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APPLICATION FOR EXEMPTION FROM AUDIT

LONG FORM

NAME OF GOVERNMENT ADDRESS

CONTACT PERSON PHONE EMAIL

104 (3), C.R.S.]

Beebe Draw Farms Metropolitan District No. 1 8390 E Crescent Parkway Greenwood Village, CO 80111 Gigi Pangindian 303-779-5710

gigi.pangindian@claconnect.com

For the Year Ended 12/31/2023 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:	Gigi Pangindian								
TITLE	Accountant for the District								
FIRM NAME (if applicable)	CliftonLarsonAllen LLP								
ADDRESS	8390 E Crescent Parkway, Suite 300, Greenwood Village, CO 80111	8390 E Crescent Parkway, Suite 300, Greenwood Village, CO 80111							
PHONE	303-779-5710								
RELATIONSHIP TO ENTITY	CPA Firm providing accounting services to the District	PA Firm providing accounting services to the District							
		DATE PREPARED							
PLEASE SEE ATTACHED ACCOUNTANT'S COMPILATION REPORT						3/21/2024			
	rict filed, a Title 32, Article 1 Special District Notice of Inactive Status	YES	NO						
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 1				If Yes, date	filed:				

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

NUTE: A	ttach additional sheets as necessary.	Gov	ernmer	ntal Funds		Propr	rietary/Fiduciary Funds	
Line #	Description	General Fu	nd	Conservation Trust Fund	Description	Func		Please use this space to provide explanation of any items on this page
	Assets				Assets			
1-1	Cash & Cash Equivalents	\$	9,343	\$-	Cash & Cash Equivalents	\$	- \$ -	
1-2	Investments	\$ 13	9,320	\$ 15,398	Investments	\$	- \$ -	
1-3	Receivables	\$	983	\$-	Receivables	\$	- \$ -	
1-4	Due from Other Entities or Funds		5,813		Due from Other Entities or Funds	\$	- \$ -	
1-5	Property Tax Receivable	\$ 408	3,339	\$-	Other Current Assets [specify]			7
	All Other Assets [specify]					\$	- \$ -	_
1-6	Lease Receivable (as Lessor)	\$	-	\$-	Total Current Assets	\$	- \$-	
1-7	Prepaid Insurance	\$:	3,840	\$-	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	\$ 57	7,638	\$ 15,398	(add lines 1-1 through 1-10) TOTAL ASSETS	\$	- \$ -	
	Deferred Outflows of Resources:				Deferred Outflows of Resources			_
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	\$ 57	7,638		TOTAL ASSETS AND DEFERRED OUTFLOWS	\$	- \$ -	
	Liabilities				Liabilities			7
1-16	Accounts Payable	\$ 4	1,791	\$	Accounts Payable	\$	- \$ -	_
1-17	Accrued Payroll and Related Liabilities	\$	-	\$ -	Accrued Payroll and Related Liabilities	\$	- \$ -	_
1-18	Unearned Revenue	\$	-	<u>\$</u> -	Accrued Interest Payable	\$	- \$ -	_
1-19	Due to Other Entities or Funds	\$ 170	0,371	<u>\$</u> -	Due to Other Entities or Funds	\$	- \$ -	_
1-20	All Other Current Liabilities	\$	-	\$ -	All Other Current Liabilities	\$	- \$ -	_
1-21	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	\$ 173	5,162		(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	\$	- \$ -	_
1-22	All Other Liabilities [specify]	\$	-	\$-	Proprietary Debt Outstanding (from Part 4-4)	\$	- \$ -	_
1-23		\$	-	\$	Other Liabilities [specify]:	\$	- \$ -	_
1-24		<u></u> Ф	-	> -		\$	- \$ -	_
1-25 1-26		<u>ф</u>		\$ - \$-		<u>Ф</u>	- \$ -	_
1-20	(add lines 1-21 through 1-26) TOTAL LIABILITIES	ቅ ድ 17/	5,162	Ψ	(add lines 1-21 through 1-26) TOTAL LIABILITIES	<u>Ф</u>	- \$ -	
	Deferred Inflows of Resources:	φ 17,	5,102	φ -	Deferred Inflows of Resources	Ψ	- μ -	_
1-28	Deferred Property Taxes	¢ 40	3,339	¢	Pension/OPEB Related	¢	- \$ -	7
1-20	Lease related (as lessor)	\$ 400	5,559		Other [specify]	φ	- \$ -	-
1-20	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	\$ 40	3,339	φ - \$ -	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	\$	- \$ -	
	Fund Balance	Ψ +0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Net Position	Ψ	Ψ	-
	Nonspendable Prepaid	\$	-		Net Investment in Capital and Right-to Use Assets	\$	- \$ -	7
	Nonspendable Inventory	\$		\$ -		+	· · · · · · · · · · · · · · · · · · ·	
1-33	Restricted [specify]	\$		\$-	Emergency Reserves	\$	- \$ -	7
1-34	Committed [specify]	\$	-	\$	Other Designations/Reserves	\$	- \$ -	-
1-35	Assigned [specify]	\$	-	\$	Restricted	\$	- \$ -	-
1-36	Unassigned:	\$ (!	5,863)	\$	Undesignated/Unreserved/Unrestricted	\$	- \$ -	1
1-37	Add lines 1-31 through 1-36		, ,		Add lines 1-31 through 1-36			1
	This total should be the same as line 3-33				This total should be the same as line 3-33			
	TOTAL FUND BALANCE		5,863)	\$ 15,398	TOTAL NET POSITION	\$	- \$ -	
1-38	Add lines 1-27, 1-30 and 1-37	Ψ (•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Add lines 1-27, 1-30 and 1-37	+	· · · · · · · · · · · · · · · · · · ·	1
	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	\$ 57	7,638	\$ 15,398	POSITION	\$	- \$-	

