10 10 10 10	APPLICATION FOR	EXEMPT	ON FROM	AUDIT	
	LO	NG FORM	1		
NAME OF GOVERNMENT	Woodmen Valley Fire Protection District				For the Year Ended
ADDRESS	614 N Tejon St				12/31/2023
100/100	Colorado Springs, CO 80903				or fiscal year ended:
CONTACT PERSON	Susan Gonzales				
PHONE	719-447-1777				
EMAIL	sue.g@wsdistricts.co				Susan
	CERTIFICAT			urate to the best of my knowledge. Lan	n aware that the Audit Law requires that a person
independent of the entity complete NAME: TITLE FIRM NAME (if applicable)	countant with knowledge of governmental accounting and that the information in the application if revenues or expenditure are at least \$100,000 but not more than \$7 Susan Gonzales Director ofg District Accounting WSDM, LLC 614 N Tejon St	the Application i	s complete and accu	urate to the best of my knowledge. I an s someone who is separate from the e	n aware that the Audit Law requires that a person ntity.
independent of the entity complete NAME: TITLE FIRM NAME (if applicable) ADDRESS PHONE	countant with knowledge of governmental accounting and that the information in the application if revenues or expenditure are at least \$100,000 but not more than \$7. Susan Gonzales Director ofg District Accounting WSDM, LLC 614 N Tejon St 719-447-1777	the Application i	s complete and accu	urate to the best of my knowledge. I an s someone who is separate from the e	n aware that the Audit Law requires that a person ntity.
independent of the entity complete NAME: TITLE FIRM NAME (if applicable) ADDRESS	countant with knowledge of governmental accounting and that the information in the application if revenues or expenditure are at least \$100,000 but not more than \$7 Susan Gonzales Director ofg District Accounting WSDM, LLC 614 N Tejon St 719-447-1777 District Manager	the Application i	s complete and accu	urate to the best of my knowledge. I are someone who is separate from the e	n aware that the Audit Law requires that a person ntity. DATE PREPARED
independent of the entity complete NAME: TITLE FIRM NAME (if applicable) ADDRESS PHONE	countant with knowledge of governmental accounting and that the information in the application if revenues or expenditure are at least \$100,000 but not more than \$7. Susan Gonzales Director ofg District Accounting WSDM, LLC 614 N Tejon St 719-447-1777	the Application i	s complete and accu	urate to the best of my knowledge. Far is someone who is separate from the e	nuty.
independent of the entity complete NAME: TITLE FIRM NAME (if applicable) ADDRESS PHONE RELATIONSHIP TO ENTITY	countant with knowledge of governmental accounting and that the information in the application if revenues or expenditure are at least \$100,000 but not more than \$7 Susan Gonzales Director ofg District Accounting WSDM, LLC 614 N Tejon St 719-447-1777 District Manager	the Application i	s complete and accu	s someone who is separate from the e	nuty.

PART 1 - FINANCIAL STATEMENTS - BALANCE SHEET

* Indicate Name of Fund

NOTE: Attach additional sheets as necessary.

