			<i>Yana ana ya ma</i>
4-5	Does the entity intend to issue debt within the next calendar year (20		•		<u>  X</u>
f yes:	How much?	\$	*		
					Y
	Please answer the following questions by marking the appropri	ate boxes.		Yes	No
4-6	Does the entity have debt that has been refinanced that it is still resp				X
f yes:	What is the amount outstanding?	\$	-		
	Please answer the following questions by marking the appropri	ate boxes.		Yes	No
4-7	Does the entity have any lease agreements?				X
If yes:	What is being leased?	1			
	What is the original date of the lease?				
	Number of years of lease?				
					//////////////////////////////////////
	Is the lease subject to annual appropriation?				
	Is the lease subject to annual appropriation? What are the annual lease payments?	\$			
1999 - De Carlos de C	Is the lease subject to annual appropriation?				 
	Is the lease subject to annual appropriation? What are the annual lease payments?				
4-8	Is the lease subject to annual appropriation? What are the annual lease payments?				I
4-8	Is the lease subject to annual appropriation? What are the annual lease payments?				
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4-8	Is the lease subject to annual appropriation? What are the annual lease payments? Please use this space to provide any explanations or comments PART 5 - CASH AND Please provide the entity's cash deposit and investment balanc	NVESTMENTS		Amount	Total
5-1	Is the lease subject to annual appropriation? What are the annual lease payments? Please use this space to provide any explanations or comments PART 5 - CASH AND Please provide the entity's cash deposit and investment balanc Checking accounts	NVESTMENTS		\$-	Total
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Please answer the following questions by marking in the appropriate boxes.         Yes         No.           6-1         Does the entity have capital assets?         X         X           If yes:         Has the entity have capital assets?         X         X           If yes:         Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S., 21 (no. please explain:         X         X           Complete the following table:         Balance - beginning of the planting of the pl		PART 6 - CAPITA	L ASSE	ETS						
6.1     Does the entity have capital assets?     X       If yes:     His to entity parformed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.,? If no. please explain:     X       Complete the following table:     balance - beginning of the year     Additions     Deletions       Land     \$     \$     \$     \$       Buildings     \$     \$     \$     \$       Land     \$     \$     \$     \$     \$       Complete the following table:     balance - beginning of the year     Additions     Deletions     Year-End Balance - beginning of the year     Additions       Land     \$     \$     \$     \$     \$     \$     \$       Didings     \$     \$     \$     \$     \$     \$     \$       Construction in Progress (CIP)     \$     \$     \$     \$     \$     \$       Other (explain):     \$     \$     \$     \$     \$     \$       Please use this space to provide any explanations or comments:     \$     \$     \$     \$       6-2       \$     \$     \$     \$       Please answer the following quastions by marking in the appropriate boxes.     Yeas     No.       7-1     Does the entity have an 'oit hise "financia baralog and the?								res		No
CR.S., 7 If no, please explain:       Balance -         Complete the following table:       beginning of he       Additions         Paidings       \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	6-1									х
Complete the following table:         Balance         Balance           Land         \$ <td>If yes:</td> <td colspan="5"></td> <td> </td> <td></td>	If yes:									
beginning of the year         Additions         Deletions         Veraf-End Balance           Buildings         \$ - \$ - \$ - \$ - \$ - \$         \$ - \$ - \$ - \$ - \$         \$ - \$ - \$ - \$ - \$           Buildings         \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$         \$ - \$ - \$ - \$ - \$ - \$         \$ - \$ - \$ - \$ - \$ - \$ - \$           Machinery and equipment         \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -		C.R.S.,? If no, please explain:								
beginning of the year         Additions         Deletions         Vear-End Balance           Buildings         \$ - \$ - \$ - \$ - \$ - \$ - \$         \$ - \$ - \$ - \$ - \$         \$ - \$ - \$ - \$ - \$           Buildings         \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -										
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Land         year         Detailing           Buildings         \$					Δ	dditions	Del	etions		
Land         \$			-	-		uuniona		Clions	Ba	lance
Buildings         \$		Land			\$	-	\$	-	\$	
Furthure and fxtures       \$		Buildings		-		-		-		•
Construction In Progress (CIP)       \$       <			\$	-		÷		-	\$	-
Other (explain):       \$			\$	-		-		-		-
Accumulated Depreciation       \$ </td <td></td> <td></td> <td></td> <td>-</td> <td></td> <td>-</td> <td></td> <td>••</td> <td></td> <td>-</td>				-		-		••		-
Total       §       s <td></td> <td></td> <td>\$</td> <td>-</td> <td>\$</td> <td>-</td> <td>\$</td> <td>-</td> <td>\$</td> <td>-</td>			\$	-	\$	-	\$	-	\$	-
Please use this space to provide any explanations or comments:         PART 7 - PENSION INFORMATION         Please answer the following questions by marking in the appropriate boxes.       Yes       No         7-1       Does the entity have an 'old hire' firsmen's pension plan?       X       X         7-2       Does the entity have an 'old hire' firsmen's pension plan?       X       X         1f yes:       Who administers the plan?       Indicate the contributions from:       X       X         1ndicate the contributions from:       \$       -       -       -         1rdicate the contribution amount:       \$       -       -       -       -         0ther (gifts, donations, etc.):       \$       -       -       -       -         What is the monihy benefit paid for 20 years of service per retiree as of Jan 1?       \$       -       -         7-3       Please answer the following questions by marking in the appropriate boxes.       Yes       No         8-1       Did the entity pass an appropriations resolution? In no, please explain:       X       X         8-2       Did the amount appropriated for each fund for 2013:       -       -       -         8-2       Did the annount appropriated for each fund for 2013:       -       -       -			\$	-	\$	-	\$	-	\$	-
PART 7 - PENSION INFORMATION         Please answer the following questions by marking in the appropriate boxes.       Yes       No         7.1       Does the entity have an "old hite" firemen's pension plan?       X         7.2       Does the entity have a volunteer firemen's pension plan?       X         If yes:       Who administers the plan?       X         Indicate the contributions from:       \$       -         Other (glifts, donations, etc.):       \$       -         Other (glifts, donations, etc.):       \$       -         What is the monthly benefit plat for 20 years of service per retiree as of Jan 1?       \$         Please use this space to provide any explanations or comments:       Yes         7.3       No       Did the entity file a 2013 budget with the Department of Local Affairs? If no, please explain:       X         8-1       Did the entity file a 2013 budget with the Department of Local Affairs? If no, please explain:       X         8-2       Did the entity pass an appropriated for each fund for 2013:       X         If yes:       Please indicate the amount appropriated for each fund for 2013:       X         Please use this space to provide any explanations or comments:       X         8-2       Did the entity pass an appropriated for each fund for 2013:       X         Please use this space to p				-	\$	-	\$	-	\$	-
PART 7 - PENSION INFORMATION         Please answer the following questions by marking in the appropriate boxes.       Yes       No         7-1       Does the entity have a volunteer firemen's pension plan?       X         7-2       Does the entity have a volunteer firemen's pension plan?       X         If yes:       Who administers the plan?       X         Indicate the contributions from:       \$       -         State contribution amount:       \$       -         Other (gifts, donations, etc.):       \$       -         What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?       \$         Please use this space to provide any explanations or comments:       7-3         PART 8 - BUDGET INFORMATION         X         Please answer the following questions by marking in the appropriate boxes.         Yes       No         8-1         Did the entity file a 2013 budget with the Department of Local Affairs? If no, please explain:         X       If yes:         Please indicate the amount appropriated for each fund for 2013:         Yes         No         8-2         Did the entity file a 2013 budget for each fund for 2013:		Please use this space to provide any explanations or comments	5:							
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	PART 9 - TAX PAYER'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)]?	X	
	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.		
9-2	Please use this space to provide any explanations or comments:		