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		Governm	ental Funds		Proprietary	//Fiduciary Funds	
_ine #	Description	General Fund	Conservation Trust 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]	\$ 311,536	5 \$	- Property [include mills levied in Question 10-6]	\$	- \$	-
2-2	Specific Ownership	\$ 13,366	5 \$	- Specific Ownership	\$	- \$	-
2-3	Sales and Use Tax	\$	· \$	- Sales and Use Tax	\$	- \$	-
2-4	Other Tax Revenue [specify]:	\$	· \$	- Other Tax Revenue [specify]:	\$	- \$	-
-5		\$	• \$	-	\$	- \$	-
2-6		\$	• \$	-	\$	- \$	-
-7		\$	• \$	-	\$	- \$	-
-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ 324,902	\$	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)	\$.	· \$ 2,26	4 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	\$ 15,086	5 \$ 67	2 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		\$ \$ 2,93	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			Add lines 2-24 and 2-29			
	TOTAL REVENUES AND OTHER FINANCING SOURCES	\$ 339,988	\$ 2,93	TOTAL REVENUES AND OTHER FINANCING SOURCES	\$	- \$	- \$ 342

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

		Governme	ental Funds		Proprieta	ry/Fiduciary Funds	Discourse this space to
ine #	Description	General Fund	Conservation Trust Fur	Description	Fund*	Fund*	Please use this space to provide explanation of ar
Expend	ditures			Expenses			items on this page
B-1 Gen	neral Government	\$ 93,173	\$-	General Operating & Administrative	\$	- \$	-
3-2 Judi	licial	\$-	\$-	Salaries	\$	- \$	-
3-3 Law	v Enforcement	\$-	\$-	Payroll Taxes	\$	- \$	-
B-4 Fire		\$-	\$-	Contract Services	\$	- \$	-
3-5 Higł	hways & Streets	\$-	\$-	Employee Benefits	\$	- \$	-
3-6 Soli	id Waste	\$-	\$-	Insurance	\$	- \$	-
3-7 Con	ntributions to Fire & Police Pension Assoc.	\$-	\$-	Accounting and Legal Fees	\$	- \$	-
3-8 Hea	llth	\$-	\$-	Repair and Maintenance	\$	- \$	-
3-9 Cult	ture and Recreation	\$-	\$-	Supplies	\$	- \$	-
B-10 Trar	nsfers to other districts	\$-	\$-	Utilities	\$	- \$	-
B-11 C	Other [specify]:	\$-	\$-	Contributions to Fire & Police Pension Assoc.	\$	- \$	-
B-12 Transfe	ers to Beebe Draw Authority	\$ 254,034	\$-	Other [specify]	\$	- \$	-
3-13		\$-	\$-		\$	- \$	-
3-14 Cap	bital Outlay	\$-	\$-	Capital Outlay	\$	- \$	-
Deb	ot Service			Debt Service			
3-15 P	Principal (should match amount in 4-4)	\$-	\$-	Principal (should match amount in 4-4)	\$	- \$	-
3-16 lı	nterest	\$-	\$-	Interest	\$	- \$	-
3-17 E	Bond Issuance Costs	\$-	\$-	Bond Issuance Costs	\$	- \$	-
3-18 Dev	eloper Principal Repayments	\$-	\$-	Developer Principal Repayments	\$	- \$	-
3-19 Dev	veloper Interest Repayments	\$-	\$-	Developer Interest Repayments	\$	- \$	-
3-20 All Ot	ther [specify]:	\$-	\$-	All Other [specify]:	\$	- \$	-
3-21		\$ -	\$-		\$	- \$	- GRAND TOTAL
3-22	Add lines 3-1 through 3-21 TOTAL EXPENDITURES	* 3/1 / 208	\$-	Add lines 3-1 through 3-21 TOTAL EXPENSES	*	- \$	- \$ 347,20
3-23 Interfu	nd Transfers (In)	\$-	\$-	Net Interfund Transfers (In) Out	\$	- \$	-
3-24 Interfu	nd Transfers Out	\$-	\$-	Other [specify][enter negative for expense]	\$	- \$	-
B-25 Other E	Expenditures (Revenues):	\$-	\$-	Depreciation/Amortization	\$	- \$	-
8-26		\$-	\$-	Other Financing Sources (Uses) (from line 2-28)	\$	- \$	-
