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APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

For the Year Ended

12/31/2022

or fiscal year ended:

NAME OF GOVERNMENT ADDRESS Dawson Trails Metropolitan District No. 5 8390 E Crescent Parkway Suite 300

CONTACT PERSON PHONE

EMAIL

Jason Carroll 303-779-5710

Jason.Carroll@claconnect.com

Greenwood Village, CO 80111

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:	Jason Carroll				
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	2/20/2023				
RELATIONSHIP TO ENTITY	CPA Firm providing accounting services to the District				
PREPARER (SIGNATURE REQUI	- RED)				
See attached Accounta	nts Compilation Report.				
	filed, a Title 32, Article 1 Special District Notice of Inactive Status	YES	NO		
during the year? [Applicable to Title 32 s 104 (3), C.R.S.]	pecial districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-		V	If Yes, date filed:	

DocuSign Envelope ID: 6C989E39-AF45-4F46-8710-7732B7175A53 PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

NOTE: Attach additional sheets as necessary.

NOTE: A	ttach additional sheets as necessary.	Government	al Funds		Prop	rietary/Fidu	ciary Funds	
Line #	Description	General Fund	Fund*	Description	Fun	ıd*	Fund*	Please use this space to provide explanation of any items on this page
	Assets			Assets				items on this page
1-1	Cash & Cash Equivalents	\$ 167,171 \$	-	Cash & Cash Equivalents	\$	- \$	-	
1-2	Investments	\$ - \$		Investments	\$	- \$		
1-3	Receivables	\$ - \$		Receivables	\$	- \$		
1-4	Due from Other Entities or Funds	\$ - \$		Due from Other Entities or Funds	\$	- \$	-	
1-5	Property Tax Receivable	\$ 4 \$	-	Other Current Assets [specify]				1
	All Other Assets [specify]				\$	- \$		
1-6	Lease Receivable (as Lessor)	\$ - \$		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	\$ 167,175 \$	-	(\$	- \$	-	
	Deferred Outflows of Resources:			Deferred Outflows of Resources				1
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	\$ 167,175 \$	-		\$	- \$	-	
	Liabilities	•		Liabilities				1
1-16	Accounts Payable	<u>\$</u> -\$			\$ \$	- \$		
1-17	Accrued Payroll and Related Liabilities	Ŧ		Accrued Payroll and Related Liabilities		- \$		
1-18	Unearned Property Tax Revenue	• •		Accrued Interest Payable	\$	- \$		
1-19	Due to Other Entities or Funds	\$ 167,171 \$ \$ - \$		Due to Other Entities or Funds	\$ \$	- \$		
1-20 1-21	All Other Current Liabilities (add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	+ +		All Other Current Liabilities (add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES		- \$		
1-21	All Other Liabilities [specify]				ծ Տ	- \$		
1-22	All Other Liabilities [specify]	\$ - \$ \$ - \$			\$ \$	- \$		
1-23		→ - → \$ - \$		Other Liabilities [specify]:	ծ \$	- \$		
1-24		→ - → \$ - \$		-	ֆ \$	- \$		
1-25		\$ - \$		-	\$	- \$		
1-20	(add lines 1-21 through 1-26) TOTAL LIABILITIES			(add lines 1-21 through 1-26) TOTAL LIABILITIES	-	- \$		
	Deferred Inflows of Resources:	φ ΙΟΙ,ΙΙΙ φ	-	Deferred Inflows of Resources	φ	- φ	-	1
1-28	Deferred Property Taxes	\$ 4 \$	-	Pension/OPEB Related	\$	- \$		1
1-20	Lease related (as lessor)	\$ - \$		Other [specify]	\$	- \$		
1-20	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	· · · · · · · · · · · · · · · · · · ·				- \$		
	Fund Balance	τ γ Ψ		Net Position	7	ψ		1
	Nonspendable Prepaid	\$ - \$	-	Net Investment in Capital Assets	\$	- \$	-	
	Nonspendable Inventory	\$ - \$. *	ψ		1
1-33	Restricted [specify]	\$ - \$		Emergency Reserves	\$	- \$	-	
1-34	Committed [specify]	\$ - \$		Other Designations/Reserves	\$	- \$		
1-35	Assigned [specify]	\$ - \$		Restricted	\$	- \$		
1-36	Unassigned:	\$ - \$		Undesignated/Unreserved/Unrestricted	\$	- \$		
1-37	Add lines 1-31 through 1-36			Add lines 1-31 through 1-36				
	This total should be the same as line 3-33			This total should be the same as line 3-33				
	TOTAL FUND BALANCE	s - s	-	TOTAL NET POSITION	\$	- \$	_	
1-38	Add lines 1-27, 1-30 and 1-37	Ψ 		Add lines 1-27, 1-30 and 1-37	-	ψ		
	This total should be the same as line 1-15			This total should be the same as line 1-15				
	TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND			TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET				
	BALANCE	\$ 167,175 \$	-	POSITION	\$	- \$	-	