NOTE:	Attach additional sheets as necessary	C. C	ental Founda			THE SAME SAME SAME SAME SAME SAME SAME SAM	
		Governm	ental Funds		Proprietary/	Fiduciary Funds	Please use this space to
Line #	Description	Fund*	Fund*	Description	Fund*	Fund*	provide explanation of any
	Assets			Annale Control of the			items on this page
1-1	Cash & Cash Equivalents	0 000 444		Assets		Ta	
1-2	Investments	\$ 236,444		Cash & Cash Equivalents Investments	\$	- E	
1-3	Receivables	\$ -	-	Receivables	\$	· ·	
1-4	Due from Other Entities or Funds	\$ -	\$ -	Due from Other Entities or Funds	\$	- \$ -	
1-5	Property Tax Receivable	\$ 1,026	-	Other Current Assets [specify]	3	- \$ -	
	All Other Assets [specify]	1,020	Ψ -	Other Current Assets [specify]	\$ -	- \$ -	7
1-6	Lease Receivable (as Lessor)	s -	-	Total Current Assets	T	\$ -	-
1-7			\$ -	-			4
1-8		T	\$ -	Capital & Right to Use Assets, net (from Part 6-4)	\$ -	+	-
1-9		-	\$ -	Other Long Term Assets [specify]	\$ - \$ -		
1-10			\$ -		-	1.7	-
1-11	(add lines 1-1 through 1-10) TOTAL ASSETS	T	1	(add lines 1-1 through 1-10) TOTAL ASSETS		\$ -	
	Deferred Outflows of Resources:	201,410	Ψ -	Deferred Outflows of Resources	3	-	
1-12	[specify]	\$ -	\$ -	[specify]	\$ -	\$ -	1
1-13	[specify]	\$ -		[specify]		\$ -	
1-14	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS	\$ -	\$ -	(add lines 1-12 through 1-13) TOTAL DEFERRED OUTFLOWS		\$ -	3
1-15	TOTAL ASSETS AND DEFERRED OUTFLOWS			TOTAL ASSETS AND DEFERRED OUTFLOWS	-	s -	
	Liabilities		1	Liabilities		V	1
1-16	Accounts Payable	\$ 866	\$ -	Accounts Payable	\$ -	\$ -]
1-17	Accrued Payroll and Related Liabilities	\$ -	\$ -	Accrued Payroll and Related Liabilities	\$ -	\$ -	
1-18	Unearned Revenue	\$ -	\$ -	Accrued Interest Payable	\$ -	\$ -	
1-19	Due to Other Entities or Funds	\$ -	\$ -	Due to Other Entities or Funds	\$ -	\$ -	
1-20	All Other Current Liabilities	\$ -	\$ -	All Other Current Liabilities	\$ -	\$ -	
1-21	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES		\$ -	(add lines 1-16 through 1-20) TOTAL CURRENT LIABILITIES	\$ -	\$ -	
1-22	All Other Liabilities [specify]	\$ -	\$ -	Proprietary Debt Outstanding (from Part 4-4)		\$ -	
1-23		\$ -	\$ -	Other Liabilities [specify]:	***************************************	\$ -	
1-24		\$ -	\$ -		\$ -	\$ -	
1-25		\$ -	\$ -		\$ -	7	
1-26	(add lines 1-21 through 1-26) TOTAL LIABILITIES	\$ 866	\$ -			\$ -	
1-27	(add lines 1-21 through 1-26) TOTAL LIABILITIES Deferred Inflows of Resources:	\$ 866	\$ -	(add lines 1-21 through 1-26) TOTAL LIABILITIES	\$ -	\$ -	
1-28	Deferred Property Taxes	\$ -	\$ -	Deferred Inflows of Resources Pension/OPEB Related			
1-29	Lease related (as lessor)	\$ -	\$ -			\$ -	
1-30	(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS	Y		Other (specify)		\$ -	
1-00	Fund Balance	Ψ		(add lines 1-28 through 1-29) TOTAL DEFERRED INFLOWS Net Position	3	\$	
1-31	Nonspendable Prepaid	\$ -		Net Investment in Capital and Right-to Use Assets	\$ -	\$ -	
	Nonspendable Inventory	\$ -	\$ -	The investment in suprair and ragnets soc Assets	-	Ψ -	
1-33	Restricted [specify]	\$ -	s -	Emergency Reserves	\$ -	s -	
1-34	Committed [specify]	\$ -	\$ -	Other Designations/Reserves	\$ -	\$ -	
1-35	Assigned [specify]	\$ -	\$ -	Restricted	\$ -	S -	
1-36	Unassigned:	\$ 236,604	\$ -	Undesignated/Unreserved/Unrestricted	\$ -	\$ -	
1-37	Add lines 1-31 through 1-36			Add lines 1-31 through 1-36			
	This total should be the same as line 3-33			This total should be the same as line 3-33			
	TOTAL FUND BALANCE	\$ 236,604	\$ -	TOTAL NET POSITION	\$	s -	
1-38	Add lines 1-27, 1-30 and 1-37			Add lines 1-27, 1-30 and 1-37			
	This total should be the same as line 1-15			This total should be the same as line 1-15			
	TOTAL LIABILITIES, DEFERRED INFLOWS, AND FUND			TOTAL LIABILITIES, DEFERRED INFLOWS, AND NET			
	BALANCE	\$ 237,470	\$ -	POSITION	\$ -	\$ -	

