TOWN OF OPHIR



Box 683 • Ophir, Colo. 81426

TOWN OF OPHIR RESOLUTION 2013-1

Resolution For Exemption From Audit (Pursuant to Section 29-1-604, C.R.S.)

A RESOLUTION APPROVING AN EXEMPTION FROM AUDIT FOR FISCAL YEAR 2012 FOR THE TOWN OF OPHIR, STATE OF COLORADO

WHEREAS, the General Assembly of the Town of Ophir wishes to claim exemption from the audit requirements of Section 29-1-603, C.R.S; and

WHEREAS, Section 29-1-603, C.R.S., states that any local government where neither revenues nor expenditures exceed five hundred 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 Town of Ophir exceeded \$500,000 for Fiscal Year 2012; and

WHEREAS, an application for exemption from audit for Town of Ophir has been prepared by Johnson & Associates, an independent accountant with knowledge of governmental accounting; and

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

NOW THEREFORE, be it resolved by the General Assembly of the Town of Ophir that the application for exemption from audit for Town of Ophir for the fiscal year ended December 31, 2012, has been personally reviewed and is hereby approved by a majority of the General Assembly of the Town of Ophir; that those members of the General Assembly have signified their approval by signing below; and that this resolution shall be attached to, and shall become part of, the application for exemption from audit of the Town of Ophir for the fiscal year ended December 31, 2012.

TOWN OF OPHIR



Box 683 • Ophir, Colo. 81426

TOWN OF OPHIR RESOLUTION 2013-1

Resolution For Exemption From Audit (Pursuant to Section 29-1-604, C.R.S.)

A RESOLUTION APPROVING AN E (continued	XEMPTION FROM AUDIT
2/28/13 Mayor Date	Town Clerk Date
Print Name - Member of General Assembly Natalie Fijalkowski Pande Barnes Etic Relepionen	Signature R B
Allyn Hart Phil Hayden Verry Oyama Par (Emrick	ADNARI Phil Harden Derm

Applying for Exemption from Audit

that neither revenues nor expenditures can exceed \$500,000 in the fiscal year. In accordance with 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 revenues or expenditures for the fiscal year are not more than \$500,000. This means

General Instructions READ ALL INSTRUCTIONS BEFORE COMPLETING OR SUBMITTING THIS FORM

and approval of the Office of the State Auditor. Exemptions from audit are not automatic. Every year, in order to be exempt from audit, the local government must complete an Application for Exemption from Audit and submit it to the Office of the State Auditor. An exemption from audit is only granted upon the review

The application must be received and filed with the Office of the State Auditor within 3 months after the end of the fiscal year. The application DATES WILL NOT BE CONSIDERED must be received in our office on or before March 31 for governments with a December 31 fiscal year-end. POSTMARK

The appropriate version of the Application for Exemption from Audit must be used.

Prior years' forms are obsolete and will not be accepted. Applications submitted on forms other than those prescribed by the State Auditor will also not be accepted

The application must be fully and accurately completed

The application must be personally reviewed and approved by the governing body. Approval is evidenced by one of the following two methods:

- olic meeting. The resolution MUST include the signatures of a majority of the governing body (see sample resolution). If the completed application is going to be submitted electronically using email or fax, the application MUST include a resolution of the governing body that states the completed application was personally reviewed and approved by a majority of the body in an open
- If the completed application is going to be submitted through postal mail (U.S. Post Office, UPS, FedEx), the application must include the original ink signatures of a majority of the governing body

USE ONLY ONE OF THE ABOVE METHODS WHEN FILING THE APPLICATION

The mailing address is:

Office of the State Auditor

ocal Government Audit Division

225 E. 16th Ave., Suite 555

The fax number is: (303) 866-4062

The e-mail address is: OSA.LG@state.co.us

Two forms are available:

- 1) The "short form" should be submitted if both revenues and expenditures are less than or equal to \$100,000. A preparer of the short form must be a person skilled in governmental accounting.
- 2) The "long form" should be submitted if either revenues or expenditures are greater than \$100,000 but are less than or equal to \$500,000. A preparer of the long form must be an independent accountant with knowledge of governmental accounting.

