APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT	Meadow Ridge Metropolitan Distric	No. 2	For the Year Ended			
ADDRESS	155 California Street, No. 505		12/31/22			
	Denver CO 80202		or fiscal year ended:			
			,			
CONTACT PERSON	Dianne Miller					
PHONE	303-285-5320					
EMAIL	dmiller@ddmalaw.com					
P	ART 1 - CERTIFICATION	ON OF PREPARER				
I certify that I am skilled in gover	nmental accounting and that the inforn	nation in the application is comple	ete and accurate, to the best of			
my knowledge.						
NAME:	PHYLLIS BROWN					
TITLE	DIRECTOR OF FINANCE & ACCOUN	ITING				
FIRM NAME (if applicable)	COMMUNITY RESOURCE SERVICES	S OF COLORADO				
ADDRESS	7995 E. PRENTICE AVENUE, SUITE	103E, GREENWOOD VILLAGE.	CO 80111			
PHONE	303-381-4960					
DATE PREPARED	2/28/2023					
PREPARER (SIGNATURE	REQUIRED)					
Th,	Ilm Am					
Please indicate whether the following Governmental or Proprietary	ng financial information is recorded	GOVERNMENTAL (MODIFIED ACCRUAL BASIS)	PROPRIETARY (CASH OR BUDGETARY BASIS)			
only developmental of Frophletally fulld types						

J

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#		De	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
2-3		Sales and use		\$ -	explanations
2-4		Other (specify):		\$ -	
2-5	Licenses and permi	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 service	S		\$ -	
2-11	Fines and forfeits			\$ -	
2-12	Special assessment	ts		\$ -	
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			-	
2-19	Fire and police pens	sion		\$ -	
2-20	Donations			\$ -	
2-21	Other (specify):			\$ -	
2-22				\$ -	
2-23				\$ -	
2-24		(add lin	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.

Line#	Description	o rana oquity inion	ound to nearest Dollar	Please use this
3-1	Administrative		\$ 149	space to provide
3-2	Salaries		\$ -	any necessary
3-3	Payroll taxes		\$ -	explanations
3-4	Contract services		\$ -	
3-5	Employee benefits		\$ -	
3-6	Insurance		\$ -	
3-7	Accounting and legal fees		\$ 493	
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 (sho	uld agree with Part 4)	\$ -	
3-18	Debt service interest		\$ -	
3-19	Repayment of Developer Advance Principal (should	d agree with line 4-4)	\$ -	
3-20	Repayment of Developer Advance Interest		\$ -	
3-21		ould agree to line 7-2)	\$ -	
3-22	Contribution to Fire & Police Pension Assoc. (sho	ould agree to line 7-2)	\$ -	
3-23	Other (specify):			
3-24			\$ -	
3-25			\$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITU	RES/EXPENSES	\$ 642	

If TOTAL REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER than \$100,000 - <u>STOP</u>. You may not use this form. Please use the "Application for Exemption from Audit -<u>LONG FORM</u>".

	PART 4 - DEBT OUTSTANDING	3, 1	SSUEC), <i>F</i>	AND R	ETIF	RED		
	Please answer the following questions by marking the						Yes		No
4-1	4-1 Does the entity have outstanding debt?								1
	If Yes, please attach a copy of the entity's Debt Repayment Se		ule.					_	
4-2	Is the debt repayment schedule attached? If no, MUST explain:							[
						J	_	_	_
4-3	Is the entity current in its debt service payments? If no, MUST	Гехр	lain:			1		L	
4-4	Please complete the following debt schedule, if applicable:								
	(please only include principal amounts)(enter all amount as positive		standing at	Iss	ued during		ed during		anding at
	numbers)	ena d	of prior year*		year		year	yea	ar-end
	General obligation bonds	\$	-	\$	-	\$	-	\$	-
	Revenue bonds	\$	-	\$	-	\$	-	\$	-
	Notes/Loans	\$	-	\$	-	\$	-	\$	-
	Lease Liabilities	\$	_	\$	-	\$	-	\$	-
	Developer Advances	\$	_	\$	-	\$	-	\$	-
	Other (specify):	\$	_	\$	_	\$	-	\$	_
	TOTAL	\$		\$	_	\$		\$	_
		_ +	t tie to prior y	T .	iding balance	1 4		4	
	Please answer the following questions by marking the appropriate boxes.		, and the princip				Yes		No
4-5	Does the entity have any authorized, but unissued, debt?						1		
If yes:	How much?	\$		2	6,815,000				
	Date the debt was authorized:		1/21/	2021]			
4-6	Does the entity intend to issue debt within the next calendar	year?	•			-			1
If yes:	How much?	\$			-]			
4-7	Does the entity have debt that has been refinanced that it is s	till re	sponsible	for?		,			1
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?					J			F250
	Is the lease subject to annual appropriation?	•				1	1941 1432		(**) 23
	What are the annual lease payments?	\$	4:		-				
	Please use this space to provide any	expla	anations or	con	nments:				

