DocuSign Envelope ID: F5CCFF96-0C10-4618-8BDD-EC0C3A5A203B

LONG FORM

Reunion Ridge Metropolitan District No. 1 NAME OF GOVERNMENT **ADDRESS**

8390 E Crescent Parkway

Suite 300 Greenwood Village, CO 80111

Shelby Clymer 303-779-5710 **CONTACT PERSON** PHONE

EMAIL Shelby.Clymer@claconnect.com

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

CERTIFICATION OF PREPARER

I certify that I am an independent accountant with knowledge of governmental accounting and that the information in the Application is complete and accurate to the best of my knowledge. I am aware that the Audit Law requires that a person independent of the entity complete the application if revenues or expenditure are at least \$100,000 but not more than \$750,000, and that independent means someone who is separate from the entity.

NAME: Shelby Clymer

Accountant for the District

FIRM NAME (if applicable) CliftonLarsonAllen LLP

8390 E Crescent Parkway, Suite 300, Greenwood Vilage, CO 80111 **ADDRESS** PHONE 303-779-5710

DATE PREPARED 2/10/2023

RELATIONSHIP TO ENTITY CPA Firm providing accounting services to the District

PREPARER (SIGNATURE REQUIRED)

TITLE

See Accountant's Compiliation 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	
	Ø	If Yes, date filed:

This total should be the same as line 1-15

BALANCE

7.089 \$

TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Indicate Name of Fund NOTE: Attach additional sheets as necessary. Governmental Funds Proprietary/Fiduciary Funds Please use this space to Line # Description Description General Fund Capital Projects Fund Fund* Fund* provide explanation of any items on this page Assets Assets Cash & Cash Equivalents Cash & Cash Equivalents 1-1 \$ 1 | \$ - | \$ Investments \$ - \$ Investments \$ - \$ 1-2 1-3 Receivables \$ - \$ Receivables \$ - \$ 1-4 **Due from Other Entities or Funds** \$ - | \$ Due from Other Entities or Funds \$ - \$ **Property Tax Receivable** \$ Other Current Assets [specify...] 1-5 - | \$ All Other Assets [specify...] \$ - \$ \$ - \$ 1-6 Lease Receivable (as Lessor) \$ Total Current Assets \$ \$ 1-7 Prepaid expenses 7.088 \$ Capital & Right to Use Assets, net (from Part 6-4) - \$ \$ \$ - \$ 1-8 \$ Other Long Term Assets [specify...] \$ \$ - \$ 1-9 \$ 1-10 \$ - \$ \$ - | \$ TOTAL ASSETS \$ (add lines 1-1 through 1-10) TOTAL ASSETS \$ (add lines 1-1 through 1-10) 7,089 \$ - \$ 1-11 **Deferred Outflows of Resources: Deferred Outflows of Resources** 1-12 [specify...] \$ - \$ [specify...] - \$ \$ - \$ - \$ 1-13 [specify...] [specify...] (add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS \$ - \$ (add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS \$ - \$ 1-14 TOTAL ASSETS AND DEFERRED OUTFLOWS \$ TOTAL ASSETS AND DEFERRED OUTFLOWS \$ 1-15 7,089 \$ - \$ Liabilities Liabilities **Accounts Payable** Accounts Payable 1-16 12,722 | \$ 27,832 - \$ **Accrued Payroll and Related Liabilities** \$ - \$ **Accrued Payroll and Related Liabilities** \$ - \$ 1-17 **Accrued Interest Payable Unearned Property Tax Revenue** \$ \$ \$ - \$ 1-18 Due to Other Entities or Funds \$ Due to Other Entities or Funds 1-19 \$ - \$ 1-20 All Other Current Liabilities \$ \$ All Other Current Liabilities - \$ (add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES \$ (add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES \$ 12,722 \$ 27.832 1-21 - \$ All Other Liabilities [specify...] \$ \$ **Proprietary Debt Outstanding** - \$ 1-22 1-23 \$ \$ Other Liabilities [specify...]: \$ - \$ \$ \$ - \$ 1-24 - | \$ 1-25 \$ \$ \$ - \$ 1-26 \$ \$ \$ - | \$ **TOTAL LIABILITIES \$** (add lines 1-21 through 1-26) TOTAL LIABILITIES \$ (add lines 1-21 through 1-26) 12.722 \$ - \$ 1-27 **Deferred Inflows of Resources: Deferred Inflows of Resources Deferred Property Taxes** Pension/OPEB Related 1-28 \$ - | \$ - | \$ Lease related (as lessor) 1-29 \$ \$ Other [specify...] - \$ (add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS \$ (add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS \$ 1-30 - \$ - \$ **Fund Balance** 7,088 \$ 1-31 Nonspendable Prepaid \$ **Net Investment in Capital Assets** \$ - \$ 1-32 Nonspendable Inventory \$ - \$ Restricted [specify...] \$ **Emergency Reserves** \$ - \$ 1-33 - | \$ Committed [specify...] Other Designations/Reserves 1-34 \$ - | \$ \$ - | \$ (12,721) \$ (27,832)Restricted 1-35 Assigned [specify...]AP \$ \$ - | \$ 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 & TOTAL NET POSITION & (5,633) \$ (27,832)- | \$ 1-38 Add lines 1-27, 1-30 and 1-37 Add lines 1-27, 1-30 and 1-37

