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APPLICATION FOR EXEMPTION FROM AUD

	0110	
	/ /IVI/ .	FORM

 NAME OF GOVERNMENT
 Abilene Station Metropolitan District No. 1

 ADDRESS
 8390 E Crescent Parkway

 Suite 300
 Greenwood Village, CO 80111

 CONTACT PERSON
 Jason Carroll

 PHONE
 303-779-5710

 EMAIL
 Jason.Carroll@claconnect.com

 FAX
 303-779-0348

For the Year Ended 12/31/2021 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: Jason Carroll

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 3/22/2022

RELATIONSHIP TO ENTITY CPA Firm providing accounting services to the District

PREPARER (SIGNATURE REQUIRED)

TITLE

SEE ATTACHED ACCOUNTANT'S COMPILATION REPORT

Has the entity filed for, or has the district filed, a Title 32, Article 1 Special District Notice of Inactive Status during the year? [Applicable to Title 32 special districts only, pursuant to Sections 32-1-103 (9.3) and 32-1-104 (3), C.R.S.]

YES	NO	
	Ø	If Yes, date filed:

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Indicate Name of Fund

NOTE: Attach additional sheets as necessary. Proprietary/Fiduciary Funds Please use this space to Description General Fund* Fund* Description Fund* Fund* provide explanation of any items on this page Assets Assets Cash & Cash Equivalents Cash & Cash Equivalents 1-1 - | \$ \$ - | \$ 1-2 Investments - | \$ Investments \$ 1-3 Receivables \$ - | \$ Receivables \$ - | \$ \$ Due from Other Entities or Funds \$ Due from Other Entities or Funds - \$ 1-4 - | \$ Property Tax Receivable \$ - \$ Other Current Assets [specify...] 1-5 All Other Assets [specify...] - | \$ \$ Total Current Assets \$ - \$ - | \$ 1-6 \$ 1-7 | \$ Capital Assets, net (from Part 6-4) - \$ 1-8 \$ - | \$ Other Long Term Assets [specify...] \$ - | \$ 1-9 \$ - \$ \$ - \$ 1-10 \$ \$ \$ - | \$ TOTAL ASSETS \$ TOTAL ASSETS \$ 1-11 (add lines 1-1 through 1-10) - | \$ (add lines 1-1 through 1-10) - | \$ **Deferred Outflows of Resources Deferred Outflows of Resources** \$ 1-12 [specify...] - | \$ [specify...] - \$ [specify...] \$ - \$ [specify...] - \$ 1-13 (add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS \$ 1-14 - | \$ (add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS \$ - | \$ TOTAL ASSETS AND DEFERRED OUTFLOWS \$ - \$ TOTAL ASSETS AND DEFERRED OUTFLOWS \$ - \$ 1-15 Liabilities Liabilities 1-16 Accounts Payable \$ Accounts Payable - \$ **Accrued Payroll and Related Liabilities** \$ \$ **Accrued Payroll and Related Liabilities** - \$ 1-17 1-18 **Unearned Property Tax Revenue** \$ - | \$ **Accrued Interest Payable** \$ - \$ 1-19 Due to Other Entities or Funds \$ | \$ Due to Other Entities or Funds - \$ All Other Current Liabilities \$ \$ 1-20 | \$ All Other Current Liabilities - \$ (add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES \$ (add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES \$ - | \$ - \$ 1-21 All Other Liabilities [specify...] \$ - | \$ **Proprietary Debt Outstanding** - \$ 1-22 (from Part 4-4) 1-23 \$ \$ Other Liabilities [specify...]: \$ - \$ \$ 1-24 \$ - | \$ - | \$ \$ \$ - | \$ 1-25 - | \$ \$ - \$ \$ - \$ 1-26 TOTAL LIABILITIES \$ (add lines 1-21 through 1-26) - \$ (add lines 1-21 through 1-26) **TOTAL LIABILITIES \$** - \$ 1-27 **Deferred Inflows of Resources Deferred Inflows of Resources Deferred Property Taxes** \$ Pension Related - | \$ 1-28 - | \$ \$ Other [specify...] - \$ 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** Net Position 1-31 Nonspendable Prepaid \$ **Net Investment in Capital Assets** \$ - | \$ - | \$ 1-32 Nonspendable Inventory \$ \$ \$ **Emergency Reserves** - \$ Restricted [specify...] - | \$ 1-33 - \$ 1-34 Committed [specify...] \$ - | \$ Other Designations/Reserves Assigned [specify...] \$ Restricted - \$ 1-35 - | \$ Undesignated/Unreserved/Unrestricted 1-36 Unassigned: - | \$ - | \$ 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 \$ \$ - | \$ 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 This total should be the same as line 1-15 TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET BALANCE POSITION \$ \$ - | \$

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		Governme	ental Funds		Proprietary/F	iduciary Funds	
Line #	Description	General Fund*	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]	\$ 121,199	\$ -	Property [include mills levied in Question 10-6]	\$ -	\$ -	
2-2	Specific Ownership	\$ 8,353	\$ -	Specific Ownership	\$ -	\$ -	
2-3	Sales and Use Tax	\$ -	\$ -	Sales and Use Tax	\$ -	\$ -	_
2-4	Other Tax Revenue [specify]:	\$ -	\$ -	Other Tax Revenue [specify]:	\$ -	\$ -	· <u> </u>
2-5		\$ -	\$ -		\$ -	\$ -	· <u> </u>
2-6		\$ -	\$ -		\$ -	\$ -	
2-7		\$ -	\$ -		\$ -	\$ -	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUI		\$ -	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ -	\$ -	
2-9	Licenses and Permits	\$ -	\$ -	Licenses and Permits	\$ -	\$ -	
2-10	Highway Users Tax Funds (HUTF)	\$ -	\$ -	Highway Users Tax Funds (н∪тғ)	\$ -	\$ -	
2-11	Conservation Trust Funds (Lottery)	\$ -	\$ -	Conservation Trust Funds (Lottery)	\$ -	\$ -	
2-12	Community Development Block Grant	\$ -	\$ -	Community Development Block Grant	\$ -	\$ -	
2-13	Fire & Police Pension	\$ -	\$ -	Fire & Police Pension	\$ -	\$ -	
2-14	Grants	\$ -	\$ -	Grants	\$ -	\$ -	
2-15	Donations	\$ -	-	Donations	\$ -	\$ -	
2-16	Charges for Sales and Services	\$ -	\$ -	Charges for Sales and Services	\$ -	\$ -	
2-17	Rental Income	\$ -	\$ -	Rental Income	\$ -	\$ -	
2-18	Fines and Forfeits	\$ -	\$ -	Fines and Forfeits	\$ -	\$ -	
2-19	Interest/Investment Income	\$ 529	\$ -	Interest/Investment Income	\$ -	\$ -	
2-20	Tap Fees	\$ -	\$ -	Tap Fees	\$ -	\$ -	· <u> </u>
2-21	Proceeds from Sale of Capital Assets	\$ -	\$ -	Proceeds from Sale of Capital Assets	\$ -	\$ -	
2-22	All Other [specify]:	\$ -	\$ -	All Other [specify]:	\$ -	\$ -	· <u> </u>
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	Developer Advances	\$ -	\$ -	Developer Advances	\$ -	\$ -	
2-27	Other [specify]:	\$ -	\$ -	Other [specify]:	\$ -	\$ -	
2-28	Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES		\$ -	Add lines 2-25 through 2-27 TOTAL OTHER FINANCING SOURCES	\$ -	\$ -	GRAND TOTALS
2-29	Add lines 2-24 and 2-26 TOTAL REVENUES AND OTHER FINANCING SOURCES	В		Add lines 2-24 and 2-28 TOTAL REVENUES AND OTHER FINANCING SOURCES		\$ -	\$ 130,081

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.

3-33 Fund Balance, December 31

Sum of Lines 3-30, 3-31, and 3-32

This total should be the same as line 1-37.

PART 3 - FINANCIAL STATEMENTS - OPERATING STATEMENT - EXPENDITURES/EXPENSES **Governmental Funds** Proprietary/Fiduciary Funds Please use this space to Description Description General Fund* provide explanation of any Expenditures Expenses items on this page 3-1 **General Government** - | \$ **General Operating & Administrative** Judicial \$ - \$ \$ Salaries 3-2 3-3 Law Enforcement \$ - \$ **Payroll Taxes** \$ - \$ 3-4 \$ - | \$ Contract Services \$ - | \$ **Highways & Streets** \$ \$ - | \$ **Employee Benefits** - | \$ 3-5 \$ \$ 3-6 Solid Waste - | \$ Insurance - | \$ 3-7 Contributions to Fire & Police Pension Assoc. \$ \$ Accounting and Legal Fees - | \$ \$ Repair and Maintenance \$ 3-8 Health - | \$ - | \$ 3-9 **Culture and Recreation** \$ - \$ Supplies \$ - \$ 3-10 Transfers to other districts \$ \$ Utilities \$ - \$ \$ - | \$ Contributions to Fire & Police Pension Assoc. - | \$ 3-11 Other [specify...]: 3-12 Transfer to Abilene Station MD No. 2 \$ 128,255 \$ Other [specify...] - \$ \$ 3-13 - | \$ - | \$ Capital Outlay \$ Capital Outlay \$ 3-14 - | \$ - | \$ **Debt Service Debt Service** Principal \$ Principal - \$ 3-15 (should match amount in 4-4) (should match amount in 4-4) \$ 3-16 Interest \$ - | \$ Interest - | \$ **Bond Issuance Costs** \$ **Bond Issuance Costs** \$ 3-17 - | \$ - | \$ **Developer Principal Repayments** \$ **Developer Principal Repayments** 3-18 - | \$ - | \$ 3-19 **Developer Interest Repayments** \$ \$ **Developer Interest Repayments** - | \$ 3-20 All Other [specify...]: \$ \$ All Other [specify...]: - \$ Treasurer Fees \$ **GRAND TOTAL** \$ 1,826 \$ - \$ 3-21 Add lines 3-1 through 3-21 Add lines 3-1 through 3-21 3-22 130,081 | \$ - | \$ 130,081 TOTAL EXPENDITURES TOTAL EXPENSES 3-23 Interfund Transfers (In) \$ - Net Interfund Transfers (In) Out - \$ 3-24 Interfund Transfers Out \$ - \$ Other [specify...][enter negative for expense] \$ - \$ Other Expenditures (Revenues): \$ - | \$ Depreciation - | \$ 3-25 3-26 \$ - | \$ Other Financing Sources (Uses) \$ - | \$ 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) (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 Net Increase (Decrease) in Net Position Sources Over (Under) Expenditures 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 \$ 0 | \$ \$ Net Position, January 1 from December 31 prior year 3-31 Fund Balance, January 1 from December 31 prior year report \$ \$ \$ - | \$ 3-32 Prior Period Adjustment (MUST explain) Prior Period Adjustment (MUST explain) \$ \$ \$ \$

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.

0 | \$

Net Position, December 31

Sum of Lines 3-30, 3-31, and 3-32

- This total should be the same as line 1-37.

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	PART 4 - DEBT OUTSTAN	NDING, ISSUED, AN	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		\ \ \	
4-3	Is the entity current in its debt service payments? If no, MUST explain:		V	
4-4	Please complete the following debt schedule, if applicable: (please only include principal amounts) Outstanding at beginning of year*	ued during Retired during year	Outstanding at year-end	
	General obligation bonds \$ - \$	- \$ - \$		
	Revenue bonds \$ - \$ Notes/Loans \$ - \$	\$ - \$ - \$ - \$		
	Leases \$ - \$	- \$ - \$		
	Developer Advances \$ - \$	- \$ - \$	-	
	Other (specify):	- \$ - \$		
	TOTAL \$ - \$ *must agree to prior year endir	- \$ - \$	-	
	Please answer the following questions by marking the appropriate boxes.	YES	NO	
4-5 If yes:	Does the entity have any authorized, but unissued, debt [Section 29-1-605(2) C.R.S.]? How much? \$ 72,000,000	☑		
4-6 If yes:	Date the debt was authorized: 11/7/2006 Does the entity intend to issue debt within the next calendar year? How much? \$ -		v	
4-7 If yes:	Does the entity have debt that has been refinanced that it is still responsible for?		v	
4-8 If yes:	Does the entity have any lease agreements? What is being leased?		<u> </u>	
	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?	Ь	<u>u</u>	
		AND INVESTMENT	TS	
	Please provide the entity's cash deposit and investment balances.	AMOUNT	TOTAL	Please use this space to provide any explanations or comments:
5-1	YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit	\$ - \$ -		
5-2		H DEPOSITS \$		
	Investments (if investment is a mutual fund, please list underlying investments):			
		\$ -		
5-3				
		\$ - \$ -		
	TOTAL IN	VESTMENTS \$	-	
	TOTAL CASH AND IN			
	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.?		V	
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:		v	

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		PART 8 - BUD				
	Please answer the following question by marking in the appropriate box Did the entity file a current year budget with the Department of Local Affairs, in acc	and an account to	YES	NO	N/A	Please use this space to provide any explanations or comments:
8-1	Section 29-1-113 C.R.S.? If no, MUST explain:	ordance with	V			
8-2	Did the entity pass an appropriations resolution in accordance with Section 29-1-10	8 C.R.S.?	v			
	If no, MUST explain:	44	_	_	_	
ii yes.	Please indicate the amount appropriated for each fund separately for the year repo					
	Governmental/Proprietary Fund Name General Fund	Total Appropriations \$	132,500			
		φ \$	109.633			
	Despress - rejecto	\$	2,458,175			
		\$				
		- TAX PAYER'	<u>S BILL OF</u>	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, Art	/ /4		✓		
	Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government. All governments should determine if they meet this requirement of TABOR.	ernment from the 3 percent en	ergency reserve			
	F	PART 10 - GEN	ERAL INF	FORMATION	NC	
	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?				V	10-3: Streets, water, sanitary and storm sewer, public transportation,
If yes:	Date of formation:					traffic and safety, mosquito control, television relay, park and recreation, and fire protection. 10-4: Under the Service Plan, Abilene Station Metropolitan District No.
10-2	Has the entity changed its name in the past or current year?				☑	1("the District") operates in conjunction with Abilene Station Metropolitan District No. 2. The District acts as the "Taxing District" and
If Yes:	NEW name					Abilene Station MD No.2 acts as the "Management District" under the "Facilities Funding, Construction and Operation Agreement" dated June
	PRIOR name					8, 2007 between these two entities. Abilene Station MD No.2 will operate, maintain, finance and construct Facilities and provide
	Is the entity a metropolitan district?			v		administrative services for both entities and the District will provide revenue to Abilene Station MD. No. 2 to fund such activities.
10-4	Please indicate what services the entity provides:					Teveride to Asherie Station MB. 146. 2 to faile sach activities.
	See box to the right.				_	
	Does the entity have an agreement with another government to provide services?			V		
ii yes:	List the name of the other governmental entity and the services provided:					
	See box to the right.					
	Does the entity have a certified mill levy?			✓		
If yes:	Please provide the number of mills levied for the year reported (do not enter \$ amount Bond Redemption mills	0.000				
	General/Other mills	40.000				
	Total mills	40.000				
	Please use this space to	provide any additiona	al explanation:	s or comments	not previously inc	luded:

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				OSA USE ONLY			
Entity Wide:		General Fund		Gov	ernmental Funds		Notes
Unrestricted Cash & Investments	\$	- Unrestricted Fund Balan	\$	- Tota	al Tax Revenue	\$ 129,552	
Current Liabilities	\$	- Total Fund Balance	\$	- Rev	enue Paying Debt Service	\$	
Deferred Inflow	\$	- PY Fund Balance	\$	- Tota	al Revenue	\$ 130,081	
		Total Revenue	\$	130,081 Tota	al Debt Service Principal	\$	
		Total Expenditures	\$	130,081 Tota	al Debt Service Interest	\$ -	
Governmental		Interfund In	\$	· -			
Total Cash & Investments	\$	- Interfund Out	\$	- Ente	erprise Funds		
ransfers In	\$	- Proprietary		Net	Position	\$ -	
ransfers Out	\$	- Current Assets	\$	- PY1	Net Position	\$ -	
Property Tax	\$	121,199 Deferred Outflow	\$	- Gov	rernment-Wide		
Debt Service Principal	\$	- Current Liabilities	\$	- Tota	al Outstanding Debt	\$ -	
otal Expenditures	\$	130,081 Deferred Inflow	\$	- Auth	norized but Unissued	\$ 72,000,000	
Total Developer Advances	\$	- Cash & Investments	\$	- Yea	r Authorized	11/7/2006	
Total Davidonar Panaumants	e	- Principal Expanse	¢				

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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?	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 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, 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 David Erb	I, David Erb, 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 Audio Line Date:
	Full Name	I, Marylin Erb, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve
2	Marilyn Erb	this application for exemption from audit. Signed Marlyn Erb Date: 3/25/2022 My term Expires: May 2023
	Full Name	I,, attest that I am a duly elected or appointed board member, and that I have
3		personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires:
	Full Name	I,, attest that I am a duly elected or appointed board member, and that I have
4		personally reviewed and approve this application for exemption from audit. Signed Date: My term Expires:
	Full Name	I, , attest that I am a duly elected or appointed board member, and that I have
5		personally reviewed and approve this application for exemption from audit. Signed My term Expires:
	Full Name	I,, attest that I am a duly elected or appointed board member, and that I have
6		personally reviewed and approve this application for exemption from audit. 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 Abilene Station Metropolitan District No. 1 Arapahoe County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Abilene Station Metropolitan District No. 1 as of and for the year ended December 31, 2021, 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 Abilene Station Metropolitan District No. 1.

Greenwood Village, Colorado

Clifton Larson allen LLG

March 22, 2022



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Certificate Of Completion

Envelope Id: 1F509D96CA6046C08A7B7D6F4E00765C

Subject: Please DocuSign: ASMD No. 1 - 2021 Audit Exemption.pdf

Client Name: Abilene Station Metropolitan District No. 1

Client Number: 011-043788-00

Source Envelope:

Document Pages: 10 Signatures: 2
Certificate Pages: 5 Initials: 0

AutoNav: Enabled

Envelopeld Stamping: Enabled

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

Status: Completed

Envelope Originator:

Lauryn Rodvold 220 South 6th Street

Suite 300

Minneapolis, MN 55402

Lauryn.Rodvold@claconnect.com IP Address: 165.225.10.154

Record Tracking

Status: Original

3/25/2022 1:16:14 PM

Holder: Lauryn Rodvold

Lauryn.Rodvold@claconnect.com

Location: DocuSign

Signer Events

David Erb

dje@davidjerb.com

President

Security Level: Email, Account Authentication

(None)

Signature

Docusigned by:

David DEN, ANA.

David J Erb & Co., Viringel

Signature Adoption: Drawn on Device Using IP Address: 35.133.49.4

Timestamp

Sent: 3/25/2022 1:19:37 PM Viewed: 3/25/2022 3:04:47 PM Signed: 3/25/2022 3:05:12 PM

Electronic Record and Signature Disclosure:

Accepted: 3/25/2022 3:04:47 PM

ID: 4e4d8892-11a5-4c9c-9bdc-cfb6aebd4432

Marilyn Erb

mae@davidjerb.com

Security Level: Email, Account Authentication

(None)

Signature Adoption: Pre-selected Style Using IP Address: 35.133.49.4

Sent: 3/25/2022 1:19:37 PM Viewed: 3/25/2022 5:30:46 PM Signed: 3/25/2022 5:31:23 PM

Electronic Record and Signature Disclosure:

Accepted: 2/25/2019 12:15:04 PM

ID: 3b969dcf-35ed-4f5c-b997-3d6837523605

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	3/25/2022 1:19:38 PM		
Certified Delivered	Security Checked	3/25/2022 5:30:46 PM		
Signing Complete	Security Checked	3/25/2022 5:31:23 PM		
Completed	Security Checked	3/25/2022 5:31:23 PM		
Payment Events	Status	Timestamps		
Electronic Record and Signature Disclosure				

ELECTRONIC RECORD AND SIGNATURE DISCLOSURE

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