	PART 5 - CASH AND INVESTME	ENTS			
	Please provide the entity's cash deposit and investment balances.		Į.	Amount	Total
5-1	YEAR-END Total of ALL Checking and Savings Accounts		\$	284	
5-2	Certificates of deposit		\$	-	
	Total Cash Deposits				\$ 284
	Investments (if investment is a mutual fund, please list underlying investments):				
			\$	-	
5-3			\$	-	
5-3			\$	-	
			\$	-	
	Total Investments				\$ -
	Total Cash and Investments				\$ 284
	Please answer the following questions by marking in the appropriate boxes	Yes		No	N/A
5-4	Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?	√			
5-5	Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq. C.R.S.)?	4			
If no, Ml	JST use this space to provide any explanations:				

	PART 6 - CAPITAL AND RI	СНТ	TOJ	SE /	199	TC.			
	Please answer the following questions by marking in the appropriate box		-10-0	SE F	1331	ZIO Ye	s	ı	No
6-1	Does the entity have capital assets?								7
6-2	Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.,? If no, MUST explain:								
6-3	Complete the following capital & right-to-use assets table:	begini	lance - ning of the /ear*	Addition be inclu Par	ided in	Delet	ions		r-End ance
	Land	\$	- -	\$	-	\$	-	\$	-
	Buildings	\$	-	\$	-	\$	-	\$	-
	Machinery and equipment	\$	-	\$	-	\$	-	\$	-
	Furniture and fixtures	\$	-	\$	-	\$	-	\$	-
	Infrastructure	\$	-	\$	-	\$	-	\$	-
	Construction In Progress (CIP)	\$	-	\$	-	\$	-	\$	-
	Leased Right-to-Use Assets Other (explain):	\$	<u>-</u>	\$	-	\$	-	\$	
	Accumulated Depreciation/Amortization	Ф	-	Ф	-	Ф		\$	-
	(Please enter a negative, or credit, balance)	\$	-	\$	-	\$	-	\$	_
	TOTAL	\$	-	\$	-	\$	-	\$	-
	Please use this space to provide any	explan	ations or	comme	nts:				
	PART 7 - PENSION	INF(ORMA	MOIT					
	Please answer the following questions by marking in the appropriate box	es.				Ye	s	1	No
7-1	Does the entity have an "old hire" firefighters' pension plan?							J	
7-2	Does the entity have a volunteer firefighters' pension plan?							J	
If yes:	Who administers the plan?]			
	Indicate the contributions from:					_			
	Tax (property, SO, sales, etc.):			\$	-				
	State contribution amount:			\$	-				
	Other (gifts, donations, etc.):			\$	-	-			
	TOTAL	-Aine e e	e of lon	\$	-				
	What is the monthly benefit paid for 20 years of service per re 1?	etiree a	is of Jan	\$	-				
	Please use this space to provide any	explan	ations or	comme	nts:				
	PART 8 - BUDGET	INFO	DRMA	TION					
	Please answer the following questions by marking in the appropriate box			Υє		N	0	N	I/A
8-1	Did the entity file a budget with the Department of Local Affai		he	J					1
	current year in accordance with Section 29-1-113 C.R.S.?) 1		G-235		G 33	1
8-2	Did the entity pass an appropriations resolution, in accordance	ce with	Section	J					1
	29-1-108 C.R.S.? If no, MUST explain:			v		6-33		G- 33	1
]					
If yes:	Please indicate the amount budgeted for each fund for the ye	ar repo	orted:						
	Governmental/Proprietary Fund Name	Tota	ıl Appropria	tions By	Fund	l			
	GENERAL FUND	\$			8,000)			
						ļ			
]			

