

**THE SPRINGS METROPOLITAN DISTRICT**  
**TOWN OF FIRESTONE, COLORADO**  
**2025 ANNUAL REPORT**

Board of Trustees  
Town of Firestone, Colorado  
*via Email*

County Clerk and Recorder  
Weld County, Colorado  
*via Email*

Office of the State Auditor,  
1525 Sherman Street, 7th Floor  
Denver, Colorado 80203  
*via E-Filing Portal*

Division of Local Government,  
1313 Sherman Street, Room 521  
Denver, Colorado 80203  
*via E-Filing Portal*

The following information and documents (attached as exhibits) are provided for calendar year 2025 pursuant to Section VII of the Service Plan of The Springs Metropolitan District (the “**District**”), approved by the Board of Trustees of the Town of Firestone, Colorado (the “**Town**”).

For the year ending December 31, 2025, the District makes the following report:

**1. Boundary changes made:**

The District had no boundary changes in 2025.

**2. Intergovernmental agreements entered into or terminated:**

The District did not enter into or terminate any intergovernmental agreements in 2025.

**3. Changes or proposed changes in District’s polices:**

There are no changes or proposed changes in the District’s polices.

**4. Changes or proposed changes in District’s operations:**

There are no changes or proposed changes in the District’s operations.

**5. Access information to obtain a copy of the Rules and Regulations:**

The District has not yet adopted any rules or regulations.

**6. A summary of any litigation involving public improvements by the District:**

To the best of our knowledge, the District is not involved in any litigation involving public improvements.

**7. Proposed plans for the year immediately following the report year:**

There are no plans or proposed plans for 2026.

**8. Status of the construction of public improvements by the District:**

The District did not have any development activity in 2025.

**9. List of facilities or improvements constructed by the District that were conveyed to the Town:**

The District did not have any development activity in 2025.

**10. Final Assessed Value of Taxable Property within the District's boundaries as of December 31, 2025:**

The 2025 total gross assessed value of taxable property within the boundaries of the District is \$40,930.

The 2025 total net assessed value of taxable property within the boundaries of the District is \$26,199.

**11. Current annual budget of the District:**

Attached as Exhibit A is a copy of the District's Budget for the current fiscal year 2026.

**12. Most recently filed audited financial statements of the District. To the extent audited financial statements are required by state law or most recently filed audit exemption:**

Attached as Exhibit B is a copy of the District's application for exemption from audit for fiscal year 2025.

**13. Notice of any uncured defaults:**

No notices of any uncured default were issued during fiscal year 2025.

**14. The District's inability to pay any financial obligations as they come due under any obligation which continues beyond a ninety-day period:**


To the best of our knowledge, the District has been able to pay its obligations as they come due during fiscal year 2025.

**15. Certificate certifying that the District is in full compliance with the District's Service Plan:**

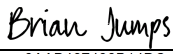
See attached Exhibit C.

Respectfully submitted this 15th day of April, 2026.

THE SPRINGS METROPOLITAN DISTRICT

By:  \_\_\_\_\_  
DocuSigned by:  
Chair  
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Attest:

Signed by:  
 \_\_\_\_\_  
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Secretary

**EXHIBIT A**

2026 Budget

**THE SPRINGS METROPOLITAN DISTRICT**  
**Budget for Year Ending December 31, 2026**

**Budget Message**

The Springs Metropolitan District (the "District") prepares its Budget using the modified accrual basis of accounting. The District does not have any obligations related to lease-purchase agreements. The District provides for the construction, operation and maintenance of public water improvements and facilities and storm drainage improvements.

The attached Budget for the District includes these important features:

**GENERAL FUND:**

Budget expenditures consist of legal, accounting, insurance, management fees and water/storm drainage maintenance expenses. All of these expenses are reflected on the attached Budget. The mill levy is 6.000 Mills for 2025 yielding \$157 in property taxes. Revenue sources include Real Estate Taxes, Specific Owner Taxes and Developer Advances.