3-27		\$-	\$-	Capital Outlay (from line 3-14)	\$	- \$	-
8-28		\$-	\$-	Debt Principal (from line 3-15, 3-18)	\$	- \$	-
3-29 (A	dd 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	s (Deficiency) of Revenues and Other Financing	•					
	es Over (Under) Expenditures			Net Increase (Decrease) in Net Position			
Line 2-	-29, less line 3-22, less line 3-29	\$ (7,220)) \$ 2,936	Line 2-29, less line 3-22, plus line 3-29, less line 3-23	\$	- \$	-
-31 Fund B	Balance, January 1 from December 31 prior year report			Net Position, January 1 from December 31 prior year			
		\$ 1,357	\$ 12,462	report	\$	- \$	-
-32 Prior P	Period Adjustment (MUST explain)	\$ -	\$ -	Prior Period Adjustment (MUST explain)	\$	- \$	-
	Balance, December 31	¥ _	Ψ -	Net Position, December 31	Ψ	¥	_
	f Lines 3-30, 3-31, and 3-32			Sum of Lines 3-30, 3-31, and 3-32			
	otal should be the same as line 1-37.	\$ (5,863)	\$ 15.398	This total should be the same as line 1-37.	\$	- \$	-

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Docue	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 4-2	Does the entity have outstanding debt? Is the debt repayment schedule attached? If no, MUST explain: N/A - District has no debt.			
4-3	Is the entity current in its debt service payments? If no, MUST explain:			
4-4	N/A - District has no debt. Please complete the following debt schedule, if applicable: (please only include principal amounts) Outstanding at beginning of year year	Retired during year	Outstanding at year-end	
	Revenue bonds \$ - \$ - Notes/Loans \$ - \$ > > \$ - \$ > > > > > > >	\$ - \$ - \$ - \$ - \$ - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	
**Subse	ription Based Information Technology Arrangements *Must agree to prior year-end balance Please answer the following questions by marking the appropriate boxes.	YES	NO	
4-5 If yes:	Prease 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.]? How much? Date the debt was authorized:			
	Does the entity intend to issue debt within the next calendar year?			
If yes: 4-7 If yes: 4-8	How much? \$- Does the entity have debt that has been refinanced that it is still responsible for? What is the amount outstanding? \$- Does the entity have any lease agreements?			
	What is being leased?			
	What are the annual lease payments? \$ -		Ø	
	PART 5 - CASH AND IN	VESTMEN	NTS	
5.4	Please provide the entity's cash deposit and investment balances.	AMOUNT	TOTAL	Please use this space to provide any explanations or comments:
	YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit	\$ 9,343 \$ -		
	TOTAL CASH DEPOSITS		\$ 9,343	
5-3	Investments (if investment is a mutual fund, please list underlying investments): Colotrust Colotrust Colotrust (CTF)	\$ 139,320 \$ 15,398		
00		\$ - \$ -		
	TOTAL INVESTMENTS	-	\$ 154,718	
	TOTAL CASH AND INVESTMENTS Please answer the following guestion by marking in the appropriate box YES		\$ 164,061 N/A	
5-4	Please answer the following question by marking in the appropriate box YES Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.? Image: Comparison of the section 24-75-601 and the section 24-75-601	NO	N/A	
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.)? If no, MUST explain:	- - 1		