This total should be the same as line 1-15

POSITION \$

TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		Governme	ental Funds		Proprietary/Fi	iduciary Funds	Diago use this enges to
Line #	Description	General Fund	Capital Projects Fund	Description	Fund*	Fund*	Please use this space to provide explanation of any
	Tax Revenue			Tax Revenue			items on this page
2-1	Property [include mills levied in Question 10-6]	\$ -	\$ -	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		\$ -	7		\$ -	\$ -	
2-7		\$ -	\$ -		\$ -	\$ -	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ -	\$ -	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ -	\$ -	
2-9	Licenses and Permits	\$ -	\$ -	Licenses and Permits	\$ -	\$ -	1
2-10	Highway Users Tax Funds (HUTF)	\$ -	\$ -	Highway Users Tax Funds (HUTF)	\$ -	\$ -	-
2-11	Conservation Trust Funds (Lottery)	\$ -	\$ -	Conservation Trust Funds (Lottery)	\$ -	\$ -	1
2-12	Community Development Block Grant	\$ -	\$ -	Community Development Block Grant	\$ -	\$ -	1
2-13	Fire & Police Pension	\$ -	\$ -	Fire & Police Pension	\$ -	\$ -	1
2-14	Grants	\$ -	\$ -	Grants	\$ -	\$ -	1
2-15	Donations	\$ -	\$ -	Donations	\$ -	\$ -	1
2-16	Charges for Sales and Services	\$ -	\$ -	Charges for Sales and Services	\$ -	\$ -	1
2-17	Rental Income	\$ -	\$ -	Rental Income	\$ -	\$ -	
2-18	Fines and Forfeits	\$ -	\$ -	Fines and Forfeits	\$ -	\$ -	
2-19	Interest/Investment Income	\$ -	\$ -	Interest/Investment Income	\$ -	\$ -	
2-20	Tap Fees	\$ -	\$ -	Tap Fees	\$ -	\$ -	
2-21	Proceeds from Sale of Capital Assets	\$ -	\$ -	Proceeds from Sale of Capital Assets	\$ -	\$ -	
2-22	All Other [specify]:	\$ -	\$ -	All Other [specify]:	\$ -	\$ -	
2-23		\$ -	\$ -		\$ -	\$ -	
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES		\$ -	Add lines 2-8 through 2-23 TOTAL REVENUES	\$ -	\$ -	
	Other Financing Sources			Other Financing Sources			-
2-25	Debt Proceeds	\$ -	\$ -	Debt Proceeds	\$ -	-]
2-26	Lease Proceeds	\$ -	\$ -	Lease Proceeds	\$ -	\$ -	-
2-27	Developer Advances	\$ 50,517	\$ 379,942	Developer Advances	\$ -	\$ -	1
2-28	Other [specify]:	\$ -	\$ -	Other [specify]:	\$ -	\$ -	
2-29	Add lines 2-25 through 2-28			Add lines 2-25 through 2-28			CRAND TOTAL 6
	TOTAL OTHER FINANCING SOURCES	\$ 50,517	\$ 379,942	TOTAL OTHER FINANCING SOURCES	\$ -	\$ -	GRAND TOTALS
2-30	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ 50,517	\$ 379,942	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ -	\$ -	\$ 430,45 9
	ID TOTAL DEVENUES AND OTHER FINANCING COURSES (-						

