

**APPLICATION FOR EXEMPTION FROM AUDIT  
LONG FORM**

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

<b>NAME OF GOVERNMENT ADDRESS</b>	Weems Neighborhood Metropolitan District
	8390 E Crescent Parkway
	Suite 300
	Greenwood Village, CO 80111
<b>CONTACT PERSON</b>	Jason Carroll
<b>PHONE</b>	719-635-0330
<b>EMAIL</b>	Jason.Carroll@clacconnect.com

**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.

<b>NAME:</b>	Jason Carroll
<b>TITLE</b>	Accountant for the District
<b>FIRM NAME (if applicable)</b>	CliftonLarsonAllen LLP
<b>ADDRESS</b>	8390 E Crescent Parkway, Suite 300, Greenwood Village, CO 80111
<b>PHONE</b>	303-779-5710
<b>DATE PREPARED</b>	2/20/2023
<b>RELATIONSHIP TO ENTITY</b>	CPA Firm providing accounting services to the District

**PREPARER (SIGNATURE REQUIRED)**

**See 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.

Line #	Description	Governmental Funds		Debt Service Fund	Description	Proprietary/Fiduciary Funds		
		General Fund				Fund*	Fund*	
<b>Assets</b>								
1-1	Cash & Cash Equivalents	\$ 6,370	\$ -	-	Cash & Cash Equivalents	\$ -	\$ -	
1-2	Investments	\$ 37,316	\$ 100,604	-	Investments	\$ -	\$ -	
1-3	Receivables	\$ -	\$ -	-	Receivables	\$ -	\$ -	
1-4	Due from Other Entities or Funds	\$ 188	\$ 329	-	Due from Other Entities or Funds	\$ -	\$ -	
1-5	Property Tax Receivable	\$ 38,032	\$ 66,559	-	Other Current Assets [specify...]	\$ -	\$ -	
1-6	All Other Assets [specify...]	\$ -	\$ -	-	Total Current Assets	\$ -	\$ -	
1-7	Lease Receivable (as Lessor)	\$ -	\$ -	-	Capital & Right to Use Assets, net (from Part 6-4)	\$ -	\$ -	
1-8		\$ -	\$ -	-	Other Long Term Assets [specify...]	\$ -	\$ -	
1-9		\$ -	\$ -	-		\$ -	\$ -	
1-10		\$ -	\$ -	-		\$ -	\$ -	
1-11	<b>TOTAL ASSETS (add lines 1-1 through 1-10)</b>	\$ 81,906	\$ 167,492	-	<b>TOTAL ASSETS (add lines 1-1 through 1-10)</b>	\$ -	\$ -	
<b>Deferred Outflows of Resources:</b>								
1-12	[specify...]	\$ -	\$ -	-	[specify...]	\$ -	\$ -	
1-13	[specify...]	\$ -	\$ -	-	[specify...]	\$ -	\$ -	
1-14	<b>TOTAL DEFERRED OUTFLOWS (add lines 1-12 through 1-13)</b>	\$ -	\$ -	-	<b>TOTAL DEFERRED OUTFLOWS (add lines 1-12 through 1-13)</b>	\$ -	\$ -	
1-15	<b>TOTAL ASSETS AND DEFERRED OUTFLOWS</b>	\$ 81,906	\$ 167,492	-	<b>TOTAL ASSETS AND DEFERRED OUTFLOWS</b>	\$ -	\$ -	
<b>Liabilities</b>								
1-16	Accounts Payable	\$ 4,140	\$ -	-	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	<b>TOTAL CURRENT LIABILITIES (add lines 1-16 through 1-20)</b>	\$ 4,140	\$ -	-	<b>TOTAL CURRENT LIABILITIES (add lines 1-16 through 1-20)</b>	\$ -	\$ -	
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	<b>TOTAL LIABILITIES (add lines 1-21 through 1-26)</b>	\$ 4,140	\$ -	-	<b>TOTAL LIABILITIES (add lines 1-21 through 1-26)</b>	\$ -	\$ -	
<b>Deferred Inflows of Resources:</b>								
1-28	Deferred Property Taxes	\$ 38,032	\$ 66,559	-	Deferred Inflows of Resources	\$ -	\$ -	
1-29	Lease related (as lessor)	\$ -	\$ -	-	Pension/OPEB Related	\$ -	\$ -	
1-30	<b>TOTAL DEFERRED INFLOWS (add lines 1-28 through 1-29)</b>	\$ 38,032	\$ 66,559	-	<b>TOTAL DEFERRED INFLOWS (add lines 1-28 through 1-29)</b>	\$ -	\$ -	
<b>Fund Balance</b>								
1-31	Nonspendable Prepaid	\$ -	\$ -	-	Net Position	\$ -	\$ -	
1-32	Nonspendable Inventory	\$ -	\$ -	-	Net Investment in Capital Assets	\$ -	\$ -	
1-33	Restricted [specify...]	\$ -	\$ 100,933	-	Emergency Reserves	\$ -	\$ -	
1-34	Committed [specify...]	\$ -	\$ -	-	Other Designations/Reserves	\$ -	\$ -	
1-35	Assigned [specify...]	\$ -	\$ -	-	Restricted	\$ -	\$ -	
1-36	Unassigned:	\$ 39,733	\$ -	-	Undesignated/Unreserved/Unrestricted	\$ -	\$ -	
1-37	<b>TOTAL FUND BALANCE (add lines 1-31 through 1-36)</b>	\$ 39,733	\$ 100,933	-	<b>TOTAL FUND BALANCE (add lines 1-31 through 1-36)</b>	\$ -	\$ -	
1-38	<b>TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND BALANCE (add lines 1-27, 1-30 and 1-37)</b>	\$ 81,905	\$ 167,492	-	<b>TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET POSITION (add lines 1-27, 1-30 and 1-37)</b>	\$ -	\$ -	

Please use this space to provide explanation of any items on this page

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

Line #	Description	Governmental Funds		Debt Service Fund	Description	Proprietary/Fiduciary Funds		
		General Fund				Fund*	Fund*	
<b>Tax Revenue</b>								
2-1	Property (include mills levied in Question 10-6)	\$ 54,802	\$ 95,908		Property (include mills levied in Question 10-6)	\$ -	\$ -	
2-2	Specific Ownership	\$ 2,450	\$ 4,287		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	<b>Add lines 2-1 through 2-7</b>	\$ 57,252	\$ 100,195		<b>Add lines 2-1 through 2-7</b>	\$ -	\$ -	
	<b>TOTAL TAX REVENUE</b>				<b>TOTAL TAX REVENUE</b>			
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	\$ 1,083	\$ 2,191		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	<b>Add lines 2-8 through 2-23</b>	\$ 58,335	\$ 102,386		<b>Add lines 2-8 through 2-23</b>	\$ -	\$ -	
	<b>TOTAL REVENUES</b>				<b>TOTAL REVENUES</b>			
<b>Other Financing Sources</b>								
2-25	Debt Proceeds	\$ -	\$ -		Debt Proceeds	\$ -	\$ -	
2-26	Lease Proceeds	\$ -	\$ -		Lease Proceeds	\$ -	\$ -	
2-27	Developer Advances	\$ 14,776	\$ -		Developer Advances	\$ -	\$ -	
2-28	Other (specify...):	\$ -	\$ -		Other (specify...):	\$ -	\$ -	
2-29	<b>Add lines 2-25 through 2-28</b>	\$ 14,776	\$ -		<b>Add lines 2-25 through 2-28</b>	\$ -	\$ -	
	<b>TOTAL OTHER FINANCING SOURCES</b>				<b>TOTAL OTHER FINANCING SOURCES</b>			
2-30	<b>Add lines 2-24 and 2-29</b>	\$ 73,111	\$ 102,386		<b>Add lines 2-24 and 2-29</b>	\$ -	\$ -	
	<b>TOTAL REVENUES AND OTHER FINANCING SOURCES</b>				<b>TOTAL REVENUES AND OTHER FINANCING SOURCES</b>			
	<b>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.</b>				<b>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.</b>			
						<b>GRAND TOTALS</b>	<b>175,497</b>	