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		Governme	ental Funds		Proprietary	/Fiduciary Funds	
Line #	Description	General Fund	Fund*	Description	Fund*	Fund*	Please use this space to provide explanation of a
-	Tax Revenue			Tax Revenue			items on this page
2-1	Property [include mills levied in Question 10-6]	\$ 3	\$ -	Property [include mills levied in Question 10-6]	\$	- \$	
2-2	Specific Ownership	\$ -	\$ -	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		\$ -	Add lines 2-1 through 2-7 TOTAL TAX REVENUE		- \$	
-9	Licenses and Permits	\$ -	\$-	Licenses and Permits	\$	- \$	
-10	Highway Users Tax Funds (HUTF)	\$ -	\$-	Highway Users Tax Funds (HUTF)	\$	- \$	•
-11	Conservation Trust Funds (Lottery)	\$ -	\$-	Conservation Trust Funds (Lottery)	\$	- \$	•
-12	Community Development Block Grant	\$ -	\$-	Community Development Block Grant	\$	- \$	•
-13	Fire & Police Pension	\$ -	\$ -	Fire & Police Pension	\$	- \$	•
-14	Grants	\$ -	\$ -	Grants	\$	- \$	•
15	Donations	\$ -	\$ -	Donations	\$	- \$	•
-16	Charges for Sales and Services	\$ -	\$ -	Charges for Sales and Services	\$	- \$	•
-17	Rental Income	\$ -	\$ -	Rental Income	\$	- \$	-
-18	Fines and Forfeits	\$ -	\$-	Fines and Forfeits	\$	- \$	•
-19	Interest/Investment Income	\$ 288	\$-	Interest/Investment Income	\$	- \$	•
-20	Tap Fees	\$ -	\$-	Tap Fees	\$	- \$	•
-21	Proceeds from Sale of Capital Assets	\$ -	\$ -	Proceeds from Sale of Capital Assets	\$	- \$	-
-22	All Other [specify]:	\$ -	\$-	All Other [specify]:	\$	- \$	•
23		\$ -	\$-		\$	- \$	•
24	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ 291	\$-	Add lines 2-8 through 2-23 TOTAL REVENUES		- \$	-
	Other Financing Sources			Other Financing Sources			
25	Debt Proceeds	\$-	\$ -	Debt Proceeds	\$	- \$	
26	Lease Proceeds	\$ -	\$ -	Lease Proceeds	\$	- \$	-
-27	Developer Advances	\$ -	\$ -	Developer Advances	\$	- \$	-
-28	Other [specify]:	\$ -	\$-	Other [specify]:	\$	- \$	•
-29	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES		\$ -	Add lines 2-25 through 2-28 TOTAL OTHER FINANCING SOURCES		- \$	GRAND TOTALS
-30	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES		\$	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES	¢	- \$	- s

Local Government Division at (303) 869-3000 for assistance.

