APPLICATION FOR EXEMPTION FROM AUDIT SHORT FORM

IF <u>EITHER</u> REVENUES OR EXPENDITURES EXCEED \$100,000, 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 \$750,000 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).

Any preparer of an Application for Exemption from Audit-SHORT FORM must be a person skilled in governmental accounting.

Approval for an exemption from audit is granted only upon the review by the OSA.

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 <u>MUST BE RECEIVED</u> BY THE OSA ON OR BEFORE MARCH 31 FOR GOVERNMENTS WITH A DECEMBER 31 YEAR-END.

<u>GOVERNMENTAL ACTIVITY</u> SHOULD BE REPORTED ON THE <u>MODIFIED ACCRUAL BASIS</u> <u>PROPRIETARY ACTIVITY</u> SHOULD BE REPORTED ON A <u>BUDGETARY BASIS</u>

POSTMARK DATES WILL NOT BE ACCEPTED AS PROOF OF SUBMISSION ON OR BEFORE THE STATUATORY DEADLINE

PRIOR YEAR FORMS ARE OBSOLETE AND WILL <u>NOT</u> BE ACCEPTED. APPLICATIONS SUBMITTED ON FORMS OTHER THAN THOSE

http://www.lexisnexis.com/hottopics/Colorado/

CAN BE FOUND AT:

FOR YOUR REFERENCE, COLORADO REVISED STATUTES

APPLICATIONS <u>MUST</u> BE FULLY AND ACCURATELY COMPLETED.

CHECKLIST

Has the preparer signed the application?

PRESCRIBED BY THE OSA WILL NOT BE ACCEPTED.

- Has the entity corrected all Prior Year Deficiencies as communicated by the OSA?
- Has the application been <u>PERSONALLY</u> reviewed and approved by the governing body?
- 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?
 - □ If yes, have you read and understand the new Electronic Signature Policy? See new policy -> <u>here</u>

--or--

- □ If yes, have you included a resolution?
- Does the resolution state that the governing body <u>PERSONALLY</u> reviewed and approved the resolution in an open public meeting?
- Has the resolution been signed by a <u>MAJORITY</u> of the governing body? (See sample resolution.)
- □ Will this application be submitted via a mail service? (e.g. US Post Office, FedEx, UPS, courier.)
 - If yes, does the application include <u>ORIGINAL INK SIGNATURES</u> from the <u>MAJORITY</u> of the governing body?

FILING METHODS

NEW METHOD! Register and submit your Applications at our new portal!

WEB PORTAL: https://apps.leg.co.gov/osa/lg

MAIL: Office of the State Auditor Local Government Audit Division 1525 Sherman St., 7th Floor Denver, CO 80203

QUESTIONS? Email: osa.lg@coleg.gov OR Phone: 303-869-3000

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 the Cash or 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.

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

| NAME OF GOVERNMENT | Podtburg Metropolitan District No. 6 | For the Year Ended |
|--------------------|--------------------------------------|-----------------------|
| ADDRESS | 2619 Canton Ct Suite A | 12/31/22 |
| | Fort Collins | or fiscal year ended: |
| | CO 80525 | |
| CONTACT PERSON | Alex Carlson | |
| PHONE | (970) 484-0101 x119 | |
| EMAIL | Alex@ccgcolorado.com |] |
| | PART 1 - 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.

| Allyson Cartmell |
|----------------------------------|
| District Accountant |
| Centennial Consulting Group, LLC |
| 2619 Canton Ct Suite A |
| (970) 484-0101 x134 |
| Mar 10, 2023 |
| |

PREPARER (SIGNATURE REQUIRED)



| Please indicate whether the following financial information is recorded | GOVERNMENTAL (MODIFIED ACCRUAL BASIS) | PROPRIETARY (CASH OR BUDGETARY BASIS) | |
|---|--|---|--|
| using Governmental or Proprietary fund types | \checkmark | | |