Please call (303) 866-3338 if you need help completing the Application for Exemption from Audit forms

rtant: All Applications for Exemption from Audit are subject to review and approval by the Office of the State Auditor. Failure to file an application or denial of the request could cause the local government to lose its exemption from audit for that fiscal

APPLICATION FOR EXEMPTION FROM AUDIT - <u>LONG FORM</u> - FOR GOVERNMENTS WITH REVENUE OR EXPENDITURES GREATER THAN \$100,000 BUT NOT MORE THAN \$500,000

Telephone:	Contact Person:		Address:	Government:
970-728-4943	Randy Barnes	Ophir, CO 81426-0683	P.O. Box 683	Town of Ophir
000000000000000000000000000000000000000	Ended December 31 3013		For the Fiscal Year	

In la	Email: *		admin@town-ophir.co.gov 970-728-2880	or fiscal year	
į.				ended:	
	Return to:	Office of the State Auditor	Auditor		
		Tool Covernment Audit Division			

PLEASE READ THE ABOVE INSTRUCTIONS BEFORE SUBMITTING THE COMPLETED APPLICATION

Call (303) 866-3338 if you need help completing this form. Email: OSA.LG@state.co.us

Denver, CO 80203 225 E. 16th Ave., Suite 555

Fax: 303-866-4062

Section 29-1-604, C.R.S., outlines the provisions for an exemption from audit. Generally, any local government for which neither revenue nor expenditures exceed \$500,000 in any fiscal year may qualify for an exemption

If either revenues or expenditures are \$100,000 or greater, but not more than \$500,000, you may use this form. If both revenues and expenditures are less than \$100,000 individually, use the short form application for exemption from

Please review ALL instructions prior to the completion of this form

- Istructions: (See "Instructions" lab for additional information)

 Prepare this form completely and accurately. Please note that there are 11 parts to this form and all questions must be answered for the application to be considered complete.

 a. Please use whole dollars. Do not include any cents. Please round consistently to ensure that the financial information balances between schedules.
- File this form with the Office of the State Auditor within 3 months after the end of the fiscal year.
- For years ended December 31, the form must be received by the Office of the State Auditor by March 31.
- The form must be completed by an independent accountant (separate from the entity) with knowledge of government nental accounting.
- The application must be personally reviewed and approved by a majority of the governing body as evidenced by one of the following methods:
- a. Resolution of the governing body application may be emailed, faxed, or mailed.
- b. Original signatures application must be mailed. Email or fax will NOT be accepted.
- The preparer must sign the application that is submitted in order for it to be accepted

Additional information may be attached to the exemption at the preparer's discretion.

certify that I am an independent accountant with knowledge of governmental accounting and that the information in the Application is complete and accurate to the best of my knowledge. Independent means someone who is separate from the entity

CERTIFICATION OF PREPARER

Relationship to entity:	Preparer Signature (Rec	Date Prepared:	Telephone Number:	Address:	Firm Name (if applicable):	Title:	Name:	
Independent accountant with knowledge of governmental accounting.	Preparer Signature (Required): The application will be rejected if not signed by the preparer.	3/27/13	303-694-2727	6464 S. Quebec St., Suite 450	Johnson and Associates	Principal	Dean Johnson	

The Audit Law requires that a person independent of the entity complete the application if revenues or expenditure are at least \$100,000 but not more than \$500,000. Independent means someone who is separate from the entity.

Please describe above what your relationship is with the entity.

1-8 1-7 1-6 1-5 14 1-3 Ln # Description Assets Cash & Cash Equivalents Other Assets (specify) **Due from Other Entities or Funds** Investments 69 40 49 49 Massets Market State General Governmental Funds 205,589 \$ 83,981 2,180 PART 1 - Financial Statements - Balance Sheet 40 49 Cap Projects 15,664 Description **Total Current Assets** Other Current Assets Investments Capital Assets, net (from Part 6-2) **Due from Other Entities or Funds** Receivables Cash & Cash Equivalents 69 69 Enterprise Proprietary/Fiduciary Funds 922,017 18,463 40 40

Other Long Term Assets (specify)

		\$ 940,480	Total Liabilities and Equity (add lines 1-28 and 1-35)This total should be the same as line 1-13	\$ 15,664	\$ 291,750	Total Liabilities and Equity (add lines 1-28 and 1-35)This total should be the same as line 1-13	1-36
\$ 725,549	45	\$ 426,135	Total Equity (add lines 1-29 through 1-34)This total should be the same as line 3-33.	\$ 15,664	\$ 283,750	Total Equity (add lines 1-29 through 1-34)This total should be the same as line 3-33.	1-35
	45	\$ (58,382)	Undesignated/Unreserved/Unrestricted	*	\$ 146,901	Unassigned:	1-34
		THINITINITY TO			THE THEFT IS		
	69	•	Restricted		\$ 130,274	(specify) Open Space	1-33
						Assigned:	
	5	\$ ·	Other Designations/Reserves	\$ 15,664	40	(specify) Capital projects	1-32
						Committed:	
	5	55	Emergency Reserves	69	\$ 6,575	(specify) TABOR	1-31
			Fund Equity			Restricted:	
				50	55 1	Inventory	1-30
	57	\$ 484,517	Investment in Capital Assets, Net of Debt	40	50	Prepaid	1-29
						Nonspendable :	
			Equity			Fund Balance	
\$ 522,345	-	\$ 514,345	Total Liabilities (add lines 1-14 through 1-27)	50	\$ 8,000	Total Liabilities (add lines 1-14 through 1-27)	1-28
		-		49	49		1-27
				45	49		1-26
		55		49	69		1-25
	\$	\$		450	\$		1-24
		-			•		1-23
		••		50	55		1-22
	5	•	Other Liabilities (specify)	45	60		1-21
	5	\$ 437,500	Proprietary Debt Outstanding (from Part 4-1)	45	\$ 8,000	Deposites held	1-20
\$ 76,845			Total Current Liabilities	100	45	Deferred Revenues	1-19
Total Current Liabs.		••	Other Current Liabilities	50	69	Other Liabilities (specify)	1-18
		\$ 52,190	Due to Other Entities or Funds	40	60	Due to Other Entities or Funds	1-17
		100	Accrued Interest Payable	40	69	Accrued Interest Payable	1-16
		-	Accrued Payroll and Related Liabilities	49	49	Accrued Payroll and Related Liabilities	1-15
		\$ 24,655	Accounts Payable	40	69	Accounts Payable	1-14
			Liabilities and Fund Equity			Liabilities and rund Equity	
1,247,894	\$	\$ 940,480	-	\$ 15,664	\$ 291,750	Total Assets (add lines 1-2 through 1-12)	1-13
		50					1-12
	8	49			49		1-11
	4	6		4	4		

Note: Attach additional sheets as necessary.

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Intergovernmental	Licenses and Permits				Other (specify) Cigarette	Sales and Use Tax	Specific Ownership	Property	Taxes	Revenues and Other Financing Sources			
	\$	\$	45	40	\$ 46	\$ 5,409	\$ 1,660	\$ 57,528			Fund*	General	Governm
	55	50	69	50	50	69	55	60			Fund*	Cap projects	Governmental Funds
Intergovernmental	Licenses and Permits				Other (specify)	Sales and Use Tax	Specific Ownership	Property	Taxes	Revenues and Other Financing Sources			
	49	40	45	49	49	40	49	49			Fund*	Enterprise	Proprietary/Fix
	69	44	69	69	59	40	65	65			Fund*		Proprietary/Fiduciary Funds
											Total of All Funds		