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

		Governme	ental Funds		Proprietary/	Fiduciary Funds	Please use this space to
Line #	Description	General Fund	Fund*	Description	Fund*	Fund*	provide explanation of an
1	Expenditures			Expenses			items on this page
3-1	General Government	\$ -	\$-	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	\$ 160,333		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	\$-	\$-	Developer Principal Repayments	\$	- \$	-
3-19	Developer Interest Repayments	\$-	\$-	Developer Interest Repayments	\$	- \$	-
3-20	All Other [specify]:	\$-	\$-	All Other [specify]:	\$	- \$	-
3-21			\$-		Ŧ	- \$	- GRAND TOTAL
3-22	Add lines 3-1 through 3-21 TOTAL EXPENDITURES		\$-	Add lines 3-1 through 3-21 TOTAL EXPENSES		- \$	- \$ 160,33
3-23 I	nterfund Transfers (In)	\$-	\$-	Net Interfund Transfers (In) Out	\$	- \$	-
3-24 I	nterfund 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	(Add lines 3-23 through 3-28) TOTAL TRANSFERS AND OTHER EXPENDITURES		\$ -	(Line 3-27, plus line 3-28, less line 3-26, less line 3-25, plus line 3-24) TOTAL GAAP RECONCILING ITEMS	¢	- \$	
3-30	Excess (Deficiency) of Revenues and Other Financing	Ψ -			Ψ	Ψ	
	Sources Over (Under) Expenditures			Net Increase (Decrease) in Net Position			
	ine 2-29, less line 3-22, less line 3-29	\$ (160,042)	\$ -	Line 2-29, less line 3-22, plus line 3-29, less line 3-23	\$	- \$	-
3-31 I	Fund Balance, January 1 from December 31 prior year report			Net Position, January 1 from December 31 prior year			
		\$ -	\$ -	report	\$	- \$	-
3-32	Prior Period Adjustment (MUST explain)	\$ 160,042		Prior Period Adjustment (MUST explain)	\$	- \$	
	Fund Balance, December 31	φ 160,042	φ -	Net Position, December 31	φ	- Þ	-
	Sum of Lines 3-30, 3-31, and 3-32			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.	\$	•	

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.

Jocuc	PART 4 - DEBT OUTSTANDING	ISSUED, A	ND 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?		7	
4-2	Is the debt repayment schedule attached? If no, MUST explain:		\checkmark	
	N/A		_	
4-3	Is the entity current in its debt service payments? If no, MUST explain:		V	
4-4	N/A			
4-4	Please complete the following debt schedule, if applicable: (please only include principal amounts) Outstanding at beginning of year* Issued during	Retired during year	Outstanding at year-end	
	General obligation bonds \$ - \$	- \$ -	\$-	
		- \$ -	\$ -	
		- \$ -		
		- \$ -		
	Developer Advances \$ - \$	- \$ -		
	Other (specify): \$ - \$ TOTAL \$ - \$	- \$ - - \$ -		
	*must agree to prior year ending balance	- \$ -	φ -	
	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.]?	\checkmark		
If yes:	How much? \$ 20,300,000			
	Date the debt was authorized: 5/2/2000			
4-6 If yes:	Does the entity intend to issue debt within the next calendar year? How much?		\checkmark	
4-7	Does the entity have debt that has been refinanced that it is still responsible for?			
If yes:	What is the amount outstanding?		_	
4-8	Does the entity have any lease agreements?		~	
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? What are the annual lease payments? \$ -			
	PART 5 - CASH AND I		ITC	
5-1	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts	AMOUNT \$ 1,634	TOTAL P	lease use this space to provide any explanations or comments:
	Certificates of deposit	\$ 1,034 \$ -		
J-2	TOTAL CASH DEPOSI		\$ 1,634	
	Investments (if investment is a mutual fund, please list underlying investments):		.,	
	Colotrust	\$ 165,537		
	Volotitast	\$ 105,557		
5-3		\$ -		
		\$ -		
	TOTAL INVESTMEN	TS	\$ 165,537	
	TOTAL CASH AND INVESTMEN	TS	\$ 167,171	
	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.?			
E E	Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-			
5-5	10.5-101, et seq. C.R.S.)? If no, MUST explain:	LI		