**SPRINGS METROPOLITAN DISTRICT  
GENERAL FUND  
2026 ADOPTED BUDGET  
WITH 2024 ACTUAL AND 2025 ESTIMATED AMOUNTS**

|   | <u>2024<br/>Actual</u> | <u>2025<br/>Estimated</u> | <u>2026<br/>Adopted</u> |
|---|------------------------|---------------------------|-------------------------|
| <b>REVENUES</b>   |                        |                           |                         |
| Property taxes  | \$ 411                 | \$ 398                    | \$ 157                  |
| Specific ownership taxes                                | 16                     | 20                        | 21                      |
| Other income  | 12                     | 43                        | 50                      |
| <b>Total revenues</b>                                   | <u>439</u>             | <u>461</u>                | <u>228</u>              |
| <b>EXPENDITURES</b>                                     |                        |                           |                         |
| Accounting  | -                      | 2,000                     | 20,000                  |
| Legal   | -                      | -                         | 20,000                  |
| County treasurer fees (TIF)                             | 114                    | 6                         | 156                     |
| Insurance and bonds                                     | -                      | -                         | 3,000                   |
| Miscellaneous   | -                      | -                         | 3,000                   |
| Emergency reserve and contingency                       | -                      | -                         | 1,400                   |
| <b>Total expenditures</b>                               | <u>114</u>             | <u>2,006</u>              | <u>47,556</u>           |
| <b>EXCESS OF EXPENDITURES OVER<br/>(UNDER) REVENUES</b> | <u>325</u>             | <u>(1,545)</u>            | <u>(47,328)</u>         |
| <b>OTHER FINANCING SOURCES</b>                          |                        |                           |                         |
| Developer advances                                      | -                      | 1,000                     | 48,000                  |
| <b>Total other financing sources</b>                    | <u>-</u>               | <u>1,000</u>              | <u>48,000</u>           |
| <b>NET CHANGE IN FUND BALANCE</b>                       | 325                    | (545)                     | 672                     |
| <b>BEGINNING FUND BALANCE (DEFICIT)</b>                 | <u>547</u>             | <u>872</u>                | <u>327</u>              |
| <b>ENDING FUND BALANCE (DEFICIT)</b>                    | <u>\$ 872</u>          | <u>\$ 327</u>             | <u>\$ 999</u>           |

**EXHIBIT B**

Application for Exemption from Audit for fiscal year 2025

# Application for Exemption From Audit Short Form

## Instructions

**If either revenues or expenditures exceed \$200,000, use the Long Form**

Under the Local Government Audit Law (Section 29-1-601, et seq., C.R.S.) any local government may apply for an exemption from audit if neither revenues nor expenditures exceed \$1,000,000 in the year.

**Exemptions from audit are NOT automatic**

To qualify for exemption from audit, a local government must complete an Application for Exemption from Audit **each year** and submit it to the Office of the State Auditor (OSA). Approval for an exemption from audit is granted only upon the review by the OSA.

Any preparer of an Application for Exemption from Audit — Short Form must be a person skilled in governmental accounting.

**Read ALL instructions before completing and submitting this form**

All applications must be filed with the OSA **within 3 months** after the accounting year-end.

For example, applications must be received by the OSA on or before March 31 for governments with a December 31 year-end. Applications for exemption from audit are not eligible for an extension of time.

Governmental activity should be reported on the modified accrual basis. Proprietary activity should be reported on a cash or budgetary basis.

### **Important!**

All Applications for Exemption from Audit are subject to review and approval by the Office of the State Auditor.

Governmental Activity should be reported on the **Modified Accrual Basis**.

Proprietary Activity should be reported on a **Budgetary Basis**.

Failure to file an application or denial of the request could cause the local government to lose its exemption from audit for that year and the ensuing year. In that event, an audit shall be required.

**Postmark dates will not be accepted as proof of submission on or before the statutory deadline**

Prior year forms are obsolete and will not be accepted.