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10-2	Please answer the following questions by marking in the appropriate boxes. Is this application for a newly formed governmental entity? Date of formation: Has the entity changed its name in the past or current year?	Yes	No X
lf yes: 10-2	Date of formation:		X
10-2			
	Has the entity changed its name in the past or current year?	WIRE CONTRACTOR CONTRACTOR	
If Yes:	The the shirty shanged to hand in the past of carrent year		Х
	Please list the NEW name & PRIOR name:		
10-3	Is the entity a metropolitan district?	X	
10-4	Please indicate what services the entity provides:		
	Financing for sanitation, water, streets, traffic & safety controls, parks & recreation, transportation,		
	television relay & translation, mosquito control, and fire protection improvements and facilities.		
10-5	Does the entity have an agreement with another government to provide services?	X	
If yes:	List the name of the other governmental entity and the services provided:		
	1)Town of Castle Rock "Fire Protection and Emergency Response" IGA. 2)Crowfoot Valley Ranch MD		
	#1 operates, maintains & constructs improvements paid for by #2.		7 <i>000000000000000000000000000000000000</i>
10-6	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.]		<u>  X</u>
If yes:	Date Filed:		
10-7	Please use this space to provide any explanations or comments:		
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PART 11 - GOVERNING BODY APPROVAL						
Governing be	Below is the certification and approval of the governing board. By signing the board member is certifying they are a duly elected or appointed officer of the local government. Boverning board members may be verified. Also by signing, the board 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 \$100,000 or less must have an application prepared by a person skilled in governmental accounting; completed to the best of their knowledge and is accurate and true. Use additional pages if needed.					
and the second	Print the names of all current	A MAJORITY of the governing board members must complete and sign in the column				
Board Member 1	Print Board Members Name John Waggoner	I <u>John Waggoner</u> , attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit. Signed Date: My term Expires: <u>May 2014</u>				
Board Member	Print Board Members Name Becky Medina	I Becky Medina , attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit.         Signed X Chap Medica    Date: 2/27/14				
2		term Expires: May 2014 My				
Board	Print Board Members Name	I <u>Tim Bertoch</u> , attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit. Signed Date:2/27				
Member 3	Tim Bertoch	term Expires: <u>May 2016</u>				
Board Member	Print Board Members Name Erik Clore	I Erik Clore, attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit.         Signed       Date:         3 5/14       My				
4		term Expires: <u>May 2014</u>				
Board Member 5	Print Board Members Name	I, attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit. Signed Date: My				
	Print Board Members Name	term Expires:, attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption				
Board Member 6		from audit. Signed Date: My				
	Print Board Members Name	term Expires:, attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption				
Board Member 7		from audit. Signed Date: My				
		term Expires:				