Please use this space to provide explanation of any items on this page

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

Line #	Description	Governmental Funds		Description	Proprietary/Fiduciary Funds		Please use this space to provide explanation of any items on this page
		General Fund	Debt Service Fund		Fund*	Fund*	
3-1	Expenditures			Expenses			
3-1	General Government	25,908	1,453	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		-	-	Capital Outlay	-	-	
3-14		-	-	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	-	-	Developer Principal Repayments	-	-	
3-19	Developer Interest Repayments	-	-	Developer Interest Repayments	-	-	
3-20	All Other [specify...]:	-	-	All Other [specify...]:	-	-	
3-21		-	-		-	-	
3-22	<b>Add lines 3-1 through 3-21</b>	<b>25,908</b>	<b>1,453</b>	<b>Add lines 3-1 through 3-21</b>	<b>-</b>	<b>-</b>	
3-23	Interfund Transfers (In)	-	-	<b>TOTAL EXPENSES</b>	<b>-</b>	<b>-</b>	
3-24	Interfund Transfers Out	-	-	Net Interfund Transfers (In) Out	-	-	
3-25	Other Expenditures (Revenues):	-	-	Other [specify...][enter negative for expense]	-	-	
3-26		-	-	Depreciation/Amortization	-	-	
3-27		-	-	Other Financing Sources (Uses) (from line 2-28)	-	-	
3-28		-	-	Capital Outlay (from line 3-14)	-	-	
3-29		-	-	Debt Principal (from line 3-15, 3-18)	-	-	
3-29	<b>(Add lines 3-23 through 3-28)</b>	<b>-</b>	<b>-</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>	<b>-</b>	<b>-</b>	
3-30	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures	-	-	Net Increase (Decrease) in Net Position	-	-	
	Line 2-29, less line 3-22, less line 3-29	47,203	100,933	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	(7,470)	-	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	-	-	Net Position, December 31	-	-	
	Sum of Lines 3-30, 3-31, and 3-32	39,733	100,933	Sum of Lines 3-30, 3-31, and 3-32	-	-	
	This total should be the same as line 1-37.			This total should be the same as line 1-37.	-	-	
	<b>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.</b>			<b>GRAND TOTAL</b>	<b>-</b>	<b>-</b>	<b>27,361</b>

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

Please answer the following questions by marking the appropriate boxes.

Please use this space to provide any explanations or comments:

4-1 Does the entity have outstanding debt?  YES  NO

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

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

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	\$ 81,481	\$ 14,776	\$ -	\$ 96,257
Developer Advances Interest	\$ 6,890	\$ 6,011	\$ -	\$ 12,901
<b>TOTAL</b>	<b>\$ 88,371</b>	<b>\$ 20,787</b>	<b>\$ -</b>	<b>\$ 109,158</b>

\*must agree to prior year ending balance

4-5 Please answer the following questions by marking the appropriate boxes.

Does the entity have any authorized, but unissued, debt [Section 29-1-605(2) C.R.S.]?  YES  NO

If yes: How much? \$ 13,000,000

Date the debt was authorized: 11/8/2016

4-6 Does the entity intend to issue debt within the next calendar year?  YES  NO

If yes: How much? \$ -

4-7 Does the entity have debt that has been refinanced that it is still responsible for?  YES  NO

If yes: What is the amount outstanding? \$ -

4-8 Does the entity have any lease agreements?  YES  NO

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?  YES  NO

What are the annual lease payments? \$ -

**PART 5 - CASH AND INVESTMENTS**

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

Please use this space to provide any explanations or comments:

YEAR-END Total of ALL Checking and Savings accounts	AMOUNT	TOTAL
5-1	\$ 6,370	
5-2	\$ -	\$ 6,370
<b>TOTAL CASH DEPOSITS</b>		

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

CSAFE	\$ 137,920	
	\$ -	
	\$ -	
	\$ -	
<b>TOTAL INVESTMENTS</b>		\$ 137,920
<b>TOTAL CASH AND INVESTMENTS</b>		\$ 144,290

5-3 Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?  YES  NO

5-4 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:  YES  NO

**PART 6 - CAPITAL AND RIGHT-TO-USE ASSETS**

Please answer the following question by marking in the appropriate box

Please use this space to provide any explanations or comments:

6-1 Does the entity have capitalized assets?  YES  NO  
 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:  YES  NO

6-3 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)	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	\$ -	\$ -	\$ -	\$ -

6-4 Complete the following Capital & Right-to-Use Assets table for PROPRIETARY FUNDS:

	Balance - beginning of the year*	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)	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	\$ -	\$ -	\$ -	\$ -

\* 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**

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.):	\$ -
<b>TOTAL</b>	\$ -

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

- 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:  YES  NO  N/A
- 8-2 Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:  YES  NO  N/A

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	\$ 56,994
Debt Service Fund	\$ 99,790
	\$ -
	\$ -

Please use this space to provide any explanations or comments:

**PART 9 - TAX PAYER'S BILL OF RIGHTS (TABOR)**

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  N/A

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.

Please use this space to provide any explanations or comments:

**PART 10 - GENERAL INFORMATION**

Please answer the following question by marking in the appropriate box

- 10-1 Is this application for a newly formed governmental entity?  YES  NO

If yes: Date of formation:

- 10-2 Has the entity changed its name in the past or current year?  YES  NO

If Yes: NEW name

- 10-3 Is the entity a metropolitan district?  YES  NO

- 10-4 Please indicate what services the entity provides:

- 10-5 Does the entity have an agreement with another government to provide services?  YES  NO

If yes: List the name of the other governmental entity and the services provided:

- 10-6 Does the entity have a certified mill levy?  YES  NO

If yes: Please provide the number of mills levied for the year reported (do not enter \$ amounts):

Bond Redemption mills	38.965
General/Other mills	22.265
<b>Total mills</b>	<b>61.230</b>

Please use this space to provide any additional explanations or comments not previously included:



**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 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.
  - 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.
- 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.

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.	
1	Full Name
	I, <b>Kent Pedersen</b> , 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>Kent Pedersen</u> Date: <u>3/1/2023</u> My term Expires: <u>May 2023</u>
	I, <b>Keenan Tompkins</b> , 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>Keenan Tompkins</u> Date: <u>3/2/2023</u> My term Expires: <u>May 2023</u>
	I, <b>Debra Hessler</b> , 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>Debra Hessler</u> Date: <u>3/2/2023</u> My term Expires: <u>May 2024</u>
	I, <b>Jennifer Thornbloom</b> , 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>Jennifer Thornbloom</u> Date: <u>3/2/2023</u> My term Expires: <u>May 2024</u>
	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: _____
	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: _____
	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  
**CLAconnect.com**

## **Accountant's Compilation Report**

Board of Directors  
Weems Neighborhood Metropolitan District  
Boulder County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Weems Neighborhood 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 Weems Neighborhood Metropolitan District.

A handwritten signature in cursive script that reads "CliftonLarsonAllen LLP".