Applications must be fully and accurately completed. Applications submitted on forms other than those prescribed by the OSA will not be accepted.

For your reference, the Colorado Revised Statutes are available through the [LexisNexis Colorado portal](#).

## Checklist

- Has the preparer signed the application prior to board approval?
- Has the entity corrected all prior year deficiencies as communicated by the OSA?
- Has the application been **personally** reviewed and approved by the governing body?
- Are all sections on the form complete, including responses to all of the questions?
- Did you include any relevant explanations for unusual items in the appropriate spaces at the end of each section?

Will this application be submitted electronically?  Yes  No

- If yes, have you read and understood the Electronic Signature Policy? See policy in Part 10.

-- or --

- If yes, have you included a resolution?
  - Does the resolution state that the governing body **personally** reviewed and approved the resolution in an open public meeting?
  - Has the resolution been signed by a **majority** of the governing body? See sample resolution at the end of this form.

Will this application be submitted via a mail service (e.g., U.S. Post Office, FedEx, UPS, courier)?  Yes  No

- If yes, does the application include **original ink signatures** from the **majority** of the governing body?

**Filing Methods**

**Web Portal (recommended)**  
[apps.leg.co.gov/osa/lg](https://apps.leg.co.gov/osa/lg)  
 For faster processing, the web portal should be used for submissions.

**Mail**  
**Office of the State Auditor**  
 Local Government Audit Division  
 1375 Sherman St., 5th Floor  
 Denver, CO 80261-3000

**Questions? Email:** [osa.lg@coleg.gov](mailto:osa.lg@coleg.gov) **Phone:** 303-869-3000

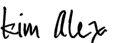
**Contact Information**

For the year ended 2025 or the fiscal year ended \_\_\_\_\_.

|                    |                                   |
|--------------------|-----------------------------------|
| Name of government | THE SPRINGS METROPOLITAN DISTRICT |
| Street address     | 44 COOK ST. SUITE 620             |
| City, State, Zip   | DENVER, CO 80206                  |
| Contact person     | MATT RUHLAND                      |
| Phone              | 303-218-7200                      |
| Email              | MRUHLAND@CEGRLAW.COM              |

**Certification of Preparer**

I certify that I am skilled in governmental accounting and that the information in the application is complete and accurate, to the best of my knowledge. The preparer must sign prior to board approval.

|   |   |  |
|---|---|--|
| Name  | KIM ALEX  |  |
| Title   | DISTRICT ACCOUNTANT                                   |  |
| Firm name (if applicable)   | COMMUNITY RESOURCE SERVICES OF COLORADO               |  |
| Address   | 7995 E. PRENTICE AVE. SUITE 100 GREENWOOD VILLAGE, CO |  |
| Phone   | 303-381-4960  |  |
| Preparer signature  | Date prepared   |  |
| DocuSigned by:<br><br>30AAE66D48F2408... | 2/23/2026   |  |

Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types.

- Governmental (modified accrual basis)
- Proprietary (cash or budgetary basis)

**Part 1: Revenues**

**Part 1A: Revenues Table**

All revenues for all funds must be reflected in this section, including proceeds from the sale of the government’s land, building, and equipment, and proceeds from debt or lease transactions. Financial information will not include fund equity information.

