APPLICATION FOR EXEMPTION FROM AUDIT

CHODT CODA

SHORT FORM						
NAME OF GOVERNMENT	Saddlehorn Ranch Metropolitan Dis	strict No. 2	For the Year Ended			
ADDRESS	614 N Tejon St.		12/31/21			
	Colorado Springs, CO 80903		or fiscal year ended:			
CONTACT PERSON	Susan Gonzales					
PHONE	719-447-1777		1			
EMAIL	sue.g@wsdistricts.co					
FAX			1			
	PART 1 - CERTIFICATION	ON OF PREPARER				
I certify that I am skilled in gove	rnmental accounting and that the inform	ation in the application is comple	te and accurate, to the best of			
my knowledge.			•			
NAME:	Susan Gonzales					
TITLE	Director or District Accounting Services					
FIRM NAME (if applicable)	Walker Schooler District Managers					
ADDRESS	614 N Tejon St. Colorado Springs, CO	80903				
PHONE	719-447-1777					
DATE PREPARED						
DDEDADED (SIGNAL)						
PREPARER (SIGNATUR	RE REQUIRED)					
(Menny						
		GOVERNMENTAL	PROPRIETARY			
riedse indicate whether the following financial information is recorded						
using Governmental or Proprietary fund types						

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PART 2 - REVENUE

REVENUE: 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.

Line#		D	escription	Round to nearest Dollar	Please use this
2-1	Taxes:	Property	(report mills levied in Question 10-6)	\$	space to provide
2-2		Specific owner	ship	\$ 26	any necessary
2-3		Sales and use	•	\$ 	explanations
2-4		Other (specify)	a 5	\$ _	18.11
2-5	Licenses and permit	s		\$	
2-6	Intergovernmental:		Grants	\$ _	
2-7			Conservation Trust Funds (Lottery)	\$ 	
2-8			Highway Users Tax Funds (HUTF)	\$ 	
2-9			Other (specify):	\$ 	
2-10	Charges for services	5		\$ _	
2-11	Fines and forfeits			\$ -	
2-12	Special assessment	S		\$ -	
2-13	Investment income			\$ -	
2-14	Charges for utility se	ervices		\$ -	
2-15	Debt proceeds		(should agree with line 4-4, column 2)	\$ -	
2-16	Lease proceeds			\$ -	
2-17	Developer Advances		(should agree with line 4-4)	\$ -	
2-18	Proceeds from sale	-	s	\$ •	1
2-19	Fire and police pens	ion		\$ -	1
2-20	Donations			\$ •	
2-21	Other (specify):			\$ -	
2-22				\$ -	
2-23				\$ -	
2-24		(add li	nes 2-1 through 2-23) TOTAL REVENUE	\$ 249	

PART 3 - EXPENDITURES/EXPENSES

EXPENDITURES: 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		Round to nearest Dollar	Please use this
3-1	Administrative		\$	space to provide
3-2	Salaries		\$	any necessary
3-3	Payroll taxes		Φ.	explanations
3-4	Contract services		\$	
3-5	Employee benefits		\$	
3-6	Insurance		ė.	
3-7	Accounting and legal fees	ľ	Φ.	.
3-8	Repair and maintenance		\$.
3-9	Supplies		\$	
3-10	Utilities and telephone		\$	
3-11	Fire/Police		\$ -	
3-12	Streets and highways		Φ.	
3-13	Public health		\$ -	
3-14	Capital outlay		\$ -	
3-15	Utility operations		\$ -	
3-16	Culture and recreation		\$ -	
3-17	Debt service principal (st	nould agree with Part 4)	\$ -	
3-18	Debt service interest		\$ -	
3-19	Repayment of Developer Advance Principal (sho	ould agree with line 4-4)	\$ -	
3-20	Repayment of Developer Advance Interest		\$ -	
3-21	Contribution to pension plan (s	hould agree to line 7-2)	\$ -	
3-22	Contribution to Fire & Police Pension Assoc. (s	hould agree to line 7-2)	\$ -	
3-23	Other (specify): Treasurers Fee	Ì	\$	3
3-24		1		
3-25	5	1	\$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITU	JRES/EXPENSES	\$	3

If TOTAL REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) are GREATER than \$100,000 - STOP. You may not use this form. Please use the "Application for Exemption from Audit - LONG FORM".

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If no, MUST use this space to provide any explanations:

	PART 4 - DEBT OUTSTANDING		, AND R	ETIR	ED		
4-1	Please answer the following questions by marking the Does the entity have outstanding debt?	appropriate boxes.			Yes		No
4-1	If Yes, please attach a copy of the entity's Debt Repayment S	chadula		L			ℯ
4-2	Is the debt repayment schedule attached? If no, MUST explain			Г	3		
	The state of the s						_
4-3	Is the entity current in its debt service payments? If no, MUS	T explain:		ַ ב]		
]			
4-4	Please complete the following debt schedule, if applicable:			1		T.J.	
	(please only include principal amounts)(enter all amount as positive	Outstanding at	Issued during		d during		anding at
	numbers)	end of prior year*	year)	rear	y∈	ar-end
	General obligation bonds	\$ -	\$ -	\$	-	\$	-
	Revenue bonds	\$ -	\$ -	\$	-	\$	-
	Notes/Loans	\$ -	\$ -	\$	-	\$	-
	Leases	\$ -	\$ -	\$	-	\$	
	Developer Advances	\$ -	\$ -	\$	-	\$	-
	Other (specify):	\$ -	\$ -	\$	-	\$	-
	TOTAL	\$ -	\$ -	\$	-	\$	-
	Diamond to fellow the fellow to the fellow t	*must tie to prior ye	ar ending balance				
4-5	Please answer the following questions by marking the appropriate boxes. Does the entity have any authorized, but unissued, debt?	N STATE OF THE REAL PROPERTY.			res		No 🗾
If yes:	How much?	\$		1			
	Date the debt was authorized:	<u> </u>		1			
4-6	Does the entity intend to issue debt within the next calendar	vear?		j.			7
If yes:	How much?	\$	-	1	_		_
4-7	Does the entity have debt that has been refinanced that it is s	still responsible	for?	į.			7
If yes:	What is the amount outstanding?	\$	-	1			
4-8	Does the entity have any lease agreements?			į (1
If yes:	What is being leased? What is the original date of the lease?			-			
	Number of years of lease?			+			
	Is the lease subject to annual appropriation?			J.			
	What are the annual lease payments?	\$	_	1			_
	Please use this space to provide any	explanations or	comments:		-		
	PART 5 - CASH AND	INVESTM	ENTS				
	Please provide the entity's cash deposit and investment balances.			Am	ount		Total
5-1	YEAR-END Total of ALL Checking and Savings Accounts			\$	244		
5-2	Certificates of deposit			\$	-		
	Total Cash Deposits			ļ	1	\$	244
	Investments (if investment is a mutual fund, please list underlying in	rvestments):					
				\$	- 1		
5-3				\$	_		
J=3				\$	-		
				\$	-		
	Total Investments					\$	-
1111-20-	Total Cash and Investments		True Villa			\$	244
5-4	Please answer the following questions by marking in the appropr		Yes	ni da et	No		N/A
J-4	Are the entity's Investments legal in accordance with Section seq., C.R.S.?	24-75-001, et.			I	- 1	7
EE		diam And the					
5-5	Are the entity's deposits in an eligible (Public Deposit Protection 14.10.5.104) of corr. (P.D.)	tion Act) public	 ✓		1	1	3
	depository (Section 11-10.5-101, et seq. C.R.S.)?					_	

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	PART 6 - CAPIT	AL	. ASSET	S				
	Please answer the following questions by marking in the appropriate box	es.			Y	es		No
6-1	Does the entity have capital assets?							 ✓
6-2	Has the entity performed an annual inventory of capital assets in accordance with Section 29-1-506, C.R.S.,? If no, MUST explain:							0
6-3	Complete the following capital assets table:		Balance -	Additions (Must			Y	ear-End
	complete the following capital assets table.	be	ginning of the year*	be included in Part 3)	Dele	tions	E	Balance
	Land	\$	-	\$ -	\$	•	\$	-
	Buildings	\$	-	\$ -	\$	-	\$	-
	Machinery and equipment	\$	-	\$ -	\$	-	\$	-
	Furniture and fixtures	\$	-	\$ -	\$	-	\$	
	Infrastructure	\$	-	\$ -	\$	-	\$	
	Construction In Progress (CIP)	\$	~	\$ -	\$	-	\$	
	Other (explain): Accumulated Depreciation	\$	-	\$ -	\$	-	\$	
	TOTAL	\$	-	\$ -	\$	<u> </u>	\$	-
	Please use this space to provide any		lanations or		l D		Φ	
	,			o o i i i i i i i i i i i i i i i i i i				
	PART 7 - PENSION	INI	EODMA	TION		1		
			FURIVIA	HUN				
7-1	Please answer the following questions by marking in the appropriate box. Does the entity have an "old hire" firefighters' pension plan?				Ye	es		No
7-2	Does the entity have a volunteer firefighters' pension plan?							3
If yes:								4
, 0.5.	Indicate the contributions from:	_			1			
					1			
	Tax (property, SO, sales, etc.): State contribution amount:			\$ -	-			
	Other (gifts, donations, etc.):			\$ - \$ -	-			
	TOTAL	7		\$ -	1			
	What is the monthly benefit paid for 20 years of service per re	etire	e as of Jan	<u> </u>	1			
	1?			\$ -				
	Please use this space to provide any	ехр	lanations or	comments:		100	14	- Par 1913
-								
	PART 8 - BUDGET I	N	FORMA	ΓΙΟΝ				
	Please answer the following questions by marking in the appropriate boxe			Yes	N	0		N/A
8-1	Did the entity file a budget with the Department of Local Affai		or the					
	current year in accordance with Section 29-1-113 C.R.S.?							
8-2	Did the entity pass an appropriations resolution, in accordan	ce v	vith Section	_	_			
	29-1-108 C.R.S.? If no, MUST explain:		VIIII 00011011	J				
	,							
If yes:	Please indicate the amount budgeted for each fund for the year	ar r	eported:					
	Governmental/Proprietary Fund Name		otal Appropriat	ions By Fund	ì			
	General Fund	\$		-	Ì			
	Debt Service Fund	\$		3				

00000gs, 21,10,0p0 1017 10000002 1 217 1 102 001 2 000000 1210 1

	BOR)	
Please answer the following question by marking in the appropriate box	Yes	No
9-1 Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]?	-	
Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent emergency reserve requirement. All governments should determine if they meet this requirement of TABOR.	2	Ц
f no, MUST explain:		

	PART 10 - GENERAL INFORMATION		WESTERN .
	Please answer the following questions by marking in the appropriate boxes.	Yes	No
10-1	Is this application for a newly formed governmental entity?		•
If yes: 10-2	Date of formation: Has the entity changed its name in the past or current year?		ø
		_	_
If yes:	Please list the NEW name & PRIOR name:	*	
10-3	Is the entity a metropolitan district?	J	
	Please indicate what services the entity provides:]	
10-4	Does the entity have an agreement with another government to provide services?		Ø
If yes:	List the name of the other governmental entity and the services provided:		
10-5 If yes:	Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during Date Filed:		2
10-6	Does the entity have a certified Mill Levy?	[J	
If yes:	Please provide the following mills levied for the year reported (do not report \$ amounts):	_	_
	Bond Redemption mills		50.000
	General/Other mills		10.000
	Total mills		60.000
-	Please use this space to provide any explanations or comments:	7 7 7 7 7	

	PART 11 - GOVERNING BODY APPROVAL		m/15.1.857
	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?	Ø	

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

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.

O PLOS	Print the names of ALL members of current governing body below.	A MAJORITY of the members of the governing body must complete and sign in the column below.
Board	Print Board Member's Name	I, Jeffrey Book, attest lyam a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed
Member 1	Jeffrey Book	Date: Signed Sig
Board	Print Board Member's Name	I, Michael Bramlett, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Member 2	Michael Barmlett	Date: 3/16/2022 My term Expires: May 2022
Board	Print Board Member's Name	I, William Guman attest I am a duly elected or appointed board member, and that I have personally havieved and approve this application for exemption from audit.
Member 3	William Guman	Signed
Board	Print Board Member's Name	I, Sandra Lehmann attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Member 4	Sandra Lehmann	Date: 3/16/2022 My term Expires: May 2022
Board	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for
Member 5		exemption from audit. Signed Date: My term Expires:
Board	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for
Member 6		exemption from audit. Signed Date: My term Expires:
Board Member 7	Print Board Member's Name	I, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signed Date:
		My term Expires:

RESOLUTION/ORDINANCE FOR EXEMPTION FROM AUDIT

(Pursuant to Section 29-1-604, C.R.S)

A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR FISCAL YEAR 2021 FOR SADDLEHORN RANCH METROPOLITAN DISTRICT N_0 . 2, STATE OF COLORADO.

WHEREAS, the board of directors of Saddlehorn Ranch Metropolitan District No. 2 wishes to claim exemption from the audit requirements of Section 29-1-603, C.R.S.; and

WHEREAS, Section 29-1-604, C.R.S. states that any local government where neither revenues nor expenditures exceed seven hundred and fifty thousand dollars may, with the approval of the state auditor, be exempt from the provision of Section 29-1-603, C.R.S.; and

WHEREAS, neither revenues nor expenditures for Saddlehorn Ranch Metropolitan District No. 2 exceeded \$100,000 for fiscal year 2021; and

WHEREAS, an application for exemption from audit for Saddlehorn Ranch Metropolitan District No. 2 has been prepared by the District Manager, WSDM, LLC with knowledge of government accounting; and

WHEREAS, said application for exemption from audit has been completed in accordance with regulation issued by the state auditor.