PART 2 - FINANCIAL STATEMENTS - OPERATING STATEMENT - REVENUES

		Governmental Funds			Proprieta	ary/Fiduciary Funds	Discourse this excess to	
Line.#	Description	Fund*	Fund*	Description	Fund*	Fund*	Please use this space to provide explanation of any	
a in second second	Tax Revenue	and the same of th		Tax Revenue			items on this page	
2-1	Property [Include mills ievied in Question 10-6]	\$ 127,926	\$ -	Property [Include mills levied in Question 10-6]	\$	- \$		
2-2	Specific Ownership	\$ 13,381	\$ -	Specific Ownership	\$	- \$	-	
2-3	Sales and Use Tax	\$ -	\$ -	Sales and Use Tax	\$	- \$	- 1	
2-4	Other Tax Revenue [specify]:	\$ -	\$ -	Other Tax Revenue [specify]:	\$	- \$	-	
2-5	Delinquenst Interest	\$ 142	\$ -		\$	- \$	-	
2-6		\$.	\$ -		\$	- \$	- 1	
2-7		\$	\$ -		\$	- \$	-	
2-8	Add lines 2-1 through 2-7 TOTAL TAX REVENUE	\$ 141,449	\$ -	Add lines 2-1 through 2-7 TOTAL TAX REVENUE		- \$	-	
2-9	Licenses and Permits	\$ -	\$ -	Licenses and Permits	\$	- \$		
2-10	Highway Users Tax Funds (HUTF)	\$	\$ -	Highway Users Tax Funds (HUTF)	\$	- \$		
2-11	Conservation Trust Funds (Lottery)	\$	\$ -	Conservation Trust Funds (Lottery)	\$	- \$		
2-12	Community Development Block Grant	\$	\$ -	Community Development Block Grant	\$	- \$		
2-13	Fire & Police Pension	\$	\$ -	Fire & Police Pension	\$	- \$	_	
2-14	Grants	\$	\$ -	Grants	\$	- \$		
2-15	Donations	\$	\$ -	Donations	\$	- \$	-4	
2-16	Charges for Sales and Services	\$	- \$ -	Charges for Sales and Services	\$	- \$		
2-17	Rental Income	\$	- \$ -	Rental Income	\$	- \$	-	
2-18	Fines and Forfeits	\$	- \$ -	Fines and Forfeits	\$	- \$		
2-19	Interest/investment Income	\$ 1,902	- \$	Interest/Investment Income	\$	- \$		
2-20	Tap Fees	\$	- \$ -	Tap Fees	\$	- \$		
2-21	Proceeds from Sale of Capital Assets	\$	- \$ -	Proceeds from Sale of Capital Assets		1		
2-22	All Other [specify]:	\$	- \$ -	All Other [specify]:	\$	- \$	-	
2-23		\$	- \$ -		\$	- \$	-	
2-24	Add lines 2-8 through 2-23 TOTAL REVENUES		\$ -	Add lines 2-8 through 2-2: TOTAL REVENUES		- \$	-	
	Other Financing Sources			Other Financing Sources			errort :	
2-25	Debt Proceeds	\$	- \$ -	Debt Proceeds	\$	- \$	-1	
2-26	Lease Proceeds	\$	- \$ -	Lease Proceeds	\$	- i s		
2-27	Developer Advances	\$	- \$ -	Developer Advances	\$	- \$		
2-28	Other [specify]:	\$	- \$ -	Other [specify]:	\$	- \$	-	
2-29	Add lines 2-25 through 2-25 TOTAL OTHER FINANCING SOURCES	\$	- \$	Add lines 2-25 through 2-2 TOTAL OTHER FINANCING SOURCES		- \$	GRAND TOTALS	
2-30	Add lines 2-24 and 2-29 TOTAL REVENUES AND OTHER FINANCING SOURCES			Add lines 2-24 and 2-2 TOTAL REVENUES AND OTHER FINANCING SOURCES	\$	- \$	\$ 143,351	