| <b>Line</b> | <b>Description</b>  | <b>Total (round to nearest dollar)</b> |
|-------------|---|--|
| 1-1         | Taxes: Property (report mills levied in line 9-12)  | \$ 441                                 |
| 1-2         | Specific ownership  | \$ 16                                  |
| 1-3         | Sales and use   |  |
|             | Other (specify in line 1-4):  |  |
| 1-4         |   |  |
| 1-5         | Licenses and permits  |  |
| 1-6         | Intergovernmental: Grants   |  |
| 1-7         | Conservation Trust Funds (Lottery)  |  |
| 1-8         | Highway Users Tax Funds (HUTF)  |  |
|             | Other (specify in line 1-9):  |  |
| 1-9         |   |  |
| 1-10        | Charges for services  |  |
| 1-11        | Fines and forfeits  |  |
| 1-12        | Special assessments   |  |
| 1-13        | Investment income   | \$ 11                                  |
| 1-14        | Charges for utility services  |  |
| 1-15        | Debt proceeds (should agree to Part 3, Debt Schedule Table, column 'issued during year')                  |  |
| 1-16        | Lease proceeds (should agree to Part 3, Debt Schedule Table, column 'issued during year')                 |  |
| 1-17        | Developer Advances received<br>(should agree to Part 3, Debt Schedule Table, column 'issued during year') |  |
| 1-18        | Proceeds from sale of capital assets  |  |
| 1-19        | Fire and police pension   |  |
| 1-20        | Donations   |  |
|             | Other (specify in lines 1-21 through 1-24)  |  |
| 1-21        |   |  |
| 1-22        |   |  |
| 1-23        |   |  |
| 1-24        |   |  |
| 1-25        | <b>TOTAL REVENUES</b><br>(add lines 1-1 through 1-24)   | \$ 468                                 |

**IF TOTAL REVENUES OR TOTAL EXPENDITURES ARE GREATER THAN \$200,000 — STOP.**

You may not use this form. Please use the Application for Exemption from Audit - Long Form.

**Part 1B: Comments or Additional Information**

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Please use the space below to provide any additional information (optional):

**Part 2: Expenditures/Expenses**

**Part 2A: Expenditures/Expenses Table**

All expenditures for all funds must be reflected in this section, including the purchase of capital assets and principal and interest payments on long-term debt. Financial information will not include fund equity information.

| Line | Description  | Total (round to nearest dollar) |
|------|--|---------------------------------|
| 2-1  | Administrative   |                                 |
| 2-2  | Salaries   |                                 |
| 2-3  | Payroll taxes  |                                 |
| 2-4  | Contract services  |                                 |
| 2-5  | Employee benefits  |                                 |
| 2-6  | Insurance  |                                 |
| 2-7  | Accounting and legal fees  |                                 |
| 2-8  | Repair and maintenance   |                                 |
| 2-9  | Supplies   |                                 |
| 2-10 | Utilities and telephone  |                                 |
| 2-11 | Fire/Police  |                                 |
| 2-12 | Streets and highways   |                                 |
| 2-13 | Public health  |                                 |
| 2-14 | Capital outlay   |                                 |
| 2-15 | Utility operations   |                                 |
| 2-16 | Culture and recreation   |                                 |
| 2-17 | Debt service principal (should agree to Part 3, Debt Schedule Table 'Retired during year')                               |                                 |
| 2-18 | Debt service interest  |                                 |
| 2-19 | Repayment of Developer Advances Principal<br>(should agree to Part 3, Debt Schedule Table, column 'Retired during year') |                                 |
| 2-20 | Repayment of Developer Advances Interest   |                                 |
| 2-21 | Contribution to pension plan   |                                 |
| 2-22 | Contribution to Fire & Police Pension Association  |                                 |
| 2-23 | Other (specify in lines 2-24 through 2-27)   |                                 |
| 2-24 | Treasurer fees   | \$ 4                            |
| 2-25 | TIF Expense  | \$ 162                          |
| 2-26 |  |                                 |
| 2-27 |  |                                 |
| 2-28 | <b>TOTAL EXPENDITURES/EXPENSES</b><br>(Add lines 2-1 through 2-27)   | \$ 166                          |

**IF TOTAL REVENUES OR TOTAL EXPENDITURES ARE GREATER THAN \$200,000 — STOP.**

You may not use this form. Please use the Application for Exemption from Audit - Long Form.