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

	PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES								
		Go	overnmental	Funds		Proprietary	/Fiduciary Funds	Place	e use this space to
Line #	Description	General	Fund Cap	ital Projects Fund	Description	Fund*	Fund*		de explanation of any
	Expenditures				Expenses				on this page
3-1	General Government		56,150 \$	-	General Operating & Administrative	\$	- \$	-	
3-2	Judicial	\$	- \$	-	Salaries	\$	- \$	_	
3-3	Law Enforcement	\$	- \$	-	Payroll Taxes	\$	- \$	-	
3-4	Fire	\$	- \$	-	Contract Services	\$	- \$	-	
3-5	Highways & Streets	\$	- \$	-	Employee Benefits	\$	- \$	-	
3-6	Solid Waste	\$	- \$	-	Insurance	\$	- \$	_	
3-7	Contributions to Fire & Police Pension Assoc.	\$	- \$	-	Accounting and Legal Fees	\$	- \$	_	
3-8	Health	\$	- \$	-	Repair and Maintenance	\$	- \$	-	
3-9	Culture and Recreation	\$	- \$	-	Supplies	\$	- \$	-	
3-10	Transfers to other districts	\$	- \$	-	Utilities	\$	- \$	-	
3-11	Other [specify]:	\$	- \$	-	Contributions to Fire & Police Pension Assoc.	\$	- \$	-	
3-12		\$	- \$	-	Other [specify]	\$	- \$	-	
3-13		\$	- \$	-		\$	- \$	-	
3-14	Capital Outlay	\$	- \$	407,774	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		\$	- \$	_		\$	- \$	-	GRAND TOTAL
3-22	Add lines 3-1 through 3-21		56,150 \$	407,774	Add lines 3-1 through 3-21	¢	- s	- s	463,924
	TOTAL EXPENDITURES		1 1	<u> </u>	TOTAL EXPENSES		,	T T	400,324
3-23	Interfund Transfers (In)	\$	- \$	-	Net Interfund Transfers (In) Out	\$	- \$	_	
3-24	Interfund Transfers Out	\$	- \$	-	Other [specify][enter negative for expense]	\$	- \$	-	
3-25	Other Expenditures (Revenues):	\$	- \$	-	Depreciation/Amortization	\$	- \$	_	
3-26		\$	- \$	-	Other Financing Sources (Uses) (from line 2-28)	\$	- \$	_	
3-27		\$	- \$	-	Capital Outlay (from line 3-14)	\$	- \$	_	
3-28		\$	- \$	-	Debt Principal (from line 3-15, 3-18)	\$	- \$	-	
3-29	(Add lines 3-23 through 3-28) TOTAL				(Line 3-27, plus line 3-28, less line 3-26, less line 3-25, plus				
	TRANSFERS AND OTHER EXPENDITURES	\$	- \$	-	line 3-24) TOTAL GAAP RECONCILING ITEMS	\$	- \$	-	
3-30	Excess (Deficiency) of Revenues and Other Financing				Not Increase (Boomers) in Not Booition				
	Sources Over (Under) Expenditures				Net Increase (Decrease) in Net Position Line 2-29, less line 3-22, plus line 3-29, less line 3-23				
	Line 2-29, less line 3-22, less line 3-29	\$	(5,633) \$	(27,832)	Line 2-29, less line 3-22, plus line 3-29, less line 3-23	\$	- \$	-	
					Net Position, January 1 from December 31 prior year				
3-31	Fund Balance, January 1 from December 31 prior year report								
		\$	- \$	-	report	\$	- \$	_	
3-32	Prior Period Adjustment (MUST explain)	\$	- \$		Prior Period Adjustment (MUST explain)	\$	- S	_]	
	Fund Balance, December 31	<u> </u>			Net Position, December 31	-			
	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.	\$	(5,633) \$	(27,832)	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.

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		6 - CAPITAL	AND RIGH			Disease use this areas to provide any symbolsticus or comments.
0.4	Please answer the following question by marking in the appropriate box			YES	NO	Please use this space to provide any explanations or comments:
6-1 6-2	Does the entity have capitalized assets? Has the entity performed an annual inventory of capital assets in accordance with MUST explain:	n Section 29-1-506, C.F	R.S.? If no,	☑ ☑ 1	_ _	
6-3	Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS:	Balance - beginning of the	Additions	Deletions	Year-End Balance	
	Land	year 1	Φ	 \$ -		
	Land Buildings	\$ - s		+:	\$ - \$ -	-
	Machinery and equipment	\$ -		1 4	-	-
	Furniture and fixtures	\$ -	<u> </u>	+:	1:	1
	Infrastructure	\$ -		Ψ	Ι Ψ	
	Construction In Progress (CIP)	\$ -			T	
	Leased Right-to-Use Assets	\$ -		\$ -	Ļ'	-
	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)		\$ -	 	\$ -	1
	TOTAL	\$ -	\$ 407,774	\$ -	\$ 407,774	
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	\$ -		1 :		1
	Infrastructure	\$ -				
	Construction In Progress (CIP)	\$ -				-
	Leased Right-to-Use Assets Intangible Assets	\$ - s		T .	1.7	-
	Other (explain):		\$ -	+ -	1:	-
	Accumulated Amortization Right to Use Leased Assets (Enter a negative, or credit, balance)	\$ -			\$ -	-
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$ -	\$ -	\$ -	
	TOTAL	\$ -	\$ -	\$ -	-	
		* Must agree to prior year - Generally capital asset a accordance with the gover	dditions should be re		ay on line 3-14 and capitalized in any discrepancy	- 1
		PART 7 - PE	NSION INF	FORMATIC	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?				Ø	
	Does the entity have a volunteer firefighters' pension plan?				✓	
If yes:	Who administers the plan?					
	Indicate the contributions from:					
	Tax (property, SO, sales, etc.):	Г	\$ -	1		
		_	*	-		
	State contribution amount:	_	\$ <u>-</u>	-		
	Other (gifts, donations, etc.):		\$ -	-		
		TOTAL	·			
	What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?		\$ -			