PART	6 - CAPITAL	AND RIGH	T_TO_USF	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: 	h Section 29-1-506, C.F	R.S.? If no,		√ √	
The District has no capital assets.					
-3 Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS:	Balance - beginning of the year*	Additions*	Deletions	Year-End Balance	
Land	\$	\$-	\$-	\$	-
Buildings	· ·		\$-	\$	-
Machinery and equipment	-		\$-	\$	-
Furniture and fixtures	· ·	\$	\$ -	\$	-
Infrastructure	· ·		\$-	\$	-
Construction In Progress (CIP)	+	<u>\$</u> -	\$ -	\$	-
Leased & SBITA Right-to-Use Assets	T	\$ <u>-</u>	\$ -	\$	-
Intangible Assets	· ·	<u>+</u> \$-	\$-	\$	-
Other (explain): Accumulated Amortization Right to Use Assets (Enter a negative, or credit, balance)	+	<u> </u>	\$ - \$ -	ъ \$	-
Accumulated Depreciation (Enter a negative, or credit, balance)	+	<u> </u>	• -	\$	-
TOTAL	•	<u> </u>	\$ -	\$	-
		φ -	φ -	φ	-
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		<u>\$</u> -	\$-	\$	-
Infrastructure	•	<u>\$</u> -	\$-	\$	-
Construction In Progress (CIP)	+	<u>\$</u> -	\$ -	\$	-
Leased & SBITA Right-to-Use Assets	•	\$ <u>-</u>	\$-	\$	-
Intangible Assets	Ŧ	\$	\$-	\$	
Other (explain):		<u>+</u> \$-	\$ - \$ -	\$	
Accumulated Amortization Right to Use Assets (Enter a negative, or credit, balance)	φ - 3	<u>ዋ</u> -	5 -	\$	
Accumulated Depreciation (Enter a negative, or credit, balance)	φ	φ <u>-</u>	т		
ΤΟΤΑΙ	 S Must agree to prior year 	\$-	\$-	\$	-

* 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								
*			YES	NO	Please use this space to provide any explanations or comments:			
7-1 Does the entity have an "old hire" firefighters' pension plan?				マ				
7-2 Does the entity have a volunteer firefighters' pension plan?				ন ন				
Indicate the contributions from:								
Tax (property, SO, sales, etc.):		\$-						
State contribution amount:		\$-	1					
Other (gifts, donations, etc.):		\$-						
	TOTAL	\$-						
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		YES	NO
8-1	Did the entity file a current year budget with the Department of Local Affairs, in	n accordance with	 _	
	Section 29-1-113 C.R.S.? If no, MUST explain: Did the entity pass an appropriations resolution in accordance with Section 29	9-1-108 C.R.S.?	_	_
8-2	If no, MUST explain:		V	
If yes:	Please indicate the amount appropriated for each fund separately for the year	reported		
	Governmental/Proprietary Fund Name	Total Appr	opriations By Fund	
	General Fund - as amended Conservation Trust Fund	\$\$	355,	800
		3 \$		-
		\$		-
	PAR	T 9 - TAX PA	AYER'S BIL	L OF RIGHTS (TA
	Please answer the following question by marking in the appropriate box			YES
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution			
	Note: An election to exempt the government from the spending limitations of TABOR does not exempt to requirement. All governments should determine if they meet this requirement of TABOR.	the government from the	3 percent emergency	reserve
		PART 10	- GENERA	L INFORMATION
	Please answer the following question by marking in the appropriate box			YES
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?			
If Yes:	NEW name			
	PRIOR name			
10-3	Is the entity a metropolitan district?			
10-4	Please indicate what services the entity provides:			_
	See comments			
10-5	Does the entity have an agreement with another government to provide service	es?		
If yes:	List the name of the other governmental entity and the services provided:			
	See comments			
10-6	Does the entity have a certified mill levy?			
If yes:	Please provide the number of <u>mills</u> levied for the year reported (do not enter \$,		
	Bond Redemption m General/Other m		0.000 40.000	
	Total m		40.000	
			YES	NO
40 -	NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000,	· · · · · · · · · · · · · · · · · · ·		
10-7	preceding year annual report with the State Auditor as required under SB 21-2 C.R.S.]? If NO, please explain.	62 [Section 32-1-20)7	
	Plassa usa this space t	o provide any a	additional evol	anations or comments no
		o provide arry a		