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# | | Des | cription | Round to nearest Dollar | Please use this |
|-------|---------------------------|----------------|--|-------------------------|------------------|
| 2-1 | Taxes: Pro | operty | (report mills levied in Question 10-6) | \$- | space to provide |
| 2-2 | Sp | ecific owners | hip | \$- | any necessary |
| 2-3 | Sa | les and use | | \$- | explanations |
| 2-4 | Otl | her (specify): | | \$- | |
| 2-5 | Licenses and permits | | | \$- | |
| 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 | | | \$- | |
| 2-11 | Fines and forfeits | | | \$- | |
| 2-12 | Special assessments | | | \$- | |
| 2-13 | Investment income | | | \$- | |
| 2-14 | Charges for utility servi | ces | | \$- | |
| 2-15 | Debt proceeds | | (should agree with line 4-4, column 2) | \$- | |
| 2-16 | Lease proceeds | | | \$- | |
| 2-17 | Developer Advances ree | ceived | (should agree with line 4-4) | \$- | |
| 2-18 | Proceeds from sale of c | apital assets | | \$- | |
| 2-19 | Fire and police pension | l | | \$- | |
| 2-20 | Donations | | | \$- | |
| 2-21 | Other (specify): | | | \$- | |
| 2-22 | | | | \$- | |
| 2-23 | | | | \$- | |
| 2-24 | | (add lin | es 2-1 through 2-23) TOTAL REVENUE | \$ - | |

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 | - | \$- | |
| 3-3 | Payroll taxes | - | \$- | explanations |
| 3-4 | Contract services | - | \$- | |
| 3-5 | Employee benefits | - | \$- | |
| 3-6 | Insurance | - | \$- | |
| 3-7 | Accounting and legal fees | - | \$- | |
| 3-8 | Repair and maintenance | | \$- | |
| 3-9 | Supplies | - | \$- | |
| 3-10 | Utilities and telephone | - | \$- | |
| 3-11 | Fire/Police | - | \$- | |
| 3-12 | Streets and highways | - | \$- | |
| 3-13 | Public health | - | \$- | |
| 3-14 | Capital outlay | - | \$- | |
| 3-15 | Utility operations | - | \$- | |
| 3-16 | Culture and recreation | - | \$- | |
| 3-17 | Debt service principal (sh | ould agree with Part 4) | \$- | |
| 3-18 | Debt service interest | - | \$- | |
| 3-19 | Repayment of Developer Advance Principal (sho | uld agree with line 4-4) | \$- | |
| 3-20 | Repayment of Developer Advance Interest | - | \$- | |
| 3-21 | Contribution to pension plan (sl | hould agree to line 7-2) | \$- | |
| 3-22 | Contribution to Fire & Police Pension Assoc. (sl | hould agree to line 7-2) | \$- | |
| 3-23 | Other (specify): | - | | |
| 3-24 | | - | \$- | |
| 3-25 | | - | \$ - | |
| 3-26 | (add lines 3-1 through 3-24) TOTAL EXPENDITU | JRES/EXPENSES | \$- | |
| | REVENUE (Line 2-24) or TOTAL EXPENDITURES (Line 3-26) at | re GREATER than | \$100.000 - STOP You ma | v not use this |

