# APPLICATION FOR EXEMPTION FROM AUDIT

### SHORT FORM

NAME OF GOVERNMENT	Cottonwood Greens Metropolitan District No. 3	For the Year Ended
ADDRESS	1641 California Street	12/31/16
	Suite 300	or fiscal year ended:
	Denver, CO 80202	10 10 10 10 10 10 10 10 10 10 10 10 10 1
CONTACT PERSON	Brad Neiman	The second secon
PHONE	303-285-5320	The state of the s
EMAIL	bnelman@ddmalaw.com	
FAX	303-285-5330	
	PART 1 - CERTIFICATION OF PREPAR	ER

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.

NAME Phyllis Brown

TITLE Director of Finance and Accounting

FIRM NAME (if applicable) Community Resource Services of Colorado

**ADDRESS** 7995 E Prentice Ave, Suite 103E, Greenwood Village, CO 80111

PHONE 303-381-4960

DATE PREPARED (Must be prepared prior to

Board approval)

### PREPARER (SIGNATURE REQUIRED)

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

**GOVERNMENTAL** (MODIFIED ACCRUAL BASIS)

**PROPRIETARY** (CASH OR BUDGETARY BASIS)

Ø



## **RECEIVED**

By Justin L. Smith at 2:33 pm, Mar 29, 2017

### **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#	Description	Round to nearest Dollar	Please use this
2-1	Ta Property	\$ 200	space to provide
2-2	Specific ownership	Sales and the sales of	any necessary
2-3	Sales and use	\$	explanations
2-4	Other (specify):		
2-5	Licenses and permits	\$ 100 100 100 100 100 100 100 100 100 10	
2-6	Intergovernmen Grants	\$	1
2-7	Conservation Trust Funds (Lottery)	Shared to the state of the same	4
2-8	Highway Users Tax Funds (HUTF)	\$ (- )	
2-9	Other (specify):	SI (SING) IN COLUMN	
2-10	Charges for services	\$ 11	
2-11	Fines and forfeits	\$ 1	
2-12	Special assessments	\$ 11.2	1
2-13	Investment income	\$ 1	1
2-14	Charges for utility services	\$	3
2-15	Debt proceeds (should agree with line 4-4, column 2)	\$ \$ \$25.5 \$2.5 \$2.5 \$2.5 \$2.5 \$2.5 \$2.5	
2-16	Lease proceeds		
2-17	Developer Advances received (should agree with line 4-4)	\$ 15 6	
2-18	Proceeds from sale of capital assets	\$ 1000000000000000000000000000000000000	
2-19	Fire and police pension	\$ 10.	
2-20	Donations	\$	
2-21	Other (specify):	\$ -1	
2-22		\$4.5000000000000000000000000000000000000	
2-23		<b>\$</b>	
2-24	(add lines 2-1 through 2-23) TOTAL REVENUE	S 1	

## **PART 3 - EXPENDITURES**

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	\$ T	space to provide
3-2	Salaries	S. C.	any necessary
3-3	Payroll taxes		explanations
3-4	Contract services	\$	
3-5	Employee benefits	<b>S</b> -	
3-6	Insurance	\$	į.
3-7	Accounting and legal fees	\$ 305	Į.
3-8	Repair and maintenance		1
3-9	Supplies	Same and the same	
3-10	Utilities and telephone	\$1	
3-11	Fire/Police	[.\$ helian	į.
3-12	Streets and highways		
3-13	Public health	\$ 1	
3-14	Culture and recreation	<b>\$</b>	
3-15	Utility operations		
3-16	Capitalloullay	Fig. starter of the across a arms to administration of	
3-17	Debt service principal (should agree with Part 4	<ol> <li>\$ 1 1 in 1 kg ≥ 2 in 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</li></ol>	
3-18	Debt service interest	\$\$ 1000	
3-19	Repayment of Developer Advance Principal (should agree with line 4-4		1
3-20	Repayment of Developer Advance Interest	W. Totalin and Links of the April Dept. of Society and	
3-21	Contribution to pension plan (should agree to line 7-2		
3-22	Contribution to Fire & Police Pension Assoc. (should agree to line 7-2	2) \$	
3-23	Other (specify):	\$	
3-24		\$	
3-25		\$	3
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES	\$ \$ 305	

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".

	PART 4 - DEBT OUTSTANDI	NG, ISSUE	D, AND	RETIRED	
	Please answer the following questions by marking t	he appropriate boxe	es.	Yes	No
4-1	Does the entity have outstanding debt?  If Yes, please attach a copy of the er	titula Daht Bana	mant Cabadu		
4-2	Is the debt repayment schedule attached? If no, MUST expl		yment Schedu	West The state of	
	is the debt repayment adjacode attached; if no, MOOT expi			Management of the state of the	Link and ark at all
4-3	Is the entity current in its debt service payments? If no, MUS	T explain:	The state of the s		PATE DELETE
			1		
	Life in the American State of the State of t	A Paris San A			
4-4	Please complete the following debt schedule, if applicable:				
	(please only include principal amounts)(enter all amount as positive	Outstanding at end	Issued during	Retired during	Outstanding at
	numbers)	of prior year	year	year	year-end
	General obligation bonds	SPANSIES	\$		A TRANSPORT OF THE
	Revenue bonds	\$ 7	\$	State Barrer	\$
	Notes/Loans	\$ .	\$	15 17 777	Sivers
	Leases	\$ .	SKARE	3 7	\$
	Developer Advances	\$ -	\$	\$ 7	\$
	Other (specify):	\$	\$	\$	\$
	TOTAL	S	\$ -	\$	S A
	Please answer the following questions by marking the appropriate	boxes.		Yes	No
4-5	Does the entity have any authorized, but unissued, debt? Flow much?		00 000 000 00		No SELL TREATS
If yes:	Date the debt was authorized:	\$ 05/25/	22,000,000.00		
4-6	Does the entity intend to issue debt within the next calendar	Many real of addition the face of their product of the con-	2000		
If yes:	How much?	rs English	THE PERSON	the second secon	the control of the same of
4-7	Does the entity have debt that has been refinanced that it is	still responsible fo	the state of the same and the same of the same of	TOTAL PROPERTY.	
If yes:	What is the amount outstanding?	S S	The Bar A charge a	tentan tentan de la circa es	
4-8	Does the entity have any lease agreements?	In I T I I have the same of the same	1 officer (MAC) and an		
If yes:	What is being leased?		n o a fe altal	_	
	What is the original date of the lease? Number of years of lease?		PERSONAL PROPERTY.		
	Is the lease subject to annual appropriation?				Comment of States
	What are the annual lease payments?	I's in the same of	ALL CONTRA		
4-9	Does the entity have a certified Mill Levy?	Distriction of the section of	The State of Park California		
If yes:	Please provide the following mills levied for the year reported:	<b>Bond Redemptio</b>	n		350 P. S.
		General/Other			43.000
	Discourse Alsianous Association	TOTAL		Marie attenued in the land	43.000
	Please use this space to provide a	iny explanations	or comments:		
-	DARTE CACHAN	ID INIVECT	MENITO		
	PART 5 - CASH AN	ID INAE21	MENIS		
	Please provide the entity's cash deposit and investment balances.			Amount	Total
5-1 5-2	YEAR-END Total of ALL Checking and Savings Accounts			\$ \$	
5-2	Certificates of deposit Total Cash Deposits			<b>3</b>	\$ -
	Investments (if investment is a mutual fund, please list unde	eriving investment	s):		
			distance in	\$	3
		STATES A. S. J.	- 200	5	1
5-3	Principles of the Control of the Con	Courses had		(S)	1
		500 1 5 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1		\$	
	Total Investments				\$ -
	Total Cash and investments				\$ -
Je.	Please answer the following questions by marking in the app	ropriate boxes	Yes	No	N/A
5-4	Are the entity's Investments legal in accordance with Section				V
	seq., C.R.S.?		HAY	四.男。	
5-5	Are the entity's deposits in an eligible (Public Deposit Protect	ction Act) public			
	depository (Section 11-10.5-101, et seq. C.R.S.)?				
If no, Ml	JST use this space to provide any explanations:			-	

3/1	Please answer the following questions by marking in the a	ppropriate bands		Yes	No
3-1	Does the entity have capital assets?				
3-2	Has the entity performed an annual inventory of capi	tal assets in accordance	with Section		
	29-1-506, C.R.S.,? If no, MUST explain:				in the state of
	NA NA				
5-3	Complete the following capital assets table.	Balance - beginning of the year	Additions (Must be included in Part 3)	Deletions	Year-End Balance
	Land	(\$15) (15)	\$ 7 - 7 - 7	\$	\$
	Buildings Machinery and equipment	\$	\$	\$ 1	\$
	Furniture and fixtures	Š	\$	\$ 1.5	\$ \$
	Construction In Progress (CIP)	STONE STATE	5	S	\$
	Other (explain):	\$ 10 pt 1 2 pt	\$ -	\$ -	\$
	Accumulated Depreciation		1 4	Part William	be the said
	(Please enter a negative, or credit, balance)	\$	\$	\$ -	\$
	TOTAL	\$	The second second	Level March	\$

	PART 7 - PENSION INFORM	IATION		
	Please answer the following questions by marking in the appropriate boxes.		Yes	No
7-1	Does the entity have an "old hire" firemen's pension plan?			Ø
7-2	Does the entity have a volunteer firemen's pension plan?			Ø.
If yes:	Who administers the plan?	- 13 med p		
	Indicate the contributions from:			
	Tax (property, SO, sales, etc.):	\$		
	State contribution amount:	\$		
	Other (gifts, donations, etc.):	\$		
	TOTAL	\$		
	What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?	\$ -		
-	Please use this space to provide any explanations	or comments:		

	Please answer the following questions by marking in the appro-		Yes	No	N/A
8-1	Did the entity file a budget with the Department of Local A current year in accordance with Section 29-1-113 C.R.S. If no, MUST explain:		0		
8-2	Did the entity pass an appropriations resolution, in accord 29-1-108 C.R.S.? If no, MUST explain:	ance with Section			
If yes:	Please indicate the amount appropriated for each fund for the year reported:				
	Fund Name	Budgeted Expend	litures		
	General Fund	\$	43,650		

	PART 9 - TAXPAYER'S BILL OF RIGHTS (T		
9-1	Please answer the following question by marking in the appropriate box  Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]?	Yes	No
	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	- Carena	and an extraction of the second and a second
if no, Mi	JST explain:		
	PART 10 - GENERAL INFORMATION		
	Please answer the following questions by marking in the appropriate boxes.	Yes	No
10-1	Is this application for a newly formed governmental entity?	National Control	
If yes:	Date of formation:	47 5 48 1	THE RESIDENCE TO
10-2 If yes:	Has the entity changed its name in the past or current year?  Please list the NEW name & PRIOR name:		
10-3	In the earthy of the district of	Sample of	1 TON 1 TO 1 THE TOTAL PROPERTY.
10-3	Is the entity a metropolitan district?  Please indicate what services the entity provides:  Streets, street lighting, traffic and safety improvements, water, landscaping, storm drainage parks and recreation	),   <u>v</u>	
10-4	Does the entity have an agreement with another government to provide services?		
If yes:	List the name of the other governmental entity and the services provided:		
10-5	Has the district filed a <i>Title 32</i> , <i>Article 1 Special District Notice of Inactive Status</i> 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.]  Date Filed:		9.5
ii yes.	Please use this space to provide any explanations or comment	S:	
		STATE STATE	
u Tak		- 12 Table	

# PART 11 - GOVERNING BODY APPROVAL

Below is the certification and approval of the governing board. By signing the board member is certifying they are a duly elected or appointed officer of the local government. Governing board members may be verified. Also by signing, the board member certifies that this AppEcation for Exemption from Audit has been prepared consistent with Section 29-1-804, C.R.S., which states that a governmental agency with revenue and expenditures of \$100,000 or less must have an application prepared by a person skilled in governmental accounting; completed to the best of their knowledge and is accurate and true. Use additional pages if needed.

	Print Board Member's Name	Axel Bishop , attest I am a duly elected or appointed board member, and that
		have personally reviewed and approve this application for exemption from audit.
Board	Avel Blahan	Signed
Member	Axel Bishop	Date:
1		My term Expires: May 2018
100		May 2010
Board Member 2	Print Board Member's Name	I Mariano DeCola , altest I am a duly elected or appointed board member, and that
		have personally reviewed and approve this application for exemption from audit,
	Mariano DeCola	Signed
		Signed 3/2/-2017
		My term Expires: May 2018
	Print Board Member's Name	member, and that I have personally reviewed and approve this application for exemption
Board Member 3		
		from audit.
		Signed Date:
		My term Expires:
	Print Board Member's Name	, attest I am a duly elected or appointed board
Board	C till a said indition a limite	member, and that I have personally reviewed and approve this application for exemption
		from audit.
Member		Signed
4		Date:
1		My term Expires:
	Print Board Member's Name	, attest I am a duly elected or appointed board
		member, and that I have personally reviewed and approve this application for exemption
Board		from audit.
Member		Signed
5		Date:
		My term Expires:
	Print Board Member's Name	, attest I am a duly elected or appointed board
District.		member, and that I have personally reviewed and approve this application for exemption
Board Member	200 200	from audit.
6		Signed
U		Date:
		My term Expires:
	Print Board Member's Name	, attest I am a duly elected or appointed board
Board		member, and that I have personally reviewed and approve this application for exemption
Member		from audit
7		Signed
182		Date:
		My term Expires:

#### PART 11 - GOVERNING BODY APPROVAL

Below is the certification and approval of the governing board. By signing the board member is certifying they are a duly elected or appointed officer of the local government. Governing board members may be verified. Also by signing the board 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 \$100,000 or less must have an application prepared by a person skilled in governmental accounting, completed to the best of their knowledge and is accurate and true. Use additional pages if needed.

	Print the names of ALL current	A MAJORITY of the governing board members must complete and sign in the column below.			
	governing board members below				
	Print Board Member's Name	1 Axel Bishop , attest Lam a duly elected or appointed board member, and that have personally reviewed and approve this application for exemption from audit.			
Board		have personally reviewed and approve this application for exemption from audit.			
Member	Axel Bishop	Signed			
		Date: /3/17/2017 /			
		My term Expires: May 2918			
	Print Board Member's Name	I Mariano DeCola , attest I am a duly elected or appointed board member, and the			
		have personally reviewed and approve this application for exemption from audit.			
Board	Mariano DeCola	Signed			
Member	manano Decola	Date:			
2		My term Expires: May 2018			
Toronto Anna Anna Anna Anna Anna Anna Anna Ann	Print Board Member's Name	attent Lemin duly planted or appointed heard			
SELECT OF	Little Costo Melitool & Minia	I attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption			
Board					
Member		from audit			
3		Signed			
		Date:			
		My term Expires:			
	Print Board Member's Name	I, attest I am a duly elected or appointed board			
1000		member, and that I have personally reviewed and approve this application for exemption			
Board Member		from audit.			
4		Signed			
		Date:			
		My term Expires:			
	Print Board Member's Name	I, attest I am a duly elected or appointed board			
E S		member, and that I have personally reviewed and approve this application for exemption			
Board		from audit.			
Member		Signed			
5		Date:			
		My term Expires:			
A GENERAL PROPERTY OF	Print Board Member's Name	attest I am a duly elected or appointed board			
-	THIS DONG HOURS & STERRY	member, and that I have personally reviewed and approve this application for exemption			
Board		from audit.			
Member					
6		Signed Date:			
District Control		My term Expires:			
The Mary		wy term Expires.			
	Print Board Member's Name	, a			
Board		member, and that I have personally review Original Signatures			
Member		from audit			
7		Signed Verified by			
The state of		Date:			
100		My term Expires: Justin L. Smith			
		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			