APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT	La Puerta Business Improvement District	For the Year Ended
ADDRESS	121 S Tejon Street	12/31/24
	Suite 1100	or fiscal year ended:
	Colorado Springs, CO 80903	
CONTACT PERSON	Lindsay Ross	
PHONE	719-635-0330	
EMAIL	lindsay.ross@claconnect.com	
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PART 1 - CERTIFICATION OF PREPARER

I certify that I am skilled in govern my knowledge.	nmental accounting and that the inform	ation in the appli	cation is comple	ete and accurate, to the best of	
NAME: Carrie Bartow					
TITLE	Accountant for the District				
FIRM NAME (if applicable)	CliftonLarsonAllen LLP				
ADDRESS	121 S Tejon Street, Suite 1100, Colora	do Springs, CO 8	30903		
PHONE	719-635-0330				
PREPARI		DATE PREPARED (No exemption shall be granted prior to the close of said fiscal year)			
SEE ATTACHED			3/22/2025		
	ving financial information is recorded	GOVERNI (MODIFIED ACC		PROPRIETARY (CASH OR BUDGETARY BASIS)	
using Governmental or Proprietary	V				

		PART 2 - REVENUES		
	All revenues for all funds must be re	flected in this section, including proceeds from	the sale of the government's lan	id, building, and
	equipment, and proceeds from debt	or lease transactions. Financial information will	not include fund equity informa	
Line #		Description	Round to the nearest dollar	Please use this space to provide
2-1	Taxes: Property	(report mills levied in question 10-7)	\$ 24,253	any necessary
2-2	Specific own Sales and us		\$	explanations
2-3 2-4		e fy): Senate Bill	\$- \$1,216	-
2-4	Licenses and permits	ly). Senate Bill	\$ -	
2-6	Intergovernmental:	Grants	-	-
2-7	3 1 1 1	Conservation Trust Funds (Lottery)	\$ -	1
2-8		Highway Users Tax Funds (HUTF)	\$ -	
2-9		Other (specify):	\$ -	
2-10	Charges for services			-
2-11 2-12	Fines and forfeits		\$ \$	-
2-12	Special assessments Investment income		\$- \$287	-
2-13	Charges for utility services		\$ -	-
2-15	Debt proceeds	(should agree to table 4-4, column 'Issued during year')		-
2-16	Lease proceeds		-	1
2-17	Developer Advances received	(should agree to table 4-4, column 'Issued during year')]
2-18	Proceeds from sale of capital ass	ets	\$ -]
2-19	Fire and police pension		-	_
2-20	Donations		\$ -	4
2-21	Other (specify):		\$ 1	-
2-22			\$	-
2-23 2-24			\$ \$	-
2-24			\$ -	-
2-26	(add li	ines 2-1 through 2-25) TOTAL REVENUES		
		3 - EXPENDITURES/EXPE		
	All expenditures for all funds must b	e reflected in this section, including the purcha	se of capital assets and principa	l and interest
Line # 3-1 3-2		e reflected in this section, including the purcha ial information will not include fund equity infor Description	mation. Round to the nearest dollar \$ 14,196 \$ -	Please use this space to provide any necessary
3-1 3-2 3-3	payments on long-term debt. Financ Administrative Salaries Payroll taxes	ial information will not include fund equity infor	mation. Round to the nearest dollar \$ 14,196 \$ - \$ -	Please use this space to provid
3-1 3-2 3-3 3-4	payments on long-term debt. Financ Administrative Salaries Payroll taxes Contract services	ial information will not include fund equity infor	mation. Round to the nearest dollar \$ 14,196 \$ - \$ - \$ - \$ -	Please use this space to provid any necessary
3-1 3-2 3-3 3-4 3-5	payments on long-term debt. Financ Administrative Salaries Payroll taxes Contract services Employee benefits	ial information will not include fund equity infor	mation. Round to the nearest dollar \$ 14,196 \$ - \$ - \$ - \$ - \$ -	Please use this space to provid any necessary
3-1 3-2 3-3 3-4 3-5 3-6	payments on long-term debt. Financ Administrative Salaries Payroll taxes Contract services Employee benefits Insurance	ial information will not include fund equity infor	mation. Round to the nearest dollar \$ 14,196 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Please use this space to provid any necessary