**Part 2B: Comments or Additional Information**

---

Please use the space below to provide any additional information (optional):

**Part 3: Debt Outstanding, Issued, and Retired**

|            |  |                                      |   |
|------------|--|--------------------------------------|---|
| <b>3-1</b> | Does the entity have outstanding debt?   | <input checked="" type="radio"/> Yes | <input type="radio"/> No                                      |
| <b>3-2</b> | If no, skip to line 3-13.<br>If yes, please attach a copy of the entity's debt repayment schedule. |                                      |   |
| <b>3-3</b> | Is the debt repayment schedule attached?   | <input type="radio"/> N/A            | <input type="radio"/> Yes <input checked="" type="radio"/> No |
|            | If no, MUST explain below.<br>DEVELOPER ADVANCES TO BE REPAID AS FUNDS BECOME AVAILABLE            |                                      |   |
| <b>3-4</b> | Is the entity current in its debt service payments?  | <input checked="" type="radio"/> Yes | <input type="radio"/> No                                      |
|            | If no, MUST explain below.   |                                      |   |
| <b>3-5</b> | If no, also indicate if the government is in default with its bond agreements.                     | <input type="radio"/> Yes            | <input type="radio"/> No                                      |

**Debt Schedule Table**

Please complete the following debt schedule, if applicable.  
Please only include principal amounts. Enter all amounts as positive numbers.

| Line        | Debt Type                                     | Outstanding at End of Prior Year* | Issued During Year | Retired During Year | Outstanding at Year-End |
|-------------|---|-----------------------------------|--------------------|---------------------|-------------------------|
| <b>3-6</b>  | General Obligation Bonds                      |                                   |                    |                     | \$ 0                    |
| <b>3-7</b>  | Revenue Bonds                                 |                                   |                    |                     | \$ 0                    |
| <b>3-8</b>  | Notes/Loans                                   |                                   |                    |                     | \$ 0                    |
| <b>3-9</b>  | Lease & SBITA**<br>Liabilities (GASB 87 & 96) |                                   |                    |                     | \$ 0                    |
| <b>3-10</b> | Developer Advances                            | \$ 222,775                        |                    |                     | \$ 222,775              |
|             | Other (specify in line 3-11)                  |                                   |                    |                     |                         |
| <b>3-11</b> |   |                                   |                    |                     | \$ 0                    |
| <b>3-12</b> | <b>TOTAL</b><br>(Add lines 3-6 through 3-11)  | \$ 222,775                        | \$ 0               | \$ 0                | \$ 222,775              |

\*Must agree to prior year-end balance

\*\*Subscription-Based Information Technology Arrangements

Comments (optional)

|             |   |                                      |                                     |
|-------------|---|--------------------------------------|-------------------------------------|
| <b>3-13</b> | Does the entity have any authorized but unissued debt as of its fiscal year-end?              | <input checked="" type="radio"/> Yes | <input type="radio"/> No            |
| <b>3-14</b> | If yes, how much?   | \$ 104,362,500                       |                                     |
| <b>3-15</b> | Date the debt was authorized  | 11/4/2014                            |                                     |
| <b>3-16</b> | Is the authorized but unissued debt further limited by the entity's most recent Service Plan? | <input type="radio"/> Yes            | <input checked="" type="radio"/> No |
| <b>3-17</b> | If yes, how much?   |                                      |                                     |
| <b>3-18</b> | Date of the most recent Service Plan  |                                      |                                     |
| <b>3-19</b> | Does the entity intend to issue debt within the next calendar year?                           | <input type="radio"/> Yes            | <input checked="" type="radio"/> No |
| <b>3-20</b> | If yes, how much?   |                                      |                                     |
| <b>3-21</b> | Does the entity have debt that has been refinanced that it is still responsible for?          | <input type="radio"/> Yes            | <input checked="" type="radio"/> No |
| <b>3-22</b> | If yes, what is the amount outstanding?   |                                      |                                     |
| <b>3-23</b> | Does the entity have any lease agreements?  | <input type="radio"/> Yes            | <input checked="" type="radio"/> No |
| <b>3-24</b> | If yes, what is being leased?   |                                      |                                     |
| <b>3-25</b> | What is the original date of the lease?   |                                      |                                     |
| <b>3-26</b> | Number of years of lease?   |                                      |                                     |
| <b>3-27</b> | Is the lease subject to annual appropriation?   | <input type="radio"/> Yes            | <input type="radio"/> No            |
| <b>3-28</b> | What are the annual lease payments?   |                                      |                                     |