N/A	Please use this space to provide any explanations or comments:

BOR)	
NO	Please use this space to provide any explanations or comments:
NO	Please use this space to provide any explanations or comments:
V	10-3: The District was established to provide public streets, traffic and safety, water, sewer, park and recreation, television relay and translation, and mosquito control facilities and improvements for the use and benefit of the inhabitants and taxpayers of the District.
	10-4: Beebe Draw Farms Authority
N/A	
ot previously	included:

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				OSA USE ONLY
Entity Wide:		General Fund		Governmental Funds
Unrestricted Cash & Investments	\$ 164,061	Unrestricted Fund Bala	n⊢\$	(5,863) Total Tax Revenue
Current Liabilities	\$ 175,162	Total Fund Balance	\$	(5,863) Revenue Paying Debt Service
Deferred Inflow	\$ 408,339	PY Fund Balance	\$	1,357 Total Revenue
		Total Revenue	\$	339,988 Total Debt Service Principal
		Total Expenditures	\$	347,208 Total Debt Service Interest
				Total Assets
				Total Liabilities
Governmental		Interfund In	\$	-
Total Cash & Investments	\$ 164,061	Interfund Out	\$	- Enterprise Funds
Transfers In	\$ -	Proprietary		Net Position
Transfers Out	\$ -	Current Assets	\$	- PY Net Position
Property Tax	\$ 311,536	Deferred Outflow	\$	- Government-Wide
Debt Service Principal	\$ -	Current Liabilities	\$	- Total Outstanding Debt
Total Expenditures	\$ 347,208	Deferred Inflow	\$	- Authorized but Unissued
Total Developer Advances	\$ -	Cash & Investments	\$	- Year Authorized
Total Developer Repayments	\$ -	Principal Expense	\$	-

	Notes
\$ 324,902	
\$ -	
\$ 342,923	
\$ -	
\$ -	
\$ 593,036	
\$ 175,162	
\$ -	
\$ -	
\$ -	
\$ 4,500,000	
11/2/2010	

	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.

MUST Print t	he names of <u>ALL</u> members of the governing body below.	A MAJORITY of the m
1	Full Name Brenda Lewis	I, Brenda Lewis, attest that I am a duly elect this application for exemption from audit. Signed
	Full Name	
2	Catrena Rosentreader	I, Catrena Rosentreader, attest that I am a capprove this application for exemption from Signed
	Full Name	I, Sharon Dillon, attest that I am a duly elec
3	Sharon Dillon	this application for exemption from audit. Signed
	Full Name	I, William Caldwell, attest that I am a duly el
4	William Caldwell	approve this application for exemption from Signed WE My term Expires: May 2027
	Full Name	
5	Cyndi Billinger	I, Cyndi Billinger, attest that I am a duly electric this application for exemption from audit. Signed <u>(in Arthurer</u> My term Expires: May 2027
	Full Name	
6		I, personally reviewed and approve this appli Signed My term Expires:
	Full Name	· · · · · · · · · · · · · · · · · · ·
7		I, personally reviewed and approve this appli Signed My term Expires:

nembers of the governing body must sign below.