	PART 9 - TAXPAYER'S BILL OF RIGHTS (TAB	OR)	
	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)]?	7	100
	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.	4	
f no, Ml	JST 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?		1
If yes:	Please list the NEW name & PRIOR name:		
ii yes.	Flease list the NEW Hallie & PRIOR Hallie.		
10-3	Is the entity a metropolitan district?	7	
10-0	Please indicate what services the entity provides:		
	Construct, operate and maintain public improvements.		
10-4	Does the entity have an agreement with another government to provide services?		J
If yes:	List the name of the other governmental entity and the services provided:		_
,			
10-5	Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during		1
If yes:	Date Filed:		
10-6	Does the entity have a certified Mill Levy?		J
If yes:			
	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):		
	Bond Redemption mills		-
	General/Other mills		-
	Total mills		-
	Please use this space to provide any explanations or comments:		

	PART 11 - GOVERNING BODY APPROVAL					
	Please answer the following question by marking in the appropriate box	YES	NO			
12-1	If you plan to submit this form electronically, have you read the new Electronic Signature Policy?	7				

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signatures Policy and Procedure

Policy - Requirements

The Office of the State Auditor Local Government Audit Division may accept an electronic submission of an application for exemption from audit that includes governing board signatures obtained through a program such as Docusign or Echosign. Required elements and safeguards are as follows:

- The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.
- The application must be accompanied by the signature history document created by the electronic signature software. The signature history document must show when the document was created and when the document was emailed to the various parties, and include the dates the individual board members signed the document. The signature history must also show the individuals' email addresses and IP address.
- Office of the State Auditor staff will not coordinate obtaining signatures.

The application for exemption from audit form created by our office includes a section for governing body approval. Local governing boards note their approval and submit the application through one of the following three methods:

- 1) Submit the application in hard copy via the US Mail including original signatures.
- 2) Submit the application electronically via email and either,
- a. Include a copy of an adopted resolution that documents formal approval by the Board, or
- b. Include electronic signatures obtained through a software program such as Docusign or Echosign in accordance with the requirements noted above.

	Print the names of ALL members of	A MAJORITY of the members of the governing body must complete and sign in the column below.
	current governing body below.	I. Timothy Croft
	Print Board Member's Name	Timothy Craft , attest I am a duly elected or appointed board
Board		member, and that I have personally reviewed and approve this application for
Member		exemption from audit.
1	Timothy Craft	Signed Date: 3/6/2023 DBBBR975R841D4D1
	, , , , , , , , , , , , , , , , , , ,	My term Expires: May 2023
	Print Board Member's Name	Jeffrey Keeley
Board		member, and that I have personally reviewed and approve this application for
Member		exemption from addit.
2		Signed Jeff zeeley Date:3/6/2023
	Jeffrey Keeley	My term Expires: May 2025
		wy term Expires: 14tay 2025
	Print Board Member's Name	I <u>Stephanie Stewart</u> , attest I am a duly elected or appointed board
Board		member, and that I have personally reviewed and approve this application for
Member		exemption from addit.
3	Stephanie Stewart	Signed Date:3/3/2023
	Stephanie Stewart	My term Expires: May 2023
	Print Board Member's Name	
	Print Board Member's Name	I <u>Howard Johnson</u> , attest I am a duly elected or appointed board
Board Member		member, and that I have personally reviewed and approve this application for exemption from audit. —Docusigned by:
4	Howard Johnson	Signed Howard Johnson Date: 3/3/2023 38D1D51326E9437
		My term Expires: May 2023
	Print Board Member's Name	I Brad Woods , attest I am a duly elected or appointed board
		member, and that I have personally reviewed and approve this application for
Board		exemption from audit. Occusigned by:
Member		Signed Brad Woods
5	Brad Woods	- · · · · · · · · · · · · · · · · · · ·
		My term Expires: May 2025
	Print Board Member's Name	I, attest I am a duly elected or appointed board
		member, and that I have personally reviewed and approve this application for
Board Member		exemption from audit.
6		Signed
		Date:
		My term Expires:
	Print Board Member's Name	I, attest I am a duly elected or appointed board
Board		member, and that I have personally reviewed and approve this application for
Member		exemption from audit.
7		Signed
		Date:
		iviy term Expires:

Meadow Ridge Metropolitan District No. 2 Audit Exemption Application

Certificate Of Completion

Envelope Id: 9BF0E09AB41446CD840C4A0D2789590B

Subject: Meadow Ridge Nos. 1-3, Comm. - 2022 - short form signature page audit exemption

Source Envelope:

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Status: Completed

Envelope Originator: Sonja Steele

1641 California St Denver, CO 80202 ssteele@ddmalaw.com

IP Address: 96.88.70.121

Record Tracking

Status: Original Holder: Sonja Steele Location: DocuSign

ssteele@ddmalaw.com

Signer Events

Signature

Brad Woods bradawc@cs.com

Security Level: Email, Account Authentication

(None)

DocuSigned by: Brad Woods

36ED77E810DF4B1...

Signature Adoption: Pre-selected Style Using IP Address: 67.190.155.31

Timestamp

Sent: 3/3/2023 9:59:39 AM Viewed: 3/7/2023 11:14:43 AM Signed: 3/7/2023 11:14:58 AM

Electronic Record and Signature Disclosure:

Accepted: 3/7/2023 11:14:43 AM ID: cc8f52ba-a021-435b-8bde-f24730594722

Howard Johnson

howard_johnson@me.com

Security Level: Email, Account Authentication

(None)

Howard Johnson 3BD1D51326E9437

Signature Adoption: Pre-selected Style Using IP Address: 174.51.39.221

Sent: 3/3/2023 9:59:40 AM Viewed: 3/3/2023 12:16:20 PM Signed: 3/3/2023 12:17:00 PM

Electronic Record and Signature Disclosure:

Accepted: 3/3/2023 12:16:20 PM

ID: e8399025-88b5-4242-af13-e78e38386eba

Jeff Keeley

jeff.keeley@gmail.com

Security Level: Email, Account Authentication

(None)

Signature Adoption: Pre-selected Style Using IP Address: 73.153.219.196

Sent: 3/3/2023 9:59:39 AM Viewed: 3/6/2023 1:15:10 PM Signed: 3/6/2023 1:15:16 PM

Electronic Record and Signature Disclosure:

Accepted: 3/6/2023 1:15:10 PM

ID: 6d3dda40-7c9f-4780-8ca0-1bf17cf229b5

Stephanie Stewart

stephanie.stewart@bradburycompanies.com Security Level: Email, Account Authentication

(None)

Signed using mobile

Signature Adoption: Drawn on Device Using IP Address: 166.205.159.7

Electronic Record and Signature Disclosure:

Accepted: 3/3/2023 11:11:47 AM ID: 5f8fc926-b204-4985-a97f-3e55489c0f18 Sent: 3/3/2023 9:59:41 AM Viewed: 3/3/2023 11:11:47 AM Signed: 3/3/2023 11:11:57 AM

Signer Events

Tim Craft tim@craftcompaniesllc.com

Principal

Craft Companies, LLC

Security Level: Email, Account Authentication

(None)

Electronic Record and Signature Disclosure:

Accepted: 3/6/2023 11:47:07 AM

ID: 6d51009c-c2c0-449b-9621-91cbb55542ff

Signature

DocuSigned by:

Tim Craft
DB6B82F8841D4D1...

Signature Adoption: Pre-selected Style Using IP Address: 98.38.43.28

Timestamp

Sent: 3/3/2023 9:59:38 AM Viewed: 3/6/2023 11:47:07 AM Signed: 3/6/2023 11:47:23 AM

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
Rhonda Bilek	CODTED	Sent: 3/3/2023 9:59:41 AM

COPIED

rbilek@ddmalaw.com Miller & Associates Law Offices, LLC Security Level: Email, Account Authentication

(None)

Electronic Record and Signature Disclosure:

Not Offered via DocuSign

Witness Events	Signature	Timestamp			
Notary Events	Signature	Timestamp			
Envelope Summary Events	Status	Timestamps			
Envelope Sent	Hashed/Encrypted	3/3/2023 9:59:42 AM			
Certified Delivered	Security Checked	3/6/2023 11:47:07 AM			
Signing Complete	Security Checked	3/6/2023 11:47:23 AM			
Completed	Security Checked	3/7/2023 11:14:58 AM			
Payment Events	Status	Timestamps			
Electronic Record and Signature Disclosure					