Greenwood Village, Colorado  
February 20, 2023

**Certificate Of Completion**

Envelope Id: FC022B700924488E9C7F889A5391F0C7	Status: Completed
Subject: Complete with DocuSign: Weems Neighborhood MD - 2022 audit exemption.pdf	
Client Name: Weems Neighborhood MD	
Client Number: A208682	
Source Envelope:	
Document Pages: 10	Signatures: 4
Certificate Pages: 5	Initials: 0
AutoNav: Enabled	Envelope Originator:
Enveloped Stamping: Enabled	Lauryn Rodvold
Time Zone: (UTC-06:00) Central Time (US & Canada)	220 S 6th St Ste 300
	Minneapolis, MN 55402-1418
	Lauryn.Rodvold@claconnect.com
	IP Address: 216.147.123.210

**Record Tracking**

Status: Original	Holder: Lauryn Rodvold	Location: DocuSign
3/1/2023 9:25:17 PM	Lauryn.Rodvold@claconnect.com	

**Signer Events**

Debra Hessler  
 debra.hessler@lennar.com  
 Treasurer/Secretary  
 Debra Hessler  
 Security Level: Email, Account Authentication (None)

**Signature**

DocuSigned by:  
  
 987811F3070C4EA...  
 Signature Adoption: Pre-selected Style  
 Using IP Address: 99.57.180.204

**Timestamp**

Sent: 3/1/2023 9:30:31 PM  
 Viewed: 3/2/2023 2:14:28 PM  
 Signed: 3/2/2023 2:14:43 PM

**Electronic Record and Signature Disclosure:**  
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 ID: 212e3d19-5a60-4ab2-b15e-3cfa587d2334

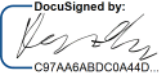
Jennifer Thornbloom  
 jennifer.thornbloom@lennar.com  
 Security Level: Email, Account Authentication (None)

DocuSigned by:  
  
 8823D230C8F04AD...  
 Signature Adoption: Pre-selected Style  
 Using IP Address: 205.168.224.35

Sent: 3/1/2023 9:30:32 PM  
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 Signed: 3/2/2023 9:33:52 AM

**Electronic Record and Signature Disclosure:**  
 Accepted: 3/2/2023 9:32:11 AM  
 ID: 13c455ea-659d-4996-8c07-961fe10c2827

Keenan Tompkins  
 keenan@buildcornerstone.com  
 Manager  
 Security Level: Email, Account Authentication (None)

DocuSigned by:  
  
 C97AA6ABDC0A44D...  
 Signature Adoption: Drawn on Device  
 Using IP Address: 67.176.94.9

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 Signed: 3/2/2023 10:32:46 AM

**Electronic Record and Signature Disclosure:**  
 Accepted: 3/2/2023 10:32:13 AM  
 ID: 178d05d2-0e66-496f-ad7f-269588aefc73

Kent Pedersen  
 kent.pedersen@lennar.com  
 President  
 Security Level: Email, Account Authentication (None)

DocuSigned by:  
  
 E204B2E6C3C84D1...  
 Signature Adoption: Drawn on Device  
 Using IP Address: 98.43.84.76  
 Signed using mobile

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 Signed: 3/1/2023 9:31:48 PM

**Electronic Record and Signature Disclosure:**

<b>Signer Events</b>	<b>Signature</b>	<b>Timestamp</b>
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<b>Editor Delivery Events</b>	<b>Status</b>	<b>Timestamp</b>
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<b>Agent Delivery Events</b>	<b>Status</b>	<b>Timestamp</b>
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<b>Intermediary Delivery Events</b>	<b>Status</b>	<b>Timestamp</b>
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<b>Certified Delivery Events</b>	<b>Status</b>	<b>Timestamp</b>
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<b>Carbon Copy Events</b>	<b>Status</b>	<b>Timestamp</b>
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<b>Notary Events</b>	<b>Signature</b>	<b>Timestamp</b>
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<b>Envelope Summary Events</b>	<b>Status</b>	<b>Timestamps</b>
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Certified Delivered	Security Checked	3/1/2023 9:31:32 PM
Signing Complete	Security Checked	3/1/2023 9:31:48 PM
Completed	Security Checked	3/2/2023 2:14:43 PM

<b>Payment Events</b>	<b>Status</b>	<b>Timestamps</b>
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<b>Electronic Record and Signature Disclosure</b>
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You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: [BusinessTechnology@CLAconnect.com](mailto:BusinessTechnology@CLAconnect.com)

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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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