			1-10-00	E ASSETS	
Please answer the following question by marking in the appropriate box			YES	NO	Please use this space to provide any explanations or comments:
Does the entity have capitalized assets? Has the entity performed an annual inventory of capital assets in accordance with MUST explain:	Section 29-1-506, C.	R.S.? If no,			
N/A					
Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS:	Balance - beginning of the year 1	Additions 2	Deletions	Year-End Balance	
Land	\$ -			• \$	-
Buildings	\$ -			· \$	<u>-</u>
Machinery and equipment	\$ -			· \$	<u>-</u>
Furniture and fixtures	<u>\$</u> - \$-			· \$	<u>-</u>
Construction In Progress (CIP)	\$ - \$ -			· \$ · \$	-
Leased Right-to-Use Assets		<u> </u>		· \$	-
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	\$ -	\$-	\$-	\$	-
Complete the following Capital & Right-To-Use Assets table for PROPRIETARY FUNDS:	Balance - beginning of the year*	Additions	Deletions	Year-End Balance	
Land	\$ -			\$	<u>-</u>
Buildings		\$ -		· \$	-
Machinery and equipment Furniture and fixtures	<u>\$</u> - \$-			· \$	-
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	\$ -	\$-	\$-	\$	-
	accordance with the gove	additions should be rep rnment's capitalization	policy. Please exp		in
	PART 7 - PE	NSION INF	ORMATI	ON	

*			YES	NO	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 - E	BUDGET INF	ORMATION	N	
	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:	7			
8-2	Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:	7			
lf yes	E Please indicate the amount appropriated for each fund separately for the year reported				
	Governmental/Proprietary Fund Name Total Appropr	iations By Fund			
	Amended General Fund \$	200,000			
	\$	-			
	\$ 	-			

_	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)]	-		
• •	Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent	-	_	
	requirement. All governments should determine if they meet this requirement of TABOR.		N 1	
	PART 10 - GE	NERAL INFORMATIO	N .	
	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?		\checkmark	
f yes	Date of formation:			
	Date of formation.			
10-2	2 Has the entity changed its name in the past or current year?			
f Yes	S: NEW name Dawson Trails Metropolitan District No. 5			
	PRIOR name Dawson Ridge Metropolitan District No. 5			
10-3	Is the entity a metropolitan district?	 		
10-4	Please indicate what services the entity provides:	_		
	Water, sewer, sanitation, drainage, streets, traffic & safety controls, transportation, parks & rec			
10-5	Does the entity have an agreement with another government to provide services?			
lf yes	⁵¹ List the name of the other governmental entity and the services provided:			
	All services are provided by Dawson Trails Metropolitan District No. 1			
10-6	Does the entity have a certified mill levy?			
f 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 45.000 Total mills 45.000			
	Please use this space to provide any additi		not provioualy in	

		OSA USE ONL	.Y		
Entity Wide:	General Fund		Governmental Funds	1	Notes
Unrestricted Cash & Investments	\$ 167,171 Unrestricted Fund Balan	\$ -	Total Tax Revenue	\$ 3	
Current Liabilities	\$ 167,171 Total Fund Balance	\$ -	Revenue Paying Debt Service	\$ -	
Deferred Inflow	\$ 4 PY Fund Balance	\$ -	Total Revenue	\$ 291	
	Total Revenue	\$ 291	Total Debt Service Principal	\$ -	
	Total Expenditures	\$ 160,333	Total Debt Service Interest	\$ -	
Governmental	Interfund In	\$ -			
Total Cash & Investments	\$ 167,171 Interfund Out	\$ -	Enterprise Funds		
Transfers In	\$ - Proprietary		Net Position	\$ -	
Transfers Out	\$ - Current Assets	\$ -	PY Net Position	\$ -	
Property Tax	\$ 3 Deferred Outflow	\$ -	Government-Wide		
Debt Service Principal	\$ - Current Liabilities	\$ -	Total Outstanding Debt	\$ -	
Total Expenditures	\$ 160,333 Deferred Inflow	\$ -	Authorized but Unissued	\$ 20,300,000	
Total Developer Advances	\$ - Cash & Investments	\$ -	Year Authorized	5/2/2000	
Total Developer Repayments	\$ - Principal Expense	\$ -			