Please use the space below to provide any additional information (optional):

**Part 4: Cash and Investments**

Please provide the entity's cash deposit and investment balances.

| Line  | Description  | Amount |
|---|--|--------|
| 4-1   | Year-end Total of all Checking and Savings Accounts          |        |
| 4-2   | Certificates of deposit                                      |        |
| 4-3   | <b>TOTAL CASH DEPOSITS</b><br>(Add lines 4-1 and 4-2)        | \$ 0   |
| <b>Investments</b> (specify in lines 4-4 through 4-8. If investment is a mutual fund, please list underlying investment.) |  |        |
| 4-4   | CSAFE  | \$ 291 |
| 4-5   |  |        |
| 4-6   |  |        |
| 4-7   |  |        |
| 4-8   |  |        |
| 4-9   | <b>Total Investments</b><br>(Add lines 4-4 through 4-8)      | \$ 291 |
| 4-10  | <b>TOTAL CASH AND INVESTMENTS</b><br>(Add lines 4-3 and 4-9) | \$ 291 |

|      |   |                           |                                      |                          |
|------|---|---------------------------|--------------------------------------|--------------------------|
| 4-11 | Are the entity's investments legal in accordance with Section 24-75-601, et. seq., C.R.S.?  | <input type="radio"/> N/A | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| 4-12 | Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq. C.R.S.)? |                           | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| 4-13 | If no, MUST explain below.  |                           |                                      |                          |
|      |   |                           |                                      |                          |

Please use the space below to provide any additional information (optional).

**Part 5: Capital and Right-to-Use Assets**

|            |   |                                      |                          |
|------------|---|--------------------------------------|--------------------------|
| <b>5-1</b> | Does the entity have capitalized assets? (If "no" is selected, skip the rest of Part 5.)                    | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| <b>5-2</b> | Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.? | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| <b>5-3</b> | If no, MUST explain below.  |                                      |                          |
|            |   |                                      |                          |

**Capital and Right-to-Use Assets Table**

| Line        | Asset Type  | Beginning of the Year Balance* | Additions** | Deletions | Year-End Balance |
|-------------|---|--------------------------------|-------------|-----------|------------------|
| <b>5-4</b>  | Land  |                                |             |           | \$ 0             |
| <b>5-5</b>  | Buildings   |                                |             |           | \$ 0             |
| <b>5-6</b>  | Machinery and Equipment   |                                |             |           | \$ 0             |
| <b>5-7</b>  | Furniture and Fixtures  |                                |             |           | \$ 0             |
| <b>5-8</b>  | Infrastructure  |                                |             |           | \$ 0             |
| <b>5-9</b>  | Construction In Progress (CIP)  | \$ 366,899                     |             |           | \$ 366,899       |
| <b>5-10</b> | Leased & SBITA Right-to-Use Assets  |                                |             |           | \$ 0             |
|             | Other (explain in line 5-11)  |                                |             |           |                  |
| <b>5-11</b> |   |                                |             |           | \$ 0             |
| <b>5-12</b> | Accumulated Depreciation/<br>Amortization<br>(Enter a negative or credit balance) |                                |             |           | \$ 0             |
| <b>5-13</b> | <b>TOTAL</b><br>(Add lines 5-4 through 5-12)                                      | \$ 366,899                     | \$ 0        | \$ 0      | \$ 366,899       |

\*Must agree to prior year-end balance

\*\*Generally capital asset additions should be reported as capital outlay on line 2-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy in the comments section below.

Please use the space below to provide any additional information (optional).