sted or appointed board member, and that I have personally reviewed and approve
Date:
duly elected or encounted beard member, and that I have nerecepally reviewed and
duly elected or appointed board member, and that I have personally reviewed and maudit.
Date:
ted or appointed board member, and that I have personally reviewed and approve
Date: 3/29/2024
lected or experieted beard member, and that I have neverally reviewed and
lected or appointed board member, and that I have personally reviewed and n audit.
Date:3/28/2024
cted or appointed board member, and that I have personally reviewed and approve
Date:3/29/2024
, attest that I am a duly elected or appointed board member, and that I have ication for exemption from audit.
Date:
, attest that I am a duly elected or appointed board member, and that I have
ication for exemption from audit.



CliftonLarsonAllen LLP 8390 East Crescent Parkway, Suite 300 Greenwood Village, CO 80111 phone 303-779-5710 fax 303-779-0348 claconnect.com

Accountant's Compilation Report

Board of Directors Beebe Draw Farms Metropolitan District No. 1 Weld County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Beebe Draw Farms Metropolitan District No. 1 as of and for the year ended December 31, 2023, 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 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 Beebe Draw Farms Metropolitan District No. 1.

CliftonLarsonAllen LLP

Greenwood Village, Colorado March 21, 2024

Certificate Of Completion

Envelope Id: 3C6C8FFBFF7147E6A7F3E0C6FF2BSDD7 Status: Completed Subject: Complete with DocuSign: 1 SIGNED_Beebe Draw Farms MD No. 1 - 2023 Audit Exemption.pdf Client Name: Beebe Draw Farms MD No. 1 Client Number: A176952 Source Envelope: Document Pages: 10 Signatures: 4 Certificate Pages: 5 Initials: 0 AutoNav: Enabled Stamping: Enabled Ninneapolis, MN 55-Time Zone: (UTC-06:00) Central Time (US & Canada) Jacob.Theisen@clac

Record Tracking

Status: Original 3/27/2024 9:19:06 AM

Signer Events

Brenda Lewis

brenda.beebedraw1@gmail.com

Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure: Accepted: 3/29/2024 2:04:42 PM ID: 36746092-3138-46e2-850a-06cd5ddb5135

D. 36746092-3136-4662-6508-0600300051

Cindy Billinger

cbillinger.beebedraw@gmail.com Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure: Accepted: 3/27/2024 11:18:43 AM

ID: b389cae9-e6b4-42e0-ac9e-db0d1927521f

Sharon Dillon

dillonbbdd1@gmail.com

President

Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure: Accepted: 3/29/2024 10:53:19 AM ID: c701b3c4-7bd7-4770-8fff-514de0703981

William Caldwell

wcaldwell@wje.com

Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure:

Holder: Jacob Theisen Jacob.Theisen@claconnect.com

Signature

DocuSigned by: 8 131E6470B31442F.

Signature Adoption: Drawn on Device Using IP Address: 216.147.124.55 Signed using mobile

(indy Billinger

Signature Adoption: Pre-selected Style Using IP Address: 76.76.74.253 Signed using mobile

— DocuSigned by: Sharon Dillon — AFB8C92ADF58493...

Signature Adoption: Pre-selected Style Using IP Address: 76.76.74.203

Jacob Theisen 220 S 6th St Ste 300 Minneapolis, MN 55402-1418 Jacob.Theisen@claconnect.com IP Address: 24.9.162.210

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Signature Adoption: Drawn on Device Using IP Address: 76.76.74.116 Signed using mobile Sent: 3/27/2024 9:23:17 AM Viewed: 3/28/2024 9:00:26 PM Signed: 3/28/2024 9:02:28 PM

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Signer Events	Signature	Timestamp
Accepted: 3/28/2024 9:00:26 PM ID: 7e984b41-5425-478f-a5b4-7a006198b02a		
In Person Signer Events	Signature	Timestamp
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Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Witness Events	Signature	Timestamp
Notary Events	0.	
	Signature	Timestamp
Envelope Summary Events	Status	Timestamp Timestamps
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