CliftonLarsonAllen LLP

www.cliftonlarsonallen.com

### Accountant's Compilation Report

Board of Directors Crowfoot Valley Ranch Metropolitan District No. 2 Douglas County, Colorado

We have compiled the Application for Exemption from Audit of Crowfoot Valley Ranch Metropolitan District No. 2 as of and for the year ended December 31, 2013, included in the accompanying prescribed form. Our compilation is limited to presenting, in the form prescribed by the Colorado State Auditor's Office, information that is the representation of management. We have not audited or reviewed the accompanying Application for Exemption from Audit and, accordingly, do not express an opinion or provide any assurance about whether the Application for Exemption from Audit is in accordance with accounting principles generally accepted in the United States of America.

Management is responsible for the preparation and fair presentation of the Application for Exemption from Audit in accordance with accounting principles generally accepted in the United States of America, and for designing, implementing and maintaining internal control relevant to the preparation and fair presentation of the Application for Exemption from Audit.

Our responsibility is to conduct the compilation of the Application for Exemption from Audit in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. The objective of a compilation is to assist management in presenting financial information within the Application for Exemption from Audit without undertaking to obtain or provide any assurance that there are no material modifications that should be made to the Application for Exemption from Audit.

The Application for Exemption from Audit is presented in accordance with the requirements of the Colorado State Auditor's Office, 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 State Auditor's Office 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 Crowfoot Valley Ranch Metropolitan District No. 2.

Clifton Larson allen LLP

Greenwood Village, Colorado February 19, 2014