**Part 6: Pension Information**

|            |   |                           |                                     |
|------------|---|---------------------------|-------------------------------------|
| <b>6-1</b> | Does the entity have an "old hire" firefighters' pension plan?                    | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| <b>6-2</b> | Does the entity have a volunteer firefighters' pension plan?                      | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| <b>6-3</b> | If yes, who administers the plan?   |                           |                                     |
|            |   |                           |                                     |
|            | Indicate the contributions from the following in lines 6-4 through 6-6.           |                           |                                     |
| <b>6-4</b> | Tax (property, specific ownership, sales, etc.)                                   |                           |                                     |
| <b>6-5</b> | State contribution amount   |                           |                                     |
| <b>6-6</b> | Other (gifts, donations, etc.)  |                           |                                     |
| <b>6-7</b> | <b>TOTAL</b><br>(Add lines 6-4 through 6-6)                                       |                           | \$ 0                                |
| <b>6-8</b> | What is the monthly benefit paid for 20 years of service per retiree as of Jan 1? |                           |                                     |

Please use the space below to provide any additional information (optional).

**Part 7: Budget Information**

|   |  |                           |                                      |                          |
|---|--|---------------------------|--------------------------------------|--------------------------|
| 7-1   | Did the entity file a budget with the Department of Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.? | <input type="radio"/> N/A | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| 7-2   | If no, MUST explain below.   |                           |                                      |                          |
| 7-3   | Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.?                                      | <input type="radio"/> N/A | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| 7-4   | If no, MUST explain below.   |                           |                                      |                          |
| If yes, indicate the amount appropriated for each fund separately for the year reported in the table below. |  |                           |                                      |                          |

**Appropriation Amount by Fund Table**

Enter the fund name, then indicate the final amount appropriated for each fund for the year reported. Ensure each individual fund's final appropriated amount agrees to the adopted budget. Do not combine funds.

| Line | Governmental/Proprietary Fund Name | Total     |
|------|------------------------------------|-----------|
| 7-5  | GENERAL FUND                       | \$ 49,006 |
| 7-6  |                                    |           |
| 7-7  |                                    |           |
| 7-8  |                                    |           |
| 7-9  |                                    |           |

Please use the space below to provide any additional information (optional).

**Part 8: Taxpayer's Bill of Rights (TABOR)**

|            |  |                                      |                          |
|------------|--|--------------------------------------|--------------------------|
| <b>8-1</b> | Is the entity in compliance with all the provisions of TABOR (State Constitution, Article X, Section 20(5))? | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| <b>8-2</b> | If no, MUST explain below.   |                                      |                          |

Note: An election to exempt the entity from the spending limitations of TABOR does not exempt the entity from the 3 percent emergency reserve requirement. All entities should determine if they meet this requirement of TABOR.

Please use the space below to provide any additional information (optional).

**Part 9: General Information**

|             |  |                                      |   |
|-------------|--|--------------------------------------|---|
| <b>9-1</b>  | Is this application for a newly formed governmental entity?  | <input type="radio"/> Yes            | <input checked="" type="radio"/> No                           |
| <b>9-2</b>  | If yes, what was the date of formation   |                                      |   |
| <b>9-3</b>  | Has the entity changed its name in the past or current year?   | <input type="radio"/> Yes            | <input checked="" type="radio"/> No                           |
| <b>9-4</b>  | If yes, please list the NEW name below.  |                                      |   |
| <b>9-5</b>  | If yes, please list the PRIOR name below.  |                                      |   |
| <b>9-6</b>  | Is the entity a metropolitan district?   | <input checked="" type="radio"/> Yes | <input type="radio"/> No                                      |
| <b>9-7</b>  | Please indicate what services the entity provides below.<br>Streets, street lights, traffic & safety, water, sewer, transportation, parks & recreation   |                                      |   |
| <b>9-8</b>  | Does the entity have an agreement with another government to provide services?   | <input type="radio"/> Yes            | <input checked="" type="radio"/> No                           |
| <b>9-9</b>  | If yes, list the name of the other governmental entity and the services provided below.  |                                      |   |
| <b>9-10</b> | 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.) | <input type="radio"/> Yes            | <input checked="" type="radio"/> No                           |
| <b>9-11</b> | If yes, what was the date filed  |                                      |   |
| <b>9-12</b> | Does the entity have a certified mill levy?  | <input checked="" type="radio"/> Yes | <input type="radio"/> No                                      |
|             | If yes, please provide the following mills levied for the year reported in lines 9-13 through 9-14.<br>(Do not report \$ amounts.)   |                                      |   |
| <b>9-13</b> | Bond redemption mills  |                                      |   |
| <b>9-14</b> | General/other mills  | 6.000                                |   |
| <b>9-15</b> | <b>TOTAL MILLS</b><br>(Add lines 9-13 through 9-14)  | 6.000                                |   |
| <b>9-16</b> | If the entity is a Title 32 Special District formed after 7/1/2000, has the entity filed its preceding year annual report with the State Auditor as required under SB 21-262 (Section 32-1-207 C.R.S.)?                | <input type="radio"/> N/A            | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| <b>9-17</b> | If no, please explain below.   |                                      |   |