32.188	5	26 and 2-31)	60	\$ 140.879	26 and 2-31)		
		Total Revenues and Other Financing Sources (Add lines 2-			Total Revenues and Other Financing Sources (Add lines 2-	2-32	
	40	Total Other Financing Sources (Add lines 2-28 through 2-30)	40		Total Other Financing Sources (Add lines 2-28 through 2-30)	2-31	
	40	Other (specify)	60	•	Other (specify)	2-30	
	40	Proceeds from Sale of Capital Assets	50	49	Proceeds from Sale of Capital Assets	2-29	
	5	Debt Proceeds	40		Debt Proceeds	2-28	
		Other Financing Sources			Other Financing Sources	2-27	
32,180 \$ -	59	Total Revenues (Add lines 2-3 through 2-25)	1	\$ 140,879	Total Revenues (Add lines 2-3 through 2-25)	2-26	
. \$	49		45	69		2-25	
. \$	49	Other (specify)	55	•	Other (specify)	2-24	
	49	Developer Advances	50	100	Developer Advances	2-23	
	49	Tap Fees	60	400	Tap Fees	2-22	
	49	Interest/Investment Income	45	69	Interest/Investment Income	2-21	
	49	Fines and Forfeits	40	40	Fines and Forfeits	2-20	
	49	Rental Income	40	••	Rental Income	2-19	
32,180 \$ -	40	Charges for Sales and Services	45	\$ 58,494	Charges for Sales and Services	2-18	
	69	Donations	40	60	Donations	2-17	
	45	Grants	49	\$ 9,496	Grants	2-16	
	49	Fire & Police Pension	-	69	Fire & Police Pension	2-15	
. \$	69	Community Development Block Grant	40	40	Community Development Block Grant	2-14	
. 8	59	Conservation Trust Funds (Lottery)	•••	\$ 1,592	Conservation Trust Funds (Lottery)	2-13	
. \$	49	Highway Users Tax Funds (HUTF)	40	\$ 6,654	Highway Users Tax Funds (HUTF)	2-12	

Note: If Total Revenues and Other Financing Sources - Total of All Funds (Line 2-32) are greater than \$500,000 - STOP, you may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact us at (303) 866-

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Interest	Principal (matches part 4)	Debt Service	Capital Outlay	Culture and Recreation	Health	Contributions to Fire & Police Pension Assoc.	Other (specify)	Solid Waste	Highways & Streets	Public Works	Other (specify)	Fire	Law Enforcement	Public Safety	Judicial	General Government	Expenditures			
\$	4) \$		49	\$ 271	49	55	40	40	\$ 56,051		49	45	45		46	\$ 93,671 \$		General Fund*	Governn	PARI 3 - Fina
- **	tn		59	55	49	40	45	100	400		55	40	45		40	\$ 308		Cap projects Fund*	Governmental Funds	ncial Statem
Interest	Principal (matches part 4)	Debt Service	Capital Outlay		Other (specify)	Contributions to Fire & Police Pension Assoc.	Utilities	Supplies	Repair and Maintenance	Accounting and Legal Fees	Insurance	Employee Benefits	Contract Services	Payroll Taxes	Salaries	General Operating & Administrative	Expenditures			PAKI 3 - Financial Statements - Operating Statement - Expe
49	\$ 25,000		450	40	45	40	\$ 3,262	50	\$ 4,746	\$ 1,979	55	40	49	5	60	\$ 17,789		Enterprise Fund*	Proprietary/Fiduciary Funds	- Expenditures
	**		40	65	5	55		5	\$			45	55	\$	55	\$		Fund*	luciary Funds	
																		Total of All Funds		

