APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT

ADDRESS

Hidden Valley Farm Metropolitan District No. 3 121 S Tejon Street

For the Year Ended 12/31/23 or fiscal year ended:

CONTACT PERSON

PHONE EMAIL

Suite 1100 Colorado Springs, CO 80903 Margaret Henderson 719-635-0330

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:

TITLE FIRM NAME (if applicable)

ADDRESS DHONE

Margaret Henderson Accountant for the District CliftonLarsonAllen LLP

margaret.henderson@claconnect.com

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

PREPARER (SIGNATURE REQUIRED)		C	ATE PREPARED	
SEE ATTACHED ACCOUNTANT'S COMPILATION REPORT		March 26, 2024		
Please indicate whether the following financial information is recorded	GOVERNI (MODIFIED ACC		PROPRIETARY (CASH OR BUDGETARY BASIS)	
using Governmental or Proprietary fund types	V			

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#		De	scription	Round to nearest Dollar	Please use this
2-1	Taxes:	Property	(report mills levied in Question 10-6)	\$ -	space to provide
2-2		Specific owners	ship	\$ -	any necessary
2-3		Sales and use		\$ -	explanations
2-4		Other (specify):		\$ -	
2-5	Licenses and permit	S		\$ -	
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	3		\$ -	
2-11	Fines and forfeits			\$ -	
2-12	Special assessment	S		\$ -	
2-13	Investment income			\$ -	
2-14	Charges for utility se	ervices		\$ -	
2-15	Debt proceeds		(should agree with line 4-4, column 2)	\$ -	
2-16	Lease proceeds			\$ -	
2-17	Developer Advances		(should agree with line 4-4)	\$ -	
2-18	Proceeds from sale		3	\$ -	
2-19	Fire and police pens	ion		\$ -	
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.

	interest payments on long-term debt. Financial information will not include fur	ia equity intori		
Line#	Description		Round to nearest Dollar	Please use this
3-1	Administrative		\$ -	space to provide
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		\$ -	
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 (should ag	ree with Part 4)	\$ -	
3-18	Debt service interest		\$ -	
3-19	Repayment of Developer Advance Principal (should agree	e with line 4-4)	\$ -	
3-20	Repayment of Developer Advance Interest		\$ -	
3-21		gree to line 7-2)	\$ -	
3-22	Contribution to Fire & Police Pension Assoc. (should a	gree to line 7-2)	\$ -	
3-23	Other (specify): Transfers to Other Districts		\$ -	
3-24			\$ -	
3-25			\$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDITURES/	EXPENSES	\$ -	

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>".

Please answer the following questions by marking the appropriate boxes. Please answer the following questions by marking the appropriate boxes. Yes No Does the entity have outstanding debt? If Yes, please attach a copy of the entity's Debt Repayment Schedule. Is the debt repayment schedule attached? If no. MUST explain below: N/A Is the entity current in its debt service payments? If no, MUST explain below: N/A Please complete the following debt schedule, if applicable: (please only include principal amounts)(enter all amount as positive numbers) Outstanding at end of prior year year year year outstanding at year-end
4-1 Does the entity have outstanding debt? If Yes, please attach a copy of the entity's Debt Repayment Schedule. Is the debt repayment schedule attached? If no. MUST explain below: N/A 4-3 Is the entity current in its debt service payments? If no, MUST explain below: N/A Please complete the following debt schedule, if applicable: (please only include principal amounts)(enter all amount as positive end of prior year year year year year year year yea
If Yes, please attach a copy of the entity's Debt Repayment Schedule. Is the debt repayment schedule attached? If no. MUST explain below: N/A Is the entity current in its debt service payments? If no, MUST explain below: N/A Please complete the following debt schedule, if applicable: (please only include principal amounts)(enter all amount as positive end of prior year year year year year year year yea
4-2 Is the debt repayment schedule attached? If no. MUST explain below: N/A 4-3 Is the entity current in its debt service payments? If no, MUST explain below: N/A Please complete the following debt schedule, if applicable: (please only include principal amounts)(enter all amount as positive end of prior year year year year year year year yea
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N/A Please complete the following debt schedule, if applicable: (please only include principal amounts)(enter all amount as positive end of prior year year year year year year year yea
4-4 Please complete the following debt schedule, if applicable: (please only include principal amounts)(enter all amount as positive end of prior year year year year year year year yea
(please only include principal amounts)(enter all amount as positive (please only include principal amounts) (enter all amount as positive (please only include principal amounts) (enter all amount as positive (please only include principal amounts) (enter all amount as positive (please only include principal amounts) (enter all amount as positive (please only include principal amounts) (enter all amount as positive (please only include principal amounts) (enter all amount as positive (please only include principal amounts) (enter all amount as positive (please only include principal amounts) (enter all amount as positive (please only include principal amounts) (enter all amount as positive (please only include principal amounts) (enter all amount as positive (please only include principal amounts) (enter all amount as positive (please only include principal amounts) (enter all amounts) (enter
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(please only include principal amounts)(enter all amount as positive
numbers)
General obligation bonds \$ - \$ - \$ -
Revenue bonds \$ - \$ - \$ -
Notes/Loans \$ - \$ - \$ -
Lease & SBITA** Liabilities [GASB 87 & 96]
Developer Advances \$ - \$ - \$ -
Other (specify): \$ - \$ - \$ -
TOTAL \$ - \$ - \$ -
**Subscription Based Information Technology Arrangements
Please answer the following questions by marking the appropriate boxes.
4-5 Does the entity have any authorized, but unissued, debt?
If yes: How much? \$ 480,000,000.00
Date the debt was authorized: 11/5/2013
4-6 Does the entity intend to issue debt within the next calendar year?
If yes: How much?
4-7 Does the entity have debt that has been refinanced that it is still responsible for? □ □
If yes: What is the amount outstanding?
4-8 Does the entity have any lease agreements?
If yes: 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 4 - Please use this space to provide any explanations/comments or attach separate documentation, if needed

	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.			V
	seq., C.R.S.?	_	_	_
5-5	Are the entity's deposits in an eligible (Public Deposit Protection Act) public	П		V
	depository (Section 11-10.5-101, et seq. C.R.S.)?			~
	IST use this appear to provide any evalenations.			

If no, MUST use this space to provide any explanations:
The District had no cash or investment deposits during the year.

	PART 6 - CAPITAL AND		TO-L	ISE A	SSE	TS		
	Please answer the following questions by marking in the appropriate	boxes.					Yes	No
6-1	Does the entity have capital assets?	Does the entity have capital assets?						7
6-2	Has the entity performed an annual inventory of capital as 29-1-506, C.R.S.,? If no, MUST explain:	ssets in acc	ordance	with Se	ction			7
	N/A							
6-3	Complete the following capital & right-to-use assets table:	beginni	nce - ng of the ar*	Additions be inclu Part	ded in	De	eletions	ar-End alance
	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)	\$	-	\$	-	\$	-	\$ -
	TOTAL	\$	-	\$	-	\$	-	\$ -

*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	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?				4
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 co	mments	:	

	PART 8 - BUDGET IN	NFORMAT	ION		
	Please answer the following questions by marking in the appropriate boxes	š.	Yes	No	N/A
8-1	Did the entity file a budget with the Department of Local Affairs for t in accordance with Section 29-1-113 C.R.S.? If no, MUST explain:	he current year	Ø		
8-2	Did the entity pass an appropriations resolution, in accordance with Section 29-1-108 C.R.S.? If no, MUST explain:				
If yes:	Please indicate the amount budgeted for each fund for the year	r reported:			
	Governmental/Proprietary Fund Name	Total Appropriati	ons By Fund		
	General Fund	\$	-		

	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.	⊻	

If no, MUST 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?		V
If yes: 10-2	Date of formation: Has the entity changed its name in the past or current year?]	v
If yes:	Please list the NEW name & PRIOR name:	1	
10-3	Is the entity a metropolitan district?] 	
10-4	Please indicate what services the entity provides: See notes section Does the entity have an agreement with another government to provide services?]	
If yes:	List the name of the other governmental entity and the services provided: See notes section)	
10-5 If yes:	Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> during Date Filed:)]	V
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		<u>-</u>
	General/Other mills Total mills		-
	NEW 2023! If the entity is a Title 32 Special District formed on or after 7/1/2000, has	No	N/A
10-7	the entity filed its preceding year annual report with the State Auditor as required under SB 21-262 [Section 32-1-207 C.R.S.]? If NO, please explain.	1	
	Please use this eness to provide any additional evaluations or comments not provide]	

Please use this space to provide any additional explanations or comments not previously included:

10-3: The District was established to provide financing for the design, acquisition, installation, construction, and completion of public improvements and services, including streets, transportation, drainage improvements, traffic and safety control, park and recreation facilities,

water, sewer, television relay and translator, and mosquito and pest control services.

10-4: Hidden Valley Farm Metropolitan District No. 1 serves as the Operating District and Hidden Valley Farm Metropoliatn District No 2, 3 and 4 serve as the Financing Districts.

	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?	7	

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 Board Member's Name	I Jeff Mark, attest I am a duly elected or appointed board member, and that I have
Board		personally reviewed and approve this application for exemption from audit.
Member	Jeffrey Mark	Signed her Mark Date: 3/28/2024
1		Date
		My term Expires: May 2027
	Print Board Member's Name	I Alan Vancil, attest I am a duly elected or appointed board member, and that I have
Board		personally reviewed and approve this application for exemption from audit.
Member	Alan Vancil	Signed ALAN VANCIL Date: 3/28/2024
2		
		My term Expires: May 2027
	Print Board Member's Name	I Chasity McMorrow, attest I am a duly elected or appointed board member, and that
Board		I have personally reviewed and approve this application for exemption from audit.
Member	Chasity McMorrow	Signed
3		Date:
		My term Expires: May 2025
	Print Board Member's Name	I David Cocolin, attest I am a duly elected or appointed board member, and that I
Board		have personally reviewed and approve this application for exemption from audit.
Member	David Cocolin	Signed David Cocdin 3/28/2024 Date:
4		
		My term Expires: May 2027
	Print Board Member's Name	I, attest I am a duly elected or appointed board
Board		member, and that I have personally reviewed and approve this application for
Member		exemption from audit.
5		Signed
		Date:
		My term Expires:
	Print Board Member's Name	I, attest I am a duly elected or appointed board
Board		member, and that I have personally reviewed and approve this application for
Member		exemption from audit.
6		Signed
		Date: My term Expires:
	Print Board Member's Name	I, attest I am a duly elected or appointed board
Board		member, and that I have personally reviewed and approve this application for
Member		exemption from audit.
7		Signed
		Date:
		My term Expires:



CliftonLarsonAllen LLP 8390 East Crescent Parkway, Suite 300 Greenwood Village, CO 80111 phone 303-779-5710 fax 303-779-0348 claconnect.com

Accountant's Compilation Report

Board of Directors Hidden Valley Farm Metropolitan District No. 3 Weld County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Hidden Valley Farm Metropolitan District No. 3 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 Hidden Valley Farm Metropolitan District No. 3.

Colorado Springs, Colorado

Clifton Larson Allen LLP

March 26, 2024

Certificate Of Completion

Envelope Id: D2EF9BE7C0734A71B6D236E27E96175D

Subject: Complete with DocuSign: HVFMD No. 3 - 2023 Audit Exemption.pdf

Client Name: Hidden Valley Farm MD No. 3

Client Number: A194629

Source Envelope:

Document Pages: 8 Signatures: 3 Initials: 0 Certificate Pages: 5

AutoNav: Enabled

Envelopeld Stamping: Enabled

Time Zone: (UTC-06:00) Central Time (US & Canada)

Status: Completed

Envelope Originator:

Jacob Theisen

220 S 6th St Ste 300

Minneapolis, MN 55402-1418 Jacob.Theisen@claconnect.com

IP Address: 4.2.161.250

Record Tracking

Status: Original

3/28/2024 10:20:52 AM

Holder: Jacob Theisen

Signature DocuSigned by:

Jacob.Theisen@claconnect.com

Location: DocuSign

Signer Events

ALAN VANCIL

alanvancil@landhuisco.com

Director

Security Level: Email, Account Authentication

(None)

Signature Adoption: Pre-selected Style Using IP Address: 73.78.79.221

Signed using mobile

ALAN VANCIL

-595FDDADA170417...

Timestamp

Sent: 3/28/2024 10:23:23 AM Viewed: 3/28/2024 10:25:39 AM Signed: 3/28/2024 10:25:51 AM

Electronic Record and Signature Disclosure:

Accepted: 3/28/2024 10:25:39 AM

ID: df79d93e-7491-4cbb-96d0-e60023fe3514

David Cocolin

dave@paradigmtulsa.com

Security Level: Email, Account Authentication

(None)

David Cocolin 3A23A89C3F0C48A

Signature Adoption: Pre-selected Style Using IP Address: 70.185.239.130

Sent: 3/28/2024 10:23:24 AM Viewed: 3/28/2024 10:25:40 AM Signed: 3/28/2024 10:25:50 AM

Electronic Record and Signature Disclosure:

Accepted: 3/28/2024 10:25:39 AM

ID: 6f419444-eb97-4c1a-bf8e-aebfdf39894e

Jeffery Mark

jmark@landhuisco.com

President

Security Level: Email, Account Authentication

(None)

DocuSigned by: Jeffery Mark

Signature Adoption: Pre-selected Style Using IP Address: 96.75.104.161

Sent: 3/28/2024 10:23:24 AM Viewed: 3/28/2024 10:33:35 AM Signed: 3/28/2024 10:33:42 AM

Electronic Record and Signature Disclosure:

Accepted: 3/28/2024 10:33:35 AM

ID: 3b2af326-48cc-4bd8-8b08-e4ce64523eb6

In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp

Certified Delivery Events	Status	Timestamp	
Carbon Copy Events	Status	Timestamp	
Witness Events	Signature	Timestamp	
Notary Events	Signature	Timestamp	
Envelope Summary Events	Status	Timestamps	
Envelope Sent	Hashed/Encrypted	3/28/2024 10:23:24 AM	
Envelope Updated	Security Checked	3/28/2024 12:11:52 PM	
Certified Delivered	Security Checked	3/28/2024 10:33:35 AM	
Signing Complete	Security Checked	3/28/2024 10:33:42 AM	
Completed	Security Checked	3/28/2024 12:11:52 PM	
Payment Events	Status	Timestamps	
Electronic Record and Signature Disclosure			

ELECTRONIC RECORD AND SIGNATURE DISCLOSURE

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Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

All notices and disclosures will be sent to you electronically

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

How to contact CliftonLarsonAllen LLP:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: BusinessTechnology@CLAconnect.com

To advise CliftonLarsonAllen LLP of your new email address

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at BusinessTechnology@CLAconnect.com and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

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To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to BusinessTechnology@CLAconnect.com and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

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To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;

ii. send us an email to BusinessTechnology@CLAconnect.com and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

Required hardware and software

The minimum system requirements for using the DocuSign system may change over time. The current system requirements are found here: https://support.docusign.com/guides/signer-guide-signing-system-requirements.

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