EXHIBIT C

2023 Audit Exemption Application

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT	Rock Metropolitan District	For the Year Ended
ADDRESS	121 S Tejon Street	12/31/23
	Suite 1100	or fiscal year ended:
	Colorado Springs, CO 80903	
CONTACT PERSON	Carrie Bartow	
PHONE	719-635-0330	
EMAIL	carrie.bartow@claconnect.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.

 NAME:
 Carrie Bartow

 TITLE
 Accountant for the District

 FIRM NAME (if applicable)
 CliftonLarsonAllen LLP

 ADDRESS
 121 S Tejon Street, Suite 1100, Colorado Springs, CO 80903

 PHONE
 719-635-0330

PREPARER (SIGNATURE REQUIRED)		D	ATE PREPARED
See Attached Accountant's Compilation Report			3/13/2024
Please indicate whether the following financial information is recorded using Governmental or Proprietary fund types	GOVERNI (MODIFIED ACC		PROPRIETARY (CASH OR BUDGETARY BASIS)

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	Taxes: Propert	y (report mills levied in Question 10-6)	\$	-	space to provide
2-2	Specific	c ownership	\$	-	any necessary
2-3	Sales a	nd use	\$	-	explanations
2-4	Other (s	specify):	\$	768	
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 services		\$	-	
2-15	Debt proceeds	(should agree with line 4-4, column	2) \$	-	
2-16	Lease proceeds		\$	-	
2-17	Developer Advances receive	d (should agree with line 4-	4) \$	43,573	
2-18	Proceeds from sale of capita	al assets	\$	-	
2-19	Fire and police pension		\$	-	
2-20	Donations		\$	-	
2-21	Other (specify):		\$	-	
2-22			\$	-	
2-23			\$	-	
2-24		(add lines 2-1 through 2-23) TOTAL REVENU	E\$	44,341	

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 nea	arest Dollar	Please use this
3-1	Administrative		\$	0,000	space to provid
3-2	Salaries		\$		any necessary
3-3	Payroll taxes		\$	-	explanations
3-4	Contract services	[\$	-	
3-5	Employee benefits		\$	-	
3-6	Insurance		\$	-	
3-7	Accounting and legal fees		\$	29,072	
3-8	Repair and maintenance	Γ	\$	-	
3-9	Supplies		\$	-	
3-10	Utilities and telephone		\$	-	
3-11	Fire/Police	Γ	\$	-	
3-12	Streets and highways	Γ	\$	_	
3-13	Public health		\$	_	
3-14	Capital outlay	Γ	\$	-	
3-15	Utility operations	Γ	\$	9,668	
3-16	Culture and recreation	Γ	\$	-	
3-17	Debt service principal	(should agree with Part 4)	\$	-	
3-18	Debt service interest		\$	_	
3-19	Repayment of Developer Advance Principal	(should agree with line 4-4)	\$	_	
3-20	Repayment of Developer Advance Interest		\$	_	
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)	\$	-	
3-23	Other (specify): Election	· -	\$	2,195	
3-24	Website		\$	2,000	
3-25			\$	-	
3-26	(add lines 3-1 through 3-24) TOTAL EXF	PENDITURES/EXPENSES	\$	48,585	

form. Please use the "Application for Exemption from Audit - LONG FORM".