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

| | PART 4 - DEBT OUTSTANDING | 3, I | SSUED |), / | AND RI | ETIR | RED | | |
|---------|---|--|--------------------|-------|-----------------|-------|--------------|------|--------------|
| | Please answer the following questions by marking the | | | | | | Yes | | No |
| 4-1 | Does the entity have outstanding debt? If Yes, please attach a copy of the entity's Debt Repayment S | | - | | | | | | ~ |
| 4-2 | | Is the debt repayment schedule attached? If no, MUST explain: | | | | | | | |
| | | | | | | | | | |
| 4-3 | Is the entity current in its debt service payments? If no, MUS | Is the entity current in its debt service payments? If no, MUST explain: | | | | | | | |
| | | | | | | | | | |
| 4-4 | Please complete the following debt schedule, if applicable: | 0 | tstanding at | | sued during | Potir | ed during | Outo | anding at |
| | (please only include principal amounts)(enter all amount as positive | | of prior year* | 15 | year | | year | | anding at |
| | numbers) | | or prior you. | | J e | | <i>.</i> | | |
| | General obligation bonds | \$ | - | \$ | - | \$ | - | \$ | - |
| | Revenue bonds | \$ | - | \$ | - | \$ | - | \$ | - |
| | Notes/Loans | \$ | - | \$ | - | \$ | - | \$ | - |
| | Lease Liabilities | \$ | - | \$ | - | \$ | - | \$ | - |
| | Developer Advances | \$ | - | \$ | - | \$ | - | \$ | - |
| | Other (specify): | \$ | - | \$ | - | \$ | - | \$ | - |
| | TOTAL | \$ | - | \$ | - | \$ | - | \$ | - |
| | | *mu | st tie to prior ye | ear e | nding balance | • | | • | |
| | Please answer the following questions by marking the appropriate boxes | | | | | _ | Yes | | No |
| 4-5 | Does the entity have any authorized, but unissued, debt? | | | | | ٦ | \checkmark | | |
| If yes: | How much? | \$ | | | 376,567.00 | - | | | |
| | Date the debt was authorized: | L | 11/2/: | 202 | 1 | | | | _ |
| 4-6 | Does the entity intend to issue debt within the next calendar | | ? | | | n | | | \checkmark |
| If yes: | How much? | \$ | | | - | J | _ | | _ |
| 4-7 | Does the entity have debt that has been refinanced that it is s | <u> </u> | esponsible | for? | • | - | | | \checkmark |
| If yes: | What is the amount outstanding? | \$ | | | - | J | _ | | _ |
| 4-8 | Does the entity have any lease agreements? What is being leased? | | | | | 1 | | | \checkmark |
| If yes: | What is the original date of the lease? | | | | | - | | | |
| | Number of years of lease? | | | | | - | | | |
| | Is the lease subject to annual appropriation? | | | | | 1 | | | |
| | What are the annual lease payments? | \$ | | | - | 1 | | | |
| | Please use this space to provide any | expl | anations <u>or</u> | cor | nmen <u>ts:</u> | - | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| | PART 5 - CASH AND INVESTME | ENTS | | |
|----------|---|------|--------|--------------|
| | Please provide the entity's cash deposit and investment balances. | | Amount | Total |
| 5-1 | YEAR-END Total of ALL Checking and Savings Accounts | | \$- | |
| 5-2 | Certificates of deposit | | \$- | |
| | Total Cash Deposits | | | \$- |
| | Investments (if investment is a mutual fund, please list underlying investments): | | | |
| | | | \$- |] |
| 5-3 | | | \$- | |
| 5-5 | | | \$- | |
| | | | \$- | |
| | Total Investments | | | \$- |
| | Total Cash and Investments | | | \$- |
| | Please answer the following questions by marking in the appropriate boxes | Yes | No | N/A |
| 5-4 | Are the entity's Investments legal in accordance with Section 24-75-601, et. seq., C.R.S.? | | | \checkmark |
| 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.)? | | | V |
| If no, M | UST use this space to provide any explanations: | | | |

| | PART 6 - CAPITAL AND R | IGH | IT-T | 0- U | JSE | ASSE | TS | | |
|-----|---|-------|-------------------------------|-------------|-------|-----------------------------------|----|----------|---------------------|
| | Please answer the following questions by marking in the appropriate b | oxes. | | | | | | Yes | No |
| 6-1 | 6-1 Does the entity have capital assets? | | | | | | | | \checkmark |
| 6-2 | 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: | | | | | Section | | | \checkmark |
| | | | | | | | | | |
| 6-3 | Complete the following capital & right-to-use assets table: | | Balance ginning o year* | | be in | ons (Must cluded in Part 3) | | eletions | Year-End Balance |
| | Land | \$ | | - | \$ | - | \$ | - | \$ - |
| | Buildings | \$ | | - | \$ | - | \$ | - | \$ - |
| | Machinery and equipment | \$ | | - | \$ | - | \$ | - | \$ - |
| | Furniture and fixtures | \$ | | - | \$ | - | \$ | - | \$ - |

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| | Please use this space to provide any explanation | one or comm | onts: | Ψ | Ψ |
|---------|--|-------------|--------|-----|----------|
| | riease use this space to provide any explanation | | ients. | | |
| | | | | | |
| | PART 7 - PENSION INFOR | RMATIO | N | | |
| | Please answer the following questions by marking in the appropriate boxes. | | | Yes | No |
| 7-1 | Does the entity have an "old hire" firefighters' pension plan? | | | | v |
| 7-2 | Does the entity have a volunteer firefighters' pension plan? | | | | 1 |
| If yes: | Who administers the plan? | | | | |
| | 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 o 1? | f Jan \$ | - | | |
| | Please use this space to provide any explanation | ons or com | nents: | | |

| PART 8 - BUDGET INFORMATION | | | | | | | |
|-----------------------------|---|-------|----|-----|--|--|--|
| Please answer th | e following questions by marking in the appropriate boxes. | Yes | No | N/A | | | |
| | file a budget with the Department of Local Affairs for the accordance with Section 29-1-113 C.R.S.? | | | | | | |
| | pass an appropriations resolution, in accordance with Sect S.? If no, MUST explain: | ion 🗸 | | | | | |

If yes: Please indicate the amount budgeted for each fund for the year reported:

Infrastructure

Other (explain):

TOTAL

Construction In Progress (CIP)

Accumulated Depreciation/Amortization

(Please enter a negative, or credit, balance)

Leased Right-to-Use Assets

| Governmental/Proprietary Fund Name | Total Appropriations By Fund |
|------------------------------------|------------------------------|
| General Fund | \$- |
| | |
| | |
| | |

| | PART 9 - TAXPAYER'S BILL OF RIGHTS (TAB | SOR) | |
|-----------|---|----------|----------------------|
| | 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)]? | v | |
| | 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. | , 🗹 | |
| If no, ML | JST explain: | | |
| | | | |
| | PART 10 - GENERAL INFORMATION | | |
| | Please answer the following questions by marking in the appropriate boxes. | Yes | Νο |
| 10-1 | Is this application for a newly formed governmental entity? | | |
| If yes: | Date of formation: 12/1/2021 |] | |
| 10-2 | Has the entity changed its name in the past or current year? | _ | \checkmark |
| If yes: | Please list the NEW name & PRIOR name: | 1 | |
| 10-3 | Is the entity a metropolitan district? |] | |
| 10-5 | Please indicate what services the entity provides: | Ľ. | |
| | Finance District for Podtburg Metropolitan Districts | 1 | |
| 10-4 | Does the entity have an agreement with another government to provide services? | | v |
| If yes: | List the name of the other governmental entity and the services provided: | | |
| - | |] _ | |
| 10-5 | Has the district filed a Title 32, Article 1 Special District Notice of Inactive Status during | | ✓ |
| If yes: | Date Filed: | | |
| | | | _ |
| 10-6 | Does the entity have a certified Mill Levy? | | ~ |
| If yes: | Please provide the following mills levied for the year reported (do not report \$ amounts): | | |
| | Bond Redemption mills | | - |
| | General/Other mills | | - |
| | Total mills | | - |
| | Please use this space to provide any explanations or comments: | | |

| PART 11 - GOVERNING BODY APPROVAL | | |
|--|-----|----|
| Please answer the following question by marking in the appropriate box | YES | NO |
| | | |

12-1 If you plan to submit this form electronically, have you read the new Electronic Signature Policy?

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

| | Print the names of ALL members of current governing body below. | A <u>MAJORITY</u> of the members of the governing body must complete and sign in the column below. |
|----------------------|--|---|
| Board Member | Print Board Member's Name Greg Podtburg | I Greg Podtburg, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Signe & Bodtway |
| 1 | | Date: Mar 16, 2023 My term Expires: May 2023 |
| Board | Print Board Member's Name | I Eric Podtburg, 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 | Eric Podtburg | Signed <u>Sic Poddburg</u> Date: Mar 21, 2023 My term Expires: May 2023 |
| Board | Print Board Member's Name | I, Ricky Podtburg 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 3 | Ricky Podtburg | Signed Rick Public Statement Date: Mar 12, 2023 My term Expires: May 2023 |
| Board | Print Board Member's Name | I Wade Podtburg, 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 | Wade Podtburg | Signed Wade Podtburg Date: Mar 21, 2023 My term Expires: May 2025 |
| Board | Print Board Member's Name | I Marcus Podtburg , 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 5 | Marcus Podtburg | Signed Date: Mar 21, 2023 My term Expires: May 2025 |
| Board Member | 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. |
| 6 | | 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: |

EXAMPLE - DO NOT FILL OUT THIS PAGE

This sample resolution/ordinance for exemption from audit is provided as an example of the documentation that is required. The wording may be used as a basis for your own local government document, if needed; however you <u>MUST</u> draft your own ordinance or resolution making any changes where applicable. Legal counsel should be consulted regarding any questions.

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 YZAR 20XX FOR THE (name of government), STATE OF COLORADO.

WHEREAS, the (governing body) of (name of government) 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 for 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

[Choose 1 or 2 below, which ever is applicable]

(1)WHEREAS, neither revenue nor expenditures for (name of government) exceeded \$100,000 for Fiscal Year 20XX; and

WHEREAS, an application for exemption from audit for (name of giverment) has been prepared by (name of individual), a person skilled in governmental accounting; and

(2)WHEREAS, neither revenues nor expenditures for (name of government) exceeded \$750,000 for Fiscal Year 20XX; and

GR

WHEREAS, an application for exemption for a dif for (name of government) has been prepared by (name of individual or firm), an independent accountant with knowledge of governmental accounting; and

WHEREAS, said application for exemption from addit has been completed in accordance with regulations, issued by the State Auditor.

NOW THEREFORE, be it resolved/ordained by the (governing body) of the (name of government) that the application for exemption from audit for (name of government) for the Fiscal Year ended _______, 20XX, has been personally reviewed and is hereby approved by a majority of the (governing body) of the (name of government); that those members of the (governing body) 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 (name of government) for the fiscal year ended _______, 20XX.

ADOPTED THIS ____ day of _____, A.D. 20XX.

EXAMPLE - DO <u>NOT</u> FILL OUT THIS PAGE

| Mayor/President/Chairman, etc. | | |
|--------------------------------|---------------------------------|--|
| ATTEST: | | |
| | | |
| Town Clerk, Secretary, etc. | | |
| | Date | |
| Type or Print Names of | Term | |
| Members of Governing Body | <u>Expires</u> <u>Signature</u> | |
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2022_Audit_Exemption_Short_Form_D6

Final Audit Report

2023-03-21

| Created: | 2023-03-10 |
|-----------------|--|
| Ву: | Andrea Weaver (andrea@ccgcolorado.com) |
| Status: | Signed |
| Transaction ID: | CBJCHBCAABAACf8TtfOy8Zn5gyr8zyxfWKSrOZd2hWi2 |

"2022_Audit_Exemption_Short_Form_D6" History

- Document created by Andrea Weaver (andrea@ccgcolorado.com) 2023-03-10 9:31:30 PM GMT- IP address: 74.92.213.157
- Document emailed to ally@ccgcolorado.com for signature 2023-03-10 - 9:32:58 PM GMT
- Document emailed to gregpodtburg@yahoo.com for signature 2023-03-10 - 9:32:58 PM GMT
- Document emailed to wadepodtburg@gmail.com for signature 2023-03-10 - 9:32:58 PM GMT
- Document emailed to eric@lpdairy.com for signature 2023-03-10 - 9:32:58 PM GMT
- Document emailed to Rick Podtburg (rick@lpdairy.com) for signature 2023-03-10 9:32:58 PM GMT
- Document emailed to m.podtburg@hotmail.com for signature 2023-03-10 - 9:32:59 PM GMT
- Email viewed by ally@ccgcolorado.com 2023-03-10 - 9:38:40 PM GMT- IP address: 104.47.70.126
- Signer ally@ccgcolorado.com entered name at signing as Allyson Cartmell 2023-03-10 - 9:38:53 PM GMT- IP address: 74.92.213.157
- Document e-signed by Allyson Cartmell (ally@ccgcolorado.com) Signature Date: 2023-03-10 - 9:38:55 PM GMT - Time Source: server- IP address: 74.92.213.157
- Email viewed by Rick Podtburg (rick@lpdairy.com) 2023-03-10 - 10:17:35 PM GMT- IP address: 64.32.85.179

👃 Adobe Acrobat Sign

| Ø _e | Document e-signed by Rick Podtburg (rick@lpdairy.com) Signature Date: 2023-03-13 - 0:48:44 AM GMT - Time Source: server- IP address: 174.29.88.35 |
|----------------|--|
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