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

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

2) Submit the application in hard copy via the 03 main including (

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 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 <u>ALL</u> members of the governing body below.	A <u>MAJORITY</u> of the members of the governing body must complete and sign in the column below.
1	Full Name	I, Lawrence P. Jacobson, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve d this association of the second state of the second state of the second
	Lawrence P. Jacobson	Signed Date: 2/25/2023 My term Expires: May 2023
	Full Name	I, Jeffrey Jacob Schroeder, attest that I am a duly elected or appointed board member, and that I have personally reviewed
2	Jeffrey Jacob Schroeder	n, denney Sacob Schroeder, and that that a duty elected of appointed board member, and that thave personally reviewed and approved wine dependence of appointed board member, and that thave personally reviewed signal approved wine dependence of appointed board member, and that thave personally reviewed and approved wine dependence of appointed board member, and that thave personally reviewed and approved wine dependence of appointed board member, and that thave personally reviewed and approved wine dependence of appointed board member, and that thave personally reviewed and approved wine dependence of appointed board member, and that thave personally reviewed and appointed board member, and that that that that the personality reviewed and appointed board member, and that that that the personality reviewed and approved wine dependence of appointed board member, and that that that the personality reviewed and approved wine dependence of appointed board member, and that that that the personality reviewed and approved wine dependence of appointed board member, and that that that the personality reviewed and approved wine dependence of appointed board member, and that that that the personality reviewed and approved wine dependence of appointed board member, and that that the personality reviewed and approved wine dependence of appointed board member, and that that the personality reviewed and approved wine dependence of appointed board member, and that that the personality reviewed appointed board member, and that that the personality reviewed appointed board member, and that that the personality reviewed appointed board member, and that that the personality reviewed appointed board member, and the personality reviewed appointed board member, and that the personality reviewed appointed board member, and the p
	Full Name	I, Andrew Klein, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve
3	Andrew Klein	this applications for development on from audit. Signed Av Arcw Elin. My term Expires: May 2023 0024ESERSIGATION CONTRACTOR DATE: 2/25/2023
	Full Name	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.
4		Signed Date:
		My term Expires:
	Full Name	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.
5		Signed Date:
		My term Expires:
	Full Name	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.
6		Signed Date:
		My term Expires:
	Full Name	I,, attest that I am a duly elected or appointed board member, and that I have
7		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 Dawson Trails Metropolitan District No. 5 Douglas County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Dawson Trails Metropolitan District No. 5 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 the accuracy or the accumpanying 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 Dawson Trails Metropolitan District No. 5.

Clifton Larson allen LLP

Greenwood Village, Colorado February 20, 2023

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Certificate Of Completion

Envelope Id: 6C989E39AF454F4687107732B7175A53 Subject: Complete with DocuSign: DTMD 5 - 2022 Audit Exemption.pdf Client Name: Dawson Trails Metropolitan District No. 5 Client Number: A566489 Source Envelope: Document Pages: 10 Signatures: 3 Initials: 0 Certificate Pages: 5 AutoNav: Enabled Envelopeld Stamping: Enabled Time Zone: (UTC-06:00) Central Time (US & Canada)

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Andrew Klein aklein@westsideinv.com

Mgr

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Jeffrey Jacob Schroeder

JSchroeder@westsideinv.com Security Level: Email. Account Authentication

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Lawrence P. Jacobson

ljacobson@westsideinv.com

President

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