Please use the space below to provide any additional information (optional).

## Part 10: Governing Body Approval

|             |  |                           |                          |
|-------------|--|---------------------------|--------------------------|
| <b>10-1</b> | If you plan to submit this form electronically, have you read the Electronic Signature Policy? | <input type="radio"/> Yes | <input type="radio"/> No |
|-------------|--|---------------------------|--------------------------|

### Office of the State Auditor — Local Government Division Exemption Form Electronic Signature Policy and Procedure

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:

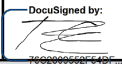
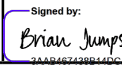
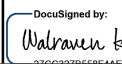
- The preparer of the application is responsible for obtaining board signatures that comply with the requirement in Section 29-1-604 (3), C.R.S., that states the application shall be personally reviewed, approved, and signed by a majority of the members of the governing body.
- The application must be 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 must note their approval and submit the application using one of the following two methods:

- 1) Submit the application in hard copy via U.S. 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.

### Governing Body Signatures

Print or type the names of all members of current governing body below.  
A majority of the members of the governing body must sign below.

| Board Member 1   |   |           |
|--|---|-----------|
| Board member's name  | BLAKE CARLSON   |           |
| My term expires on   |   |           |
| I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. | Signature   | Date      |
|  |  | 3/26/2026 |
| Board Member 2   |   |           |
| Board member's name  | BRIAN JUMPS   |           |
| My term expires on   |   |           |
| I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. | Signature   | Date      |
|  |  | 3/26/2026 |
| Board Member 3   |   |           |
| Board member's name  | WALRAVEN KETELLAPPER  |           |
| My term expires on   |   |           |
| I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. | Signature   | Date      |
|  |  | 3/26/2026 |
| Board Member 4   |   |           |
| Board member's name  |   |           |
| My term expires on   |   |           |
| I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. | Signature   | Date      |
|  |   |           |
| Board Member 5   |   |           |
| Board member's name  |   |           |
| My term expires on   |   |           |
| I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. | Signature   | Date      |
|  |   |           |
| Board Member 6   |   |           |
| Board member's name  |   |           |
| My term expires on   |   |           |
| I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. | Signature   | Date      |
|  |   |           |
| Board Member 7   |   |           |
| Board member's name  |   |           |
| My term expires on   |   |           |
| I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit. | Signature   | Date      |
|  |   |           |


**EXHIBIT C**

**CERTIFICATION**

The Board of Directors of The Springs Metropolitan District (the “**District**”) hereby certifies that, pursuant to Section VII of the District’s Service Plan, the District is in full compliance with its Service Plan.

IN WITNESS WHEREOF, I, Blake Carlson, chair of The Springs Metropolitan District in the Town of Firestone, Weld County, Colorado, certify the above information as of the date of this report.

THE SPRINGS METROPOLITAN DISTRICT

By:  DocuSigned by:  
76C2809552F54DF...  
Blake Carlson, Chair