NOW THEREFORE, be it resolved/ordained by the board of directors of the Saddlehorn Ranch Metropolitan District No. 2 that the application for exemption from audit for Saddlehorn Ranch Metropolitan District No. 2 for the fiscal year ended December 31, 2021, has been personally reviewed and is hereby approved by a majority of the board of directors of Saddlehorn Ranch Metropolitan District No. 2; that those members of the board of directors have signified their approval by signing below; and that this resolution shall be attached to, and shall become a part of the application for exemption from audit of the Saddlehorn Ranch Metropolitan District No. 2 for the fiscal year ended December 31, 2021.

ADOPTED THIS 8th day of March 2022.

ATTEST:

Type or Print Names of	Date	
Members of Governing Body	Term Expires	Signature signed by:
Jeffrey Book	May 2022	Jeffry Book
Michael Bramlett	May 2022	Michael Bramlett
William Guman	May 2022	William Guman
Sandra Lehmann	May 2022	Sandra Lelimann



Certificate Of Completion

Envelope Id: A3C006927BAA4A0299FECBC53D64B781

Subject: Please DocuSign:Saddlehorn Ranch 1-3 Audit Exemptions and Board Resolutions

Source Envelope:

Document Pages: 36 Certificate Pages: 5

AutoNav: Enabled

Envelopeld Stamping: Enabled

Time Zone: (UTC-08:00) Pacific Time (US & Canada)

Status: Completed

Envelope Originator:

Molly Gist

614 N Tejon Street

Colorado Springs, CO 80903 molly.g@wsdistricts.co IP Address: 96.79.235.13

Record Tracking

Status: Original

3/14/2022 2:49:50 PM

Holder: Molly Gist

Signatures: 24

Initials: 0

molly.g@wsdistricts.co

Location: DocuSign

Signer Events

Jeffrey Book

koob@msn.com

Security Level: Email, Account Authentication

(None)

Signature DocuBigned by:

Juffrey Book

Signature Adoption: Pre-selected Style Using IP Address: 67.174.191.149

Timestamp

Sent: 3/14/2022 3:02:20 PM Resent: 3/16/2022 1:32:55 PM

Viewed: 3/16/2022 3:48:00 PM Signed: 3/16/2022 3:51:03 PM

Electronic Record and Signature Disclosure:

Accepted: 3/16/2022 3:48:00 PM ID: 4234a08d-d77f-4075-82f9-7a5a1d3d5186

Michael Bramlett

mbramlett@jrengineering.com

Security Level: Email, Account Authentication

(None)

Michael Bramlett

Signature Adoption: Pre-selected Style Using IP Address: 65.155.67.194

Sent: 3/14/2022 3:02:20 PM Viewed: 3/14/2022 3:35:17 PM Signed: 3/14/2022 3:35:58 PM

Electronic Record and Signature Disclosure:

Accepted: 3/14/2022 3:35:17 PM

ID: 92dad893-19b3-43f6-b79f-e057684e30e4

Sandra Lehmann

sandralehmannsellshomes@gmail.com

Managing Member

Security Level: Email, Account Authentication

(None)

Signature Adoption: Pre-selected Style Using IP Address: 174,215,24,50

Signed using mobile

Sandra Lelimann

-AA31C2C2F0F8418.

Sent: 3/14/2022 3:02:20 PM Resent: 3/16/2022 1:32:56 PM Viewed: 3/17/2022 2:46:51 PM Signed: 3/17/2022 2:47:17 PM

Electronic Record and Signature Disclosure:

Accepted: 3/14/2022 3:22:19 PM

ID: 3205a5b0-8511-424a-af85-aab6cc3523c0

William Guman

bill@guman.net

President

Security Level: Email, Account Authentication

(None)

Docu81gned by:
William Guman
D46DC272037346A...

Signature Adoption: Pre-selected Style

Using IP Address: 73.229.240.162

Sent: 3/14/2022 3:02:21 PM Resent: 3/16/2022 1:32:56 PM

Viewed: 3/16/2022 2:09:41 PM

Signed: 3/16/2022 2:10:16 PM

Electronic Record and Signature Disclosure:

Accepted: 8/18/2021 4:09:49 PM

ID: 10a954c4-afdc-49ce-8f45-c01f8adb42b1

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
Sue Gonzales		Sent: 3/14/2022 3:02:21 PM

Sue Gonzales
sue.g@wsdistricts.co
Director of District Accounting
Walker Schooler District Managers
Security Level: Email, Account Authentication
(None)

Electronic Record and Signature Disclosure: Not Offered via DocuSign COPIED Sent: 3/14/2022 3:02:21 PM Viewed: 3/17/2022 2:50:19 PM

Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	3/14/2022 3:02;21 PM
Certified Delivered	Security Checked	3/16/2022 2:09:41 PM
Signing Complete	Security Checked	3/16/2022 2:10:16 PM
Completed	Security Checked	3/17/2022 2:47:17 PM
Payment Events	Status	Timestamps
Electronic Record and Signature I	Disclosure	