ocuS	ign Envelope ID: F5CCFF96-0C10-4618-8BDD-EC0C3A5A203B		UDOET INE	ODMATIO	N			
		PARI 8 - B	UDGET INF					
	Please answer the following question by marking in the appropriate box	<u> </u>	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 ac Section 29-1-113 C.R.S.? If no. MUST explain:		Ø					
8-2	Did the entity pass an appropriations resolution in accordance with Section 29-1- If no, MUST explain:	108 C.R.S.?	Ø					
If yes:	Please indicate the amount appropriated for each fund separately for the year rep	orted						
	Governmental/Proprietary Fund Name	Total Appropria	tions By Fund					
	General Fund (Amended)	\$	60,000					
	Capital Projects Fund	\$	7,000,000					
		\$	-					
		9 - TAX PAYE	ER'S BILL O	F RIGHTS	(TABOR)			
	Please answer the following question by marking in the appropriate box			YES	NO	Please use this space to provide any explanations or comments:		
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution, A Note: An election to exempt the government from the spending limitations of TABOR does not exempt the			☑				
	requirement. All governments should determine if they meet this requirement of TABOR.							
		PART 10 - G	ENERAL IN	-ORMATIC	ON			
	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?				✓	10-4: Provide financing for the planning, design, acquisition,		
If yes:	Date of formation:					construction, installation, relocation, redevelopment, operations and maintenance of the public improvements within the District including		
	Date of formation.					streets, parks and recreation, water and wastewater facilities,		
10-2	Has the entity changed its name in the past or current year?				☑	transportation, mosquito control, safety protection, fire protection, television relay and translation, and security.		
If Yes:	NEW name					10-5: Reunion Ridge Metro District No. 2. The construction and		
	NEW Halle					operating costs of Reunion Ridge Metro District No. 1 (the		
	PRIOR name					"Coordinating District") will be financed by Reunion Ridge Metro District No. 2 (the "Financing District")		
	Is the entity a metropolitan district?			☑		rte. 2 (allo + mailtoning District)		
10-4	Please indicate what services the entity provides:							
	See explanation to the right.			☑	_			
	10-5 Does the entity have an agreement with another government to provide services?							
ii yes.	List the name of the other governmental entity and the services provided: See explanation to the right.							
10-6	Does the entity have a certified mill levy?	☑	-					
	yes: Please provide the number of mills levied for the year reported (do not enter \$ amounts):							
,	Bond Redemption mills		00					
	General/Other mills							
	Total mills Please use this space	_		as or comment	s not proviousl y incl	udod:		
	Please use this space	to provide any add	itional explanation	is or comment	s not previously incl	uded.		

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		OSA USE ONLY		
Entity Wide:	General Fund	Governmental Funds	Notes	
Unrestricted Cash & Investments	\$ 1 Unrestricted Fund Balan	\$ (12,721) Total Tax Revenue	\$	
Current Liabilities	\$ 40,554 Total Fund Balance	\$ (5,633) Revenue Paying Debt Service	\$	
Deferred Inflow	\$ - PY Fund Balance	\$ - Total Revenue	\$ 430,459	
	Total Revenue	\$ 50,517 Total Debt Service Principal	\$	
	Total Expenditures	\$ 56,150 Total Debt Service Interest	\$ -	
Governmental	Interfund In	\$ <u>.</u>		
Total Cash & Investments	\$ 1 Interfund Out	\$ - Enterprise Funds		
Transfers In	\$ - Proprietary	Net Position	\$	
Transfers Out	\$ - Current Assets	\$ - PY Net Position	\$ -	
Property Tax	\$ - Deferred Outflow	\$ - Government-Wide		
Debt Service Principal	\$ - Current Liabilities	\$ - Total Outstanding Debt	\$ 430,459	
Total Expenditures	\$ 463,924 Deferred Inflow	\$ - Authorized but Unissued	\$ 3,397,800,000	
Total Developer Advances	\$ - Cash & Investments	\$ - Year Authorized	11/5/2019	
Total Developer Repayments	\$ - Principal Expense	\$		

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.
- 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 <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 James Hayes	I, James Hayes, atteBootuSignedhbyxuuly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed
2	Full Name Audrey Lam	I, Audrey Lam atter actual lam actu
3	Full Name Brett Price	I, Brett Price, attes Dead Signed by ly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed
4	Full Name Justin Howe	I, Justin Howe, 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: May 2023
5	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. Signed Date: My term Expires:
6	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. Signed Date: My term Expires:
7	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. 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 Reunion Ridge Metropolitan District No. 1 Adams County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Reunion Ridge Metropolitan District No. 1 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 Reunion Ridge Metropolitan District No. 1.

Greenwood Village, Colorado

Clifton Larson allen LAG

February 10, 2023

Certificate Of Completion

Envelope Id: F5CCFF960C1046188BDDEC0C3A5A203B

Subject: Complete with DocuSign: RRMD1 Audit Exemption 2022.pdf

Client Name: Reunion Ridge MD 1

Client Number: A192190 Source Envelope:

Document Pages: 10 Certificate Pages: 5

AutoNav: Enabled

Envelopeld Stamping: Enabled

Time Zone: (UTC-06:00) Central Time (US & Canada)

Status: Completed

Envelope Originator:

Peter Maleski

220 S 6th St Ste 300

Minneapolis, MN 55402-1418 Peter.Maleski@claconnect.com IP Address: 73.243.31.93

Sent: 3/28/2023 11:53:58 AM

Viewed: 3/28/2023 5:35:49 PM

Signed: 3/28/2023 5:35:55 PM

Record Tracking

Status: Original

3/28/2023 11:41:37 AM

Holder: Peter Maleski

Peter.Maleski@claconnect.com

Location: DocuSign

Timestamp

Signer Events

Audrey Lam

alam@oakwoodhomesco.com

Authorized Signer

Security Level: Email, Account Authentication

(None)

Signature DocuSigned by:

Signatures: 3

Initials: 0

Aubertan Lon 780C26EEB20542A.

Signature Adoption: Uploaded Signature Image

Using IP Address: 216.87.72.100

Electronic Record and Signature Disclosure:

Accepted: 3/28/2023 5:35:49 PM

ID: 5782bec8-47e3-4aab-8ca7-3b54b3269d31

Brett Price

bprice@oakwoodhomesco.com

Regional Vice President of Land Dev

Security Level: Email, Account Authentication

(None)

Brett Price

CA13C05C3EF1467..

Signature Adoption: Pre-selected Style Using IP Address: 174.238.228.68

Signed using mobile

Sent: 3/28/2023 11:53:58 AM

Resent: 3/28/2023 12:19:56 PM Viewed: 3/28/2023 12:34:32 PM Signed: 3/28/2023 12:34:51 PM

Electronic Record and Signature Disclosure:

Accepted: 3/28/2023 12:34:32 PM

ID: 56253a4d-7e65-49ca-b534-404e88ffccbb

James Hayes

JHayes@OakwoodHomesCO.com

Security Level: Email, Account Authentication

(None)

DocuSigned by: James Hayes CA541747F82746F.

Sent: 3/28/2023 11:53:57 AM Viewed: 3/28/2023 3:08:42 PM Signed: 3/28/2023 3:08:59 PM

Signature Adoption: Pre-selected Style Using IP Address: 75.71.214.58

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Accepted: 3/28/2023 3:08:42 PM

ID: 8c16490e-48c0-40ed-8531-7a262b1401fb

In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp

Certified Delivery Events	Status	Timestamp		
Carbon Copy Events	Status	Timestamp		
Witness Events	Signature	Timestamp		
Notary Events	Signature	Timestamp		
Envelope Summary Events	Status	Timestamps		
Envelope Sent	Hashed/Encrypted	3/28/2023 11:53:58 AM		
Envelope Updated	Security Checked	3/28/2023 12:19:55 PM		
Certified Delivered	Security Checked	3/28/2023 3:08:42 PM		
Signing Complete	Security Checked	3/28/2023 3:08:59 PM		
Completed	Security Checked	3/28/2023 5:35:55 PM		
Payment Events	Status	Timestamps		
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