IF GRAND TOTAL REVENUES AND OTHER FINANCING SOURCES for all funds (Line 2-29) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

	PART 3 - FINAN	CIAL	STATE	MENTS - O	PERATING STATEMENT - EXPENDIT	UR	ES/EXP	ENSE	S		
		P. 1	Governm	ental Funds			Proprietary	/Fiducian	y Funds	340	
Line #	Description		Fund*	Fund*	Description		Fund*		Fund*		se use this space to ide explanation of any
	ditures				Expenses						s on this page
	neral Government	\$	18,913	\$	- General Operating & Administrative	\$		- \$		III A SERVICE	
-	ficial	\$	-	\$	- Salaries	\$		- \$	-	-	
	v Enforcement	\$	-	\$	Payroll Taxes	\$		- \$		-	
3-4 Fire		\$	100,000	\$	- Contract Services	\$		- \$	-	-	
	hways & Streets	\$	-	\$	- Employee Benefits	\$		- \$	-]	
	id Waste	\$		<u> </u>	- Insurance	\$		- \$	-	-	
	ntributions to Fire & Police Pension Assoc.	\$	-	7	- Accounting and Legal Fees	\$		- \$	-	-	
3-8 Hea		\$		\$	Repair and Maintenance	\$		- \$	-		
	ture and Recreation	\$		\$	Supplies	\$		- \$	-	-]	
3-10 Trai	nsfers to other districts	\$	-	\$	- Utilities	\$		- \$	-	-	
	Other [specify]:	\$	_	\$	- Contributions to Fire & Police Pension Assoc.	\$		- \$	-		
3-12 Treasu	rer Collection Fee	\$	1,921	\$	- Other [specify]	\$		- \$	-		
3-13		\$	-	\$	-	\$		- \$	_		
3-14 Cap	oital Outlay	\$	-	\$	- Capital Outlay	\$		- \$	-		
Deb	t Service				Debt Service					_	
3-15 F	Principal (should match amount in 4-4)	\$	-	\$	- Principal (should match amount in 4-4)	\$		- \$	-		
3-16 II	nterest	\$	-	\$	- Interest	\$		- \$	-		
3-17 E	Bond Issuance Costs	\$	-	\$	Bond Issuance Costs	\$		- \$	-	7	
3-18 Dev	eloper Principal Repayments	\$		\$	- Developer Principal Repayments	\$		- \$	-		
3-19 Dev	eloper Interest Repayments	\$	_	\$	- Developer Interest Repayments	\$		- \$	-		
3-20 All O	ther [specify]:	\$	-	\$	- All Other [specify]:	\$		- \$	-		
3-21		\$	-	\$	-	\$		- \$	-		GRAND TOTAL
3-22	Add lines 3-1 through 3-2 TOTAL EXPENDITURE:		120,834	s	Add lines 3-1 through 3-2* TOTAL EXPENSES			- \$		\$	120,834
3-23 Interfu	nd Transfers (In)	\$	-	\$	Net Interfund Transfers (In) Out	\$		- \$	-		
3-24 Interfu	nd Transfers out	\$		\$	Other [specify][enter negative for expense]	\$		- \$	-	1	
3-25 Other E	Expenditures (Revenues):	\$	-	\$	Depreciation/Amortization	\$		- \$	-	i	
3-26		\$	-	\$	Other Financing Sources (Uses) (from line 2-28)	\$		- \$	-	7	
3-27		\$	-	\$	- Capital Outlay (from line 3-14)	\$		- \$	-		
3-28		\$	-	\$	Debt Principal (from line 3-15, 3-18)	\$		- \$			
3-29 (Ad	d lines 3-23 through 3-28) TOTAI TRANSFERS AND OTHER EXPENDITURES	100			(Line 3-27, plus line 3-28, less line 3-26, less line 3-25 plus line 3-24) TOTAL GAAP RECONCILING ITEMS						
3-30 Evenes	(Deficiency) of Revenues and Other Financing	9		9	phosine of the oracle and the oracle	3		- 12	-	1	
	s Over (Under) Expenditures				Net Increase (Decrease) in Net Position	- 77					
	29, less line 3-22, less line 3-29	5	22.517		Line 2-29, less line 3-22, plus line 3-29, less line 3-23	1.5		is		1	
		9	22,317	Φ		- P	-	- 3		-	
3-31 Fund B	alance, January 1 from December 31 prior year report				Net Position, January 1 from December 31 prior year			1			
J-0. 1 and B	remains personner of prior year report	\$	214,087	\$	report	\$					
3-32 Prior Pa	eriod Adjustment (MUST explain)		214,007		Prior Period Adjustment (MUST explain)	1		φ		1	
	alance, December 31	\$	-	\$		\$	-	\$			
	alance, December 31 Lines 3-30, 3-31, and 3-32	4	11.1		Net Position, December 31 Sum of Lines 3-30, 3-31, and 3-32			1			
	tal should be the same as line 1-37.	S	236.604	•	This total should be the same as line 1-37	s		2			

This total should be the same as line 1-37.

\$ 236,604 \$ This total should be the same as line 1-37.

IF GRAND TOTAL EXPENDITURES for all funds (Line 3-22) are GREATER than \$750,000 - STOP. You may not use this form. An audit may be required. See Section 29-1-604, C.R.S., or contact the OSA Local Government Division at (303) 869-3000 for assistance.

7	PART 4 - DEBT OUTSTA	NDING, I	SSUED, A	AND RETIRED	
	Please answer the following questions by marking the appropriate boxes.		YES	NO	Please use this space to provide any explanations or comments:
4-1 4-2	Does the entity have outstanding debt? Is the debt repayment schedule attached? If no, MUST explain:		0		
4-3	Is the entity current in its debt service payments? If no, MUST explain:		E	<u> </u>	
4-4	Please complete the following debt schedule, if applicable: (please only include principal amounts) Outstanding at beginning of year	sued during year	Retired during year	Outstanding at year-end	
	Seneral obligation bonds S	- - - - - -	\$ - \$ - \$ -	\$ - \$ - \$ -	
'Subs	cription Based Information Technology Arrangements *Must agree to prior year-en Please answer the following questions by marking the appropriate boxes.	id balance	YES	NO	
4-5 If yes:	Does the entity have any authorized, but unissued, debt [Section 29-1-605(2) C.R.S.]? How much? Date the debt was authorized:				
4-6	Does the entity intend to issue debt within the next calendar year?				
If yes:	How much? Does the entity have debt that has been refinanced that it is still responsible for?			V	
If yes: 4-8	What is the amount outstanding? Does the entity have any lease agreements?			✓	
	What is being leased? What is the original date of the lease? Number of years of lease?				
	is the lease subject to annual appropriation? What are the annual lease payments?				
	PART 5 - CASI	H AND IN	VESTME	NTS	
5-1 5-2	Please provide the entity's cash deposit and investment balances. YEAR-END Total of ALL Checking and Savings accounts Certificates of deposit TOTAL CA	SH DEPOSITS	*** AMOUNT \$ 236,444 \$	** \$ 236,444	Please use this space to provide any explanations or comments:
	Investments (if investment is a mutual fund, please list underlying investments):			and the contract of the contra	
5-3			\$ - \$ - \$ - \$ -		
		INVESTMENTS		\$ -	
	TOTAL CASH AND			\$ 236,444	
	Please answer the following question by marking in the appropriate box	YES	NO [1]	N/A	i
5-4 5-5	Are the entity's investments legal in accordance with Section 24-75-601, et. seq., C.R.S.? 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, MUST explain:				

	PART	6 - CAPITAI	- AND RI	GH [*]	T-TO-US	É ASSETS	3	
	Please answer the following question by marking in the appropriate box				YES	NO		Please use this space to provide any explanations or comments:
3-1	Does the entity have capitalized assets?				V			ATTACANA TO A STATE OF THE STAT
3-2	Has the entity performed an annual inventory of capital assets in accordance wit MUST explain:	th Section 29-1-506,	C.R.S.? If no,			I		
-3		Balance -	THE RE		JATE BUILD		-	İ
	Complete the following Capital & Right-To-Use Assets table for GOVERNMENTAL FUNDS:	beginning of the year	Additions	*	Deletions	Year-End Ba	alance	
	Land	\$ -	\$	- 1	\$ -	\$		
	Buildings	\$ 50,300	\$	-	\$ -	\$	50,300	
	Machinery and equipment	\$ -	\$	-	\$ -	\$	-	
	Furniture and fixtures	\$ -	\$	-	5 -	\$	-	
	Infrastructure	\$ -	\$	-	5 -	\$	-	
	Construction In Progress (CIP)	\$ -	\$	- 3	\$ -	\$	-	
	Leased & SBITA Right-to-Use Assets	\$ -	\$	-	Б -	\$	-	
	Intangible Assets	\$ -	\$	- ;	- 8	\$	-	
	Other (explain):	\$ -	\$	- {	5 -	\$	-	
	Accumulated Amortization Right to Use Assets (Enter a negative, or credit, balance)	\$ -	\$	- 5	- 8	\$	-	
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ (25,793)	\$ 1,	289 3	-	\$	(24,504)	
	TOTAL		\$ 1,	289 3	-	\$	25,796	
		Balance -					11.1149	
-4	Complete the following Capital & Right-To-Use Assets table for PROPRIETARY FUNDS:	beginning of the year	Additions		Deletions	Year-End Ba	lance	
	Land	\$ -	\$	- 5	-	\$	- 1	
	Buildings	\$ -	\$	- 3	-	\$	-	
	Machinery and equipment	\$ -	\$	- 3	-	\$	-	
	Furniture and fixtures	\$ -	\$	- 9	-	\$	-	
	Infrastructure	\$ -	\$	- \$	-	\$	-	
	Construction In Progress (CIP)	\$ -	\$	- 3	-	\$	-	
	Leased & SBITA Right-to-Use Assets	\$ -	\$	- \$	-	\$	-	
	Intangible Assets	\$ -	\$	- \$	-	\$	-	
	Other (explain):	\$ -	\$	- \$	-	\$	-	
	Accumulated Amortization Right to Use Assets (Enter a negative, or credit, balance)	\$ -	\$	- \$	_	\$	-	
	Accumulated Depreciation (Enter a negative, or credit, balance)	\$ -	\$	- \$	-	\$	-	
	TOTAL	\$ -	\$	- \$	-	\$	-	
		* Must agree to prior year * Generally capital asset in accordance with the gr	additions should I					

PART 7 - PENSION INFORMATION								
		YES	NO	Please use this space to provide any explanations or comments:				
7-1 Does the entity have an "old hire" firefighters' pension plan? 7-2 Does the entity have a volunteer firefighters' pension plan? If yes: Who administers the plan?								
Indicate the contributions from:								
Tax (property, SO, sales, etc.):	\$ -							
State contribution amount:	\$ -							
Other (gifts, donations, etc.):	\$ -							
то	OTAL \$ -							
What is the monthly benefit paid for 20 years of service per retiree as of Jan 1?	\$ -							

			ORMATION		
	Please answer the following question by marking in the appropriate box	YES	NO	N/A	Please use this space to provide any explanations or comments:
8-1	Did the entity file a current year budget with the Department of Local Affairs, in accordance with				
	Section 29-1-113 C.R.S.? If no, MUST explain: Did the entity pass an appropriations resolution in accordance with Section 29-1-108 C.R.S.?	Ø			
8-2	If no. MUST explain:	. (2)			
If yes:	Please indicate the amount appropriated for each fund separately for the year reported				
1	Governmental/Proprietary Fund Name Total Appropria				
	General Fund \$	132,540			
	S S	-	-		
	PART 9 - TAX PAYE	ER'S BILL (OF RIGHTS (TABOR)	
	Please answer the following question by marking in the appropriate box	LICO DILL	YES	NO NO	Please use this space to provide any explanations or comments:
0.4	Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20]	(5)]?	2		
9-1	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. PART 10 - G		NEORMATIO	N	
		LNERALII		3.3	
	Please answer the following question by marking in the appropriate box		YES	МО	Please use this space to provide any explanations or comments:
10-1	Is this application for a newly formed governmental entity?			V	
If yes:					
	Date of formation:				
				[v	
10-2	Has the entity changed its name in the past or current year?		_		
If Yes:	NEW name				
	THE THE HOLD IN THE PARTY OF TH		-		
	PRIOR name				
10-3	Is the entity a metropolitan district?				
	Please indicate what services the entity provides:				
10-5	Does the entity have an agreement with another government to provide services?				
	List the name of the other governmental entity and the services provided:				
	City of ColoradoSprings, Provision of Fire Services	-			
10-6	Does the entity have a certified mill levy?				
If yes	Please provide the number of mills levied for the year reported (do not enter \$ amounts):		_		
,1 900.	Bond Redemption mills 0.0	000			
		050	_		
	Total mills 9.0	050 YES	NO	N/A	
	NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has the entity filed its			П	
10-7				: 227	
	C.R.S.]? If NO, please explain.		_		
	Please use this space to provide any add	itional explana	ations or comme	nts not previou	isly included:

			OSA USE ONLY		
Entity Wide:	General Fund		Governmental Funds		Notes
Unrestricted Cash & Investments	\$ 236,444 Unrestricted Fund Bala	n \$	236,604 Total Tax Revenue	\$	141,449
Current Liabilities	\$ 866 Total Fund Balance	\$	236,604 Revenue Paying Debt Service	\$	
Deferred Inflow	\$ - PY Fund Balance	\$	214,087 Total Revenue	\$	143,351
	Total Revenue	\$	143,351 Total Debt Service Principal	\$	
	Total Expenditures	\$	120,834 Total Debt Service Interest	\$	
			Total Assets	\$	237,470
			Total Liabilities	\$	866
fovernmental	Interfund In	\$			
otal Cash & Investments	\$ 236,444 Interfund Out	\$	- Enterprise Funds		
ransfers In	\$ Proprietary		Net Position	\$	
ransfers Out	\$ Current Assets	\$	PY Net Position	S	
roperty Tax	\$ 127,926 Deferred Outflow	\$	Government-Wide		
lebt Service Principal	\$ - Current Liabilities	\$	Total Outstanding Debt	\$	
otal Expenditures	\$ 120,834 Deferred Inflow	\$	Authorized but Unissued	\$	
otal Developer Advances	\$ - Cash & Investments	\$	+ Year Authorized		1/0/1900
otal Developer Repayments	\$ - Principal Expense	\$			

			10000	201	
		VERNING BODY			
Please answer	the following question by marking in the appropriate box		ES	NO	
	ibmit this form electronically, have you read the new Electronic Signature Policy?				
Office of the Stat	e Auditor — Local Government Division - Exemption Form Elec	ctronic Signatures Po	licy and Pr	ocedures	
Policy - Requirements					
Required elements and so The preparer of the appoint of the governing body. The application must be parties, and include the Office of the State Aud The application for exent 1) Submit the application 2) Submit the application are converted as a solution of the state of the sta	uditor Local Government Audit Division may accept an electronic submission of an applicateguards are as follows: Dication is responsible for obtaining board signatures that comply with the requirement in a accompanied by the signature history document created by the electronic signature soft dates the individual board members signed the document. The signature history must also tor staff will not coordinate obtaining signatures. Inpution from audit form created by our office includes a section for governing body approve in in hard copy via the US Mail including original signatures. In electronically via email and either, dopted resolution that documents formal approval by the Board, or natures obtained through a software program such as Docusign or Echosign in accordance.	n Section 29-1-604 (3), C.R.S., ftware. The signature history do show the individuals' email and the individuals' email and the individuals of the	chat states the a ocument must s addresses and II	application shall b show when the do P address.	e personally reviewed, appr
this Application for Event	and approval of the governing body By signing, each individual member is certifying they are a c tion from Audit has been prepared consistent with Section 29-1-604, C.R.S., which states that a al accounting; completed to the best of their knowledge and is accurate and true. Use additional	a governmental agency with reve	of the local gover nue and expendit	tures of \$750,000	or less must have an applicati
	ne names of ALL members of the governing body below.	A MAJOR			of the governing
Ť	Full Name Kevin Bush	I, Kevin Bush, attest that this application for exen Signed My term Expires:May 20	ption from auc	ected or appoint dit.	Date: 3/4/24
	Full Name	I, Deanne Yankey, attest	that I am a dul	ly elected or app	ointed board member, and
2	Deanne Yankey	approve this application Signed Wy term Expires:May 20	for exemption	from audit.	Date: 3/5/2
Harris Harris	Full Name	I, Eric Barnes, attest tha	t I am a duly el	ected or appoint	ed board member, and the
3	Eric Barnes	this application for exer Signed 112 My term Expires:May 20	Jan	dit.	Date: 4 march
	Full Name	I Davis May attact that	ama duly alac	cted or appointe	d board member, and that

I, Doug May, attest that I am a duly elected application for exemption from audit. Signed My term Expires:May 2025 Date: 3/9/29 Doug May i, Justin Morrill, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Full Name Date: Justin Morrill Signed My term Expires:May 2027 Full Name attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Date: Signed_ My term Expires:_ _, attest that I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit. Date: _ Signed_ 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 2023 FOR WOODMEN VALLEY FIRE PROTECTION DISTRICT, STATE OF COLORADO.

WHEREAS, the board of directors of Woodmen Valley Fire Protection District 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 Woodmen Valley Fire Protection District exceeded \$750,000 for fiscal year 2023; and

WHEREAS, an application for exemption from audit for Woodmen Valley Fire Protection District 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 Woodmen Valley Fire Protection District that the application for exemption from audit for Woodmen Valley Fire Protection District for the fiscal year ended December 31, 2023, has been personally reviewed and is hereby approved by a majority of the board of directors of Woodmen Valley Fire Protection District; 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 Woodmen Valley Fire Protection District for the fiscal year ended December 31, 2023.

ADOPTED THIS 4th day of March 2023.

ATTEST:

Type or Print Names of Members of Governing Body	Date <u>Term Expires</u>	Signature
Kevin Bush	May 2027	A regice
Eric Barnes	May 2025	Circ A Jano
Deanne Yankey	May 2027	Deanne Yanley
Douglas May	May 2025	
Justin Morrill	May 2027	S Mary)