	PART 4 - DEBT OUTSTANDIN	G. ISSUE	D, /	AND RE	ETIR	ED		
	Please answer the following questions by marking the					/es		No
4-1	Does the entity have outstanding debt?				1			
4-2	If Yes, please attach a copy of the entity's Debt Repayment S							7
4-2	Is the debt repayment schedule attached? If no, MUST explain N/A	n below:			1			V
	N/A							
4-3	Is the entity current in its debt service payments? If no, MUS	T explain belov	v:					~
	N/A	·						
4-4								
	Please complete the following debt schedule, if applicable:	Outstanding at	Ise	sued during	Retire	d during	Outs	tanding at
	(please only include principal amounts)(enter all amount as positive numbers)	end of prior yea	r*	year	У	ear	ye	ear-end
	,				-			
	General obligation bonds	<u>\$</u> -	\$	-	\$	-	\$	-
	Revenue bonds	\$ -	\$	-	\$	-	\$	-
	Notes/Loans	\$ -	\$	-	\$	-	\$	-
	Lease & SBITA** Liabilities [GASB 87 & 96]	\$ -	\$	-	\$	-	\$	-
	Developer Advances	\$ -	\$	45,573	\$	-	\$	45,573
	Other (specify):	\$-	\$	-	\$	-	\$	-
	TOTAL	\$ -	\$	45,573	\$	-	\$	45,573
**Subscrip	ntion Based Information Technology Arrangements	*Must agree to p	rior yea	ir-end balance				
	Please answer the following questions by marking the appropriate boxes	i.				/es		No
4-5	Does the entity have any authorized, but unissued, debt?	¢	400.0	00 000 00	լ 1	2		
If yes:		\$		00,000.00				
	Date the debt was authorized:		/2022] _	-		_
4-6	Does the entity intend to issue debt within the next calendar				1			\checkmark
If yes:	How much?	\$		-				
4-7	Does the entity have debt that has been refinanced that it is s	still responsibl	e for?	•	, [\checkmark
If yes:		\$		-				
4-8	Does the entity have any lease agreements?	·			, C			\checkmark
If yes:	What is being leased?				ł			
	What is the original date of the lease? Number of years of lease?				ł			
	Is the lease subject to annual appropriation?	L			J	7		\checkmark
	What are the annual lease payments?	\$			1			
	Part 4 - Please use this space to provide any explanations/cor		ch se	parate doc	umenta	tion, if n	eedeo	ł

	PART 5 - CASH AND INVESTME	ENTS				
	Please provide the entity's cash deposit and investment balances.		ŀ	Amount		Total
5-1	YEAR-END Total of ALL Checking and Savings Accounts		\$	5,000		
5-2	Certificates of deposit		\$	-		
	Total Cash Deposits				\$	5,000
	Investments (if investment is a mutual fund, please list underlying investments):					
			\$	-		
5-3			\$	-		
0-0			\$	-		
			\$	-		
	Total Investments				\$	-
	Total Cash and Investments				\$	5,000
	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.?				I	<u>√</u>
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			ļ	
If no, M	UST use this space to provide any explanations:					

	PART 6 - CAPITAL AND RI	GHT-	TO-U	ISE /	ASSE	T	S	
	Please answer the following questions by marking in the appropriate box	es.					Yes	No
6-1	Does the entity have capital assets?							\checkmark
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:							\checkmark
	N/A - No Capital Assets.							
6-3	Complete the following capital & right-to-use assets table:	Balar beginnin yea	g of the	be incl	ns (Must uded in rt 3)		Deletions	rear-End Balance
	Land	\$	-	\$	-	\$	-	\$ -
	Buildings	\$	-	\$	-	\$	-	\$ -
	Machinery and equipment	\$	-	\$	-	\$	-	\$ -
	Furniture and fixtures	\$	-	\$	-	\$	-	\$ -
	Infrastructure	\$	-	\$	-	\$	-	\$ -
	Construction In Progress (CIP)	\$	-	\$	-	\$	-	\$ -
	Leased & SBITA Right-to-Use Assets	\$	-	\$	-	\$	-	\$ -
	Other (explain):	\$	-	\$	-	\$	-	\$ -
	Accumulated Depreciation/Amortization (Please enter a negative, or credit, balance)	\$	-	\$	-	\$	-	\$ -

\$

*must tie to prior year ending balance

\$

\$

\$

Part 6 - Please use this space to provide any explanations/comments or attach documentation, if needed:

	PART 7 - PENSION INFORMA	TIO	Ν		
	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?				\checkmark
7-2	Does the entity have a volunteer firefighters' pension plan?				\checkmark
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 of Jan 1?	\$	-		

Part 7 - Please use this space to provide any explanations or comments:

PART 8 - BUDGET INFORMATION							
	Please answer the following questions by marking in the appropriate boxes.	Yes	No	N/A			
8-1	Did the entity file a budget with the Department of Local Affairs for the current year in accordance with Section 29-1-113 C.R.S.? If no, MUST explain:						
8-2	Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:	V					

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

TOTAL

Governmental/Proprietary Fund Name	Total Appropriations By Fund		
General Fund	\$	50,000	

	PART 9 - TAXPAYER'S BILL OF RIGHTS (TAB	OR)	
	Please answer the following question by marking in the appropriate box	Yes	No
9-1	Is the entity in compliance with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]?		
	Note: An election to exempt the government from the spending limitations of TABOR does not exempt the government from the 3 percent emergency reserve requirement. All governments should determine if they meet this requirement of TABOR.		
lf no, ML	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?		Image: A start of the start
10-1 If yes:	Date of formation:	1	
10-2	Has the entity changed its name in the past or current year?		\checkmark
1.6			
If yes:	Please list the NEW name & PRIOR name:	1	
10-3	Is the entity a metropolitan district?]	
	Please indicate what services the entity provides:		
	See notes section]	
10-4	Does the entity have an agreement with another government to provide services?		\checkmark
If yes:	List the name of the other governmental entity and the services provided:	1	
40 5			
10-5	Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during	1	
If yes:	Date Filed:		
10-6	Does the entity have a certified Mill Levy?		
If yes:			
	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts):		
	Bond Redemption mills		-
	General/Other mills		10.000
	Total mills		10.000
	Yes	No	N/A
10-7	NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has the entity filed its preceding year annual report with the State Auditor as required		
10-1	under SB 21-262 [Section 32-1-207 C.R.S.]? If NO, please explain.		
]	
]	

Please use this space to provide any additional explanations or comments not previously included: 10-3 To provide financing for design, acquisition, construction and installation of essential public-purpose facilities such as water, streets, traffic and safety controls, parks and recreation, sanitation and drainage facilities, public transportation, mosquito control, and television relay and translation equipment, fire protection, security, and operations and maintenance.

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 of the members of the governing body must sign below.</u>
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Board	Print Board Member's Name	I Denise Hogenes, 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 1	Denise Hogenes	Signed Date: My term Expires:May, 2025
Board Member 2	Print Board Member's Name	I Nathaniel Both, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
	Nathaniel Both	Signed Date: My term Expires:May, 2025
Board Member 3	Print Board Member's Name	I Timothy Westbrook, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from
	Timothy Westbrook	audit. Signed Date: My term Expires:May, 2025
Board Member 4	Print Board Member's Name	I Pat R. Rice, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
	Pat R. Rice	Signed Date: My term Expires:May, 2027
Board Member 5	Print Board Member's Name	I Erik Isaacson, attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
	Erik Isaacson	Signed Date: My term Expires:May, 2027
Board Member 6	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:
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:



CliftonLarsonAllen LLP

121 S. Tejon., Suite 1100 Colorado Springs, CO 80903 phone 719-365-0330 fax 719-473-3630 claconnect.com

Accountant's Compilation Report

Board of Directors Rock Metropolitan District El Paso County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Rock Metropolitan District as of and for the year ended December 31, 2023, included in the accompanying prescribed form. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the American Institute of Certified Public Accountants. We did not audit or review the financial statements included in the accompanying prescribed form nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the financial statements included in the accompanying prescribed form.

The Application for Exemption from Audit is presented in accordance with the requirements of the Colorado Office of the State Auditor, which differ from accounting principles generally accepted in the United States of America.

This report is intended solely for the information and use of the Colorado Office of the State Auditor and is not intended to be and should not be used by anyone other than this specified party.

We are not independent with respect to Rock Metropolitan District.

Clifton Larson allen LLG

Colorado Springs, Colorado March 13, 2024