- \$ 725,549	69	\$ 426,135	Fund Equity, December 31 (Line 3-31 plus line 3-32)This total 15,664 should be the same as line 1-35.	46	283,750	<u>a</u>	Fund Equity, December 31 (Line 3-31 plus line 3-32)This total should be the same as line 1-35.	ယ္ ယ ယ
	40	\$ 454,729	85,022 Fund Equity, January 1 from December 31 prior year report	49	223,814	40	Fund Equity, January 1 from December 31 prior year report	3-32
	\$	\$ (28,594)	Net Increase (Decrease) in Equity (Line 2-32, plus line 3-24, plus line 3-30, less line 3-23)	\$ (6:	59,936	40	Excess (Deficiency) of Revenues and Other Financing Sources Over (Under) Expenditures (Line 2-32, less line 3-23, plus lines 3-24 through 3-30)	3-31
	\$	\$ (7,998) \$	Total Reconciling Items (Line 3-28, plus line 3-29, less line 3-(69,050) 26, less line 3-27)	\$	69,050	40	Total Transfers and Other Expenditures (Lines 3-24 plus lines 3-25 through 3-29)	3-30
- 1111111111111111111111111111111111111	\$	\$ 25,000	- Debt Principal (from line 3-17)	450		49		3-29
- (((((((((((((((((((((((((((((((((((((49	40	- Capital Outlay (from line 3-15)	49	ř	40		3-28
	49	\$	Other Financing Sources (from line 2-31)	49	1	49		3-27
	49	\$ 32,998	- Depreciation	40		49		3-26
	Mille	dininininininininininininininininininin	- Accrual Basis Reconciling Items	40	1	40	Other (specify):	3-25
	5	\$	(69,050) Net Interfund Transfers In (Out)	\$ (6	69,050	69	Net Interfund Transfers In (Out)	3-24
- \$ 203,07	55	\$ 52,776	308 Total Expenditures (Add lines 3-2 through 3-22)	49	149,993	45	Total Expenditures (Add lines 3-2 through 3-22)	3-23
- innununun	69	\$		45		69		3-22
	69	59	- Other (specify)	40		49	Other (specify)	3-21
	69	49	- Developer Repayments (matches part 4)	49		49	Developer Repayments (matches part 4)	3-20
	4		- Bond Issuance Costs	49		69	Bond Issuance Costs	3-19

Note: If Total Expenditures - Total of All Funds (Line 3-23) are greater than \$500,000 - STOP, you may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact us at (303) 866-3338 for assistance.

STOP - Equity does not tie to balance sheet

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If yes:	4-6		If yes:	4-5		If yes:	4-4										4-3	4-2		4-1	7
What is the amount outstanding?	Does the entity have debt that has been refinanced that it is still responsible for?	Please answer the following questions by marking the appropriate boxes.	How much?	Does the entity intend to issue debt within the next calendar year (2013)?	Date the debt was authorized:	How much?	Does the entity have any authorized, but unissued, debt?	Please answer the following questions by marking the appropriate boxes.	Total:	Other (specify):	Developer Advances	Leases	Notes/Loans	Revenue bonds	General obligation bonds	Please complete the following debt schedule, if applicable: (please only include principal amounts)		Is the entity current in its debt service payments? If no, please explain:	Is the debt repayment schedule attached? If no, please explain:	Does the entity have outstanding debt?	Please answer the following questions by marking the appropriate boxes.
S			49			49			\$ 462,500	69	69	49	\$ 462,500	↔	\$	Outstanding at end of prior year					ppropriate boxes.
			E			1			59	69	69	69	69	49	69	fiscal year					
		Yes	Millimin					Yes	\$ 25,000	69	69	69	\$ 25,000	69	69	Retired during fiscal year		×	×	×	Yes
	×	No		×			×	No	\$ 437,500	69	69	69	\$ 437,500	69	49	Outstanding at fiscal year- end					No
																					Please use this space to provide any explanations or com-

				6-3							Ī		V		6-2	If yes:	6-1			5-8				5-7	5-6	5-5	54			5-3	5-2	5-1		۲				If yes:	4-7	
Furniture and fixtures	Machinery and equipment	Buildings	Land	Complete the following table for PROPRITARY FUNDS:	Total	Accumulated Depreciation	Other (explain):	Other Carletter Control (City)	Construction in Progress (CID)	Infrastructure	Furniture and fixtures	Machinery and equipment	Buildings	Land	Complete the following table for GOVERNMENTAL FUNDS:	Has the entity performed an annual inventory of property and equipment (capital assets) in accordance with Section 29-1-506, C.R.S.,? If no, please explain:	Does the entity have land, buildings, and/or equipment?	Please answer the following questions by marking in the appropriate boxes.		Please answer the following question by marking in the appropriate box Are the entity's deposits in an eligible (Public Deposit Protection Act) public depository (Section 11-10.5-101, et seq. C.R.S.)? If no, please explain:		Total Cash and Investments	Total Investments					Investments (if investment is a mutual fund, please list underlying investments):	Total Cash Deposits	Certificates of deposit	Savings accounts	Checking accounts	Please provide the entity's cash deposit and investment balances.		What are the annual lease payments?	Number of years of lease?	What is the original date of the lease?	What is being leased?	Does the entity have any lease agreements?	Please answer the following questions by marking the appropriate boxes.
A U		P	69	Balance - beginning of the year	\$ 558,328	\$ (197,846)	69	59				\$ 56,711	\$ 489,824	\$ 209,639	Balance - beginning of the year	assets) in accordance			PART	itory (Section 11-10.5														PART 5 -	45					
A 4	9 6	A	\$	Additions	\$ (12,695)	\$ (12,695)	\$	69	6/1		A	(A	49	69	Additions	with Section 29-			6	-101, et seq.																				
A G		es a	69	Deletions	\$	\$	49	69	66			69	69	49	Deletions	×	×	Yes	CAPITAL ASSETS	Yes ×	The state of the s			69	69	69 6	9					\$ 101,993	Amount	CASH AND INVESTMENTS		minimin.				Yes
· ·	•	<i>S</i> 9	69	Year-End Balance	\$ 545,633	\$ (210,541)	69	6/1	40	· •		\$ 56,711	\$ 489,824	\$ 209,639	Year-End Balance			No	7S	No		\$ 239.716	\$						\$ 239.716				Total			annananananananananananananananananana			×	No
																		Please use this space to provide any explanations or comments:															Please use this space to provide any explanations or comments:							

						Please indicate what services the entity provides:	10-4
一門 はない はない はない はない はない	×					Is the entity a metropolitan district?	
						Please list the NEW name & PRIOR name:	If Yes:
	×					has me enuly changed its name in the past or current year?	_
						Date of formation:	
Please use this space to provide any explanations or comments:	×No	Yes			te boxes.	Please answer the following questions by marking in the appropriate boxes. Is this application for a newly formed governmental entity?	
	N	PART 10 - GENERAL INFORMATION	SENERAL	PART 10 - 0			
			if they	R does not exem	litations of TABC	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.	
		×		Section 20(5)]?	itution, Article X,	is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]?	9-1
Please use this space to provide any explanations or comments:	No	Yes			box	Please answer the following guestion by marking in the appropriate box	
	(TABOR)	OF RIGHTS	ER'S BILL	- TAX PAYER'S	PART 9		
			22,605		49	ENTERPRISE	
			11,000		69 6	CAPITAL PROJECTS	
			enditures	Budgeted 2012 Expenditures	Bu	Fund Name	
						Please indicate the amount appropriated for each fund for 2012:	If yes:
						Did the entity pass an appropriations resolution? In no, please explain:	8-2
				n:	no, please explai	Did the entity file a 2012 budget with the Department of Local Affairs? If no, please explain:	20
Please use this space to provide any explanations or comments:	No	Yes			te boxes.	ease answer the following questions by marking in the appropriat	
	_	8 - BUDGET INFORMATION	UDGET	PART 8 - E			
				?	retiree as of Jan 1	What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?	
				49		Total:	
				60		Other (gifts, donations, etc.):	
				69		State contribution amount:	
				69		Tax (property, SO, sales, etc.):	
						Indicate the contributions from:	
						Who administers the	77
		×	-			Does the entity have a volunteer firemen's pension plan?	
riease use uns space to provide any explanations of comments.	No	×			le boxes.	Does the entity have an "old hire" firemen's pension plan?	7-1
Nonce use this space to provide any explanations or comments:		*				pass answer the following acceptions by marking in the appropriate	
	2	PART 7 - PENSION INFORMATION	ENSION	PART 7 - P			
	922,017	1		\vdash	69	Total	
	(162,008)		_	_	€9	Accumulated Depreciation	
	1,084,025		37,786	1,046,239 \$	69	Other (explain): TOWN WATER SYSTEM	
				99	<i>A</i>	Construction In Progress (CIP)	
		-		49	69	Infrastructure	q

application for exemption from audit.	The same and the	
, attest I am a duly elected or appointed board member and I have reviewed and approve the	Print Board Members Name	
Expires:	Signed	5
, attest I am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit.	Print Board Members Name	Board Member
Expires:	Signed	4
I, attest! am a duly elected or appointed board member and I have reviewed and approve the application for exemption from audit.	Print Board Members Name	Roard Mombar
	Signed_ My term Expires:	
application for exemption from audit.	Cynthia Wyszynski	Board Member
, attest I am a duly elected or appointed board member and I have reviewed and approve the	Print Board Members Name	
application from audit. Signed Nature + Line Date: 5/28/13 My term Expires: 1-1-14	Susan Hehir	Board Member 2
, attest I am a duly elected or appointed board member and I have reviewed and approve the	Print Board Members Name	
empirion from audit.	Todd Rutledge	Board Member
, attest I am a duly elected or appointed board member and I have reviewed and approve the	Print Board Members Name	
		-
A MAJORITY of the governing board members must complete and sign in the column below.	Print the names of all current governing board members below.	
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 \$500,000 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.	ow is the certification and approval of the governing board. By signing the board member is certifying they are a duly elected or appointed. Also by signing, the board member certifies that this Application for Exemption from Audit has been prepared consistent with Section 29-1 penditures of \$500,000 or less must have an application prepared by a person skilled in governmental accounting; completed to the best o	Below is the ce Also by sign expenditures o
PART 11 - GOVERNING BODY APPROVAL	PART 11 - GOVERI	
Please use this space to provide any additional explanations or comments not previously included:	Please use this space to provide any additional	
	Date Filed:	If yes:
e 32	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.]	10-6 Has the o
	San Miguel County provides public safety to the Town of Ophir	San Migu
	List the name of the other governmental entity and the services provided:	If yes: List the n
× 000000000000000000000000000000000000	Does the entity have an agreement with another government to provide services?	10-5 Does the
	Water, Streets, Garbage	

Board Member Signed My term Expires: Print Board Members Name I application for ex	Signed
SAMPLE RESOLUTION/ORDINANCE FOR EXEMPTION FROM AUDIT (Pursuant to Section 29-1-604, C.R.S.)	Mayor/President/Chairman etc
A RESOLUTION/ORDINANCE APPROVING AN EXEMPTION FROM AUDIT FOR FISCAL YEAR 2012 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	Mayor/President/Chairman, etc. ATTEST:
WHEREAS, Section 29-1-604, C.R.S., states that any local government where neither revenues nor expenditures exceed five hundred 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, whichever is applicable] (1)WHEREAS, acither revenue nor expenditures for (name of government) exceeded \$100,000 for Fiscal Year 2012; and WHEREAS, an application for exemption from audit for (name of government) has been prepared by (name of individual) a person skilled in governmental accounting; and	Town Clerk, Secretary, etc.
(2)WHEREAS, neither revenues nor expenditures for (name of government) exceeded \$500,000 for Fiscal Year 2011; and WHEREAS, an application for exemption from audit for (name of government) has been prepared by (name of individual or firm), an independent accountant with knowledge of governmental accounting; and	Type or Print Names of Term Members of Governing Body Expires Signature
WHEREAS, said application for exemption from audit 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 reviewed and is hereby approved by a majority of the (governing body) of the (name of government); that those members 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 part of the government).	
ADOPTED THISday of, A.D. 2012.	

Note: This is a <u>sample only</u>. You should draft your own ordinance or resolution making any changes where applicable. Legal counsel should be consulted regarding any questions.