3-1 3-2 3-3 3-4 3-5 3-6 3-7	payments on long-term debt. Finance Administrative Salaries Payroll taxes Contract services Employee benefits Insurance Accounting and legal fees	ial information will not include fund equity infor	Round to the nearest dollar \$ 14,196 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Please use this space to provid any necessary
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3-1 3-2 3-3 3-4 3-5 3-6 3-7 3-8 3-9	payments on long-term debt. Finance Administrative Salaries Payroll taxes Contract services Employee benefits Insurance Accounting and legal fees Repair and maintenance Supplies	ial information will not include fund equity infor	mation. Round to the nearest dollar \$ 14,196 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Please use this space to provid any necessary
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3-1 3-2 3-3 3-4 3-5 3-6 3-7 3-8 3-9 3-10 3-11 3-12 3-13 3-14 3-15	payments on long-term debt. Financ Administrative Salaries Payroll taxes Contract services Employee benefits Insurance Accounting and legal fees Repair and maintenance Supplies Utilities and telephone Fire/Police Streets and highways Public health Capital outlay Utility operations	ial information will not include fund equity infor	mation. Round to the nearest dollar \$ 14,196 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Please use this space to provid any necessary
3-1 3-2 3-3 3-4 3-5 3-6 3-7 3-8 3-10 3-11 3-12 3-13 3-14 3-15 3-16	payments on long-term debt. Finance Administrative Salaries Payroll taxes Contract services Employee benefits Insurance Accounting and legal fees Repair and maintenance Supplies Utilities and telephone Fire/Police Streets and highways Public health Capital outlay Utility operations Culture and recreation	ial information will not include fund equity infor Description	mation. Round to the nearest dollar \$ 14,196 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Please use this space to provid any necessary
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3-1 3-2 3-3 3-4 3-5 3-6 3-7 3-8 3-9 3-10 3-11 3-12 3-13 3-14 3-15 3-16 3-17 3-18 3-19 3-20	payments on long-term debt. Finance Administrative Salaries Payroll taxes Contract services Employee benefits Insurance Accounting and legal fees Repair and maintenance Supplies Utilities and telephone Fire/Police Streets and highways Public health Capital outlay Utility operations Culture and recreation Debt service principal Debt service interest Repayment of Developer Advance Principal Repayment of Developer Advance Contribution to pension plan Contribution to Fire & Police Pension	ial information will not include fund equity infor Description (should agree to table 4-4, column 'Retired during year') (should agree to table 4-4, column 'Retired during year') a Interest	Round to the nearest dollar \$ 14,196 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	Please use this space to provic any necessary
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3-1 3-2 3-3 3-4 3-5 3-6 3-7 3-8 3-7 3-8 3-7 3-8 3-7 3-10 3-11 3-12 3-13 3-14 3-15 3-16 3-17 3-18 3-20 3-21 3-20 3-21 3-22 3-22 3-22 3-22 3-22 3-22	Administrative Salaries Payroll taxes Contract services Employee benefits Insurance Accounting and legal fees Repair and maintenance Supplies Utilities and telephone Fire/Police Streets and highways Public health Capital outlay Utility operations Culture and recreation Debt service principal Debt service interest Repayment of Developer Advance Principal Repayment of Developer Advance Ontribution to pension plan Contribution to Fire & Police Pension Other (specify): TIF Refund	ial information will not include fund equity infor Description (should agree to table 4-4, column 'Retired during year') (should agree to table 4-4, column 'Retired during year') a Interest	Round to the nearest dollar \$ 14,196 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - <t< td=""><td>Please use this space to provio any necessary</td></t<>	Please use this space to provio any necessary

If TOTAL REVENUES (Line 2-26) or TOTAL EXPENDITURES (Line 3-28) are GREATER than \$100,000 - **STOP**. You may not use this form. Please use the "Application for Exemption from Audit - <u>LONG FORM</u>".

	PART 4 - DEBT OUTSTANDING	3 , I	ISSUED), A	ND RI	ETIR	ED		
	Please answer the following questions by marking the	app	propriate box	es.		Ì	/es	1	lo
4-1	Does the entity have outstanding debt? (If 'No' is checked, skip to question 4-5)								7
4-2	f 'Yes' is checked, please attach a copy of the entity's debt repayment schedule) s the debt repayment schedule attached? If no, <mark>MUST</mark> explain below:								~
4-3	Is the entity current in its debt service payments? If no, MUS	r ex	plain below:			ן			7
4-4	Please complete the following debt schedule, if applicable: (please only include principal amounts)		utstanding at	ไรรเ	ied during year		d during rear		nding at r-end
	(enter all amounts as positive numbers)	ena	of prior year		year	د	cai	yea	-enu
	General obligation bonds	\$	-	\$	-	\$	-	\$	-
	Revenue bonds	\$	-	\$	-	\$	-	\$	-
	Notes/Loans	\$ \$	-	\$ \$	-	\$ \$	-	\$ \$	-
	Lease & SBITA** Liabilities [GASB 87 & 96] Developer Advances	\$ \$		\$ \$	-	\$	-	\$ \$	-
	Other (specify):	э \$		\$ \$	-	э \$	-	э \$	-
	TOTAL	· ·		\$		\$		\$	
**Subscript	ion-Based Information Technology Arrangements		ist agree to prio	<u> </u>	end balance			Ŷ	
	Please answer the following questions by marking the	e app	propriate box	es.		١	(es	l	٥I
4-5	Does the entity have any authorized but unissued debt as of	its f	iscal year-er	nd?			7		
	How much?	\$	1	15,10	0,000.00)			
	Date the debt was authorized:		11/6/2	2018		ĺ			
NEW 4-6	Is the authorized but unissued debt further limited by the ent Plan?	ity's	most recen	t Ser	vice				
If yes:	How much?	\$		15,00	00,000.00				
	Date of the most recent Service Plan:		7/15/	1905		ĺ			
4-7	Does the entity intend to issue debt within the next calendar	yea	r?			,			1
If yes:	How much?	\$			-				
4-8	Does the entity have debt that has been refinanced that it is s	still	responsible	for?		,			7
If yes:	What is the amount outstanding?	\$			-]			
4-9	Does the entity have any lease agreements?					,			1
If yes:	What is being leased?					1			
-	What is the original date of the lease?								
	Number of years of lease?	-							
	Is the lease subject to annual appropriation?					J			7
	What are the annual lease payments?	\$			-)	_		
	that are the annual lougo paymente i	Ψ				J			

Part 4 - Please use this space to provide any explanations/comments or attach separate documentation, if needed

	PART 5 - CASH AND INVESTM	ENTS			
	Please provide the entity's cash deposit and investment balances.	ļ	Amount	Total	
5-1	YEAR-END Total of ALL Checking and Savings Accounts		\$	26,635	
5-2	Certificates of deposit		\$	-	
	TOTAL CAS	H DEPOSITS			\$ 26,635
5-3	Investments (if investment is a mutual fund, please list underlying investments):				
			\$	-	
			\$	-	
			\$	-	
			\$	-	
	TOTAL IN	VESTMENTS			\$ -
	TOTAL CASH AND IN	VESTMENTS			\$ 26,635
	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.?				7
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.)?				
	Part 5 - If no, MUST use this space to provide any exp	lanations			

Construction In Progress (CIP)

Other (explain):

Leased & SBITA Right-to-Use Assets

(Please enter a negative, or credit, balance)

Accumulated Depreciation/Amortization

6-

6-

	PART 6 - CAPITAL AND R	IGH1	-TO-U	JSE	ASSE	ETS		
	Please answer the following questions by marking in	the appi	ropriate bo	xes.			Yes	No
-1	Does the entity have capital assets?							7
	(If 'No' is checked, skip the rest of Part 6)							
-2	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:							7
-3	Complete the following capital & right-to-use assets table:	begin	alance - ning of the year*	Ad	ditions^	De	eletions	ar-End alance
	Land	\$	-	\$	-	\$	-	\$ -
	Buildings	\$	-	\$	-	\$	-	\$ -
	Machinery and equipment	\$	-	\$	-	\$	-	\$ -
	Furniture and fixtures	\$	-	\$	-	\$	-	\$ -
	Infrastructure	\$	-	\$	-	\$	-	\$ -

\$ \$ \$ \$ \$ \$ -_ TOTAL \$ \$ \$ -

\$

\$

*Must agree to prior year-end balance

\$

\$

^Generally capital asset additions should be reported as capital outlay on line 3-14 and capitalized in accordance with the government's capitalization policy. Please explain any discrepancy

\$

\$

\$

\$

\$

\$

\$

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

	PART 7 - PENSION INFORMATION							
	Please answer the following questions by marking in the appropriate bo	xes.		Yes	No			
7-1	Does the entity have an "old hire" firefighters' pension plan?				4			
7-2	Does the entity have a volunteer firefighters' pension plan?				7			
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 explanation	s or	comments	i -				

PART 8 - BUDGET INFORMATION Please answer the following questions by marking in the appropriate boxes. N/A Yes 8-1 Did the entity file a budget with the Department of Local Affairs for the 1 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 1 29-1-108 C.R.S.? If no, MUST explain: If yes: Please indicate the amount appropriated for each fund separately for the year reported (Please make sure each individual fund's appropriation agrees to how the budget was adopted. Do not combine funds) Governmental/Proprietary Fund Name Total Appropriations By Fund

Covernmental/rippretary runa Name	Total Appropriations by Fund
General Fund	\$63,000.00
Capital Projects Fund	\$5,025,300.00

	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 entity from the spending limitations of TABOR does not exempt the entity from the 3 percent emergency reserve requirement. All entities should determine if they meet this requirement of TABOR.		
	Part 9 - If no, MUST use this space to provide any explanations		
	PART 10 - GENERAL INFORMATION		
	Please answer the following questions by marking in the appropriate boxes.	Yes	No
10-1 If yes:	Is this application for a newly formed governmental entity? Date of formation:		v V
10-2 If yes:	Has the entity changed its name in the past or current year? Please list the NEW name: Please list the PRIOR name:		I
10-3 10-4	Is the entity a metropolitan district? Please indicate what services the entity provides:		
10-5 If yes:	Does the entity have an agreement with another government to provide services? List the name of the other governmental entity and the services provided:		V
10-6	Has the district filed a <i>Title 32, Article 1 Special District Notice of Inactive Status</i> 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.]	es	
If yes:	Date filed:		
10-7	Does the entity have a certified mill levy?	7	
lf yes:	Please provide the following <u>mills</u> levied for the year reported (do not report \$ amounts): Bond redemption mills		
	General/other mills		10.39
	Total mills		10.39
	Yes	No	N/A
10-8	If the entity is a Title 32 Special District formed after 7/1/2000, has 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.		
	Title 31 District		

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

	PART 11 - GOVERNING BODY APPROVAL	_	
	Please answer the following question by marking in the appropriate box.	Yes	No
11 1	If you plan to submit this form electronically, have you read the Electronic Signature	Lآ	П

11-1 Policy?

Office of the State Auditor — Local Government Division - Exemption Form Electronic Signature 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 two 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 or type the names of <u>ALL</u> members A <u>MAJORITY</u> of the members of the go	
	Board Member's Name:	Gina Cimino
Board Member 1	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.	Signature 3/25/2025
	My term expires: DOES NOT EXPIRE	3/25/2025
	Board Member's Name:	Timothy Lamb
Board Nember 2	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.	Signature Timofly Lamb 3/25/2025
	My term expires: DOES NOT EXPIRE	3/25/2025
	Board Member's Name:	Karl Gabrielson
Board Member 3	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.	Signature
	My term expires: DOES NOT EXPIRE	Date
	Board Member's Name:	Gary Fentiman
Board Member 4	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.	Signature Nary Farture 3/25/2025 ^{BB9B19E41E}
	My term expires: DOES NOT EXPIRE	3/25/2025 Date
	Board Member's Name:	Vacant
Board Member 5	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.	Signature
	My term expires:	Date
	Board Member's Name:	
Board Member 6	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.	Signature
	My term expires:	Date
	Board Member's Name:	
Board Member 7	I attest that I am a duly elected or appointed board member, and that I have personally reviewed and approved this application for exemption from audit.	Signature
	My term expires:	Date



CliftonLarsonAllen LLP claconnect.com

Accountant's Compilation Report

Board of Directors La Puerta Business Improvement District Las Animas County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of La Puerta Business Improvement District as of and for the year ended December 31, 2024, 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 La Puerta Business Improvement District.

Clifton Larson allen LLG

Colorado Springs, Colorado March 22, 2025

docusign

Certificate Of Completion

Envelope Id: 2EF05820-294D-488B-B48C-B101AD386080 Subject: Complete with Docusign: La Puerta BID - 2024 Audit Exemption.pdf Client Name: La Puerta BID Client Number: 011 Source Envelope: Document Pages: 8 Signatures: 3 Certificate Pages: 5 Initials: 0 AutoNav: Enabled EnvelopeId Stamping: Enabled Time Zone: (UTC-08:00) Pacific Time (US & Canada)

Record Tracking

Status: Original 3/25/2025 2:59:53 PM

Signer Events

Gary Fentiman gfentiman@phillong.com COO Phil Long Toyota Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure: Accepted: 3/31/2023 7:17:10 AM

ID: d98e9b55-0c1d-47fa-a59d-2c67d246e0c1

Gina Cimino gcimino@phillong.com President

Gina Cimino

Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure: Accepted: 3/25/2025 3:26:15 PM

ID: c4a1e11c-e17a-40f6-bab4-647c66354bf1

Karl Gabrielson kgabrielson@trinidaddevelopment.com

Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure: Accepted: 3/29/2024 11:08:17 AM ID: 047ded47-9ae2-4207-ab06-69d79546b821

Timothy Lamb tlamb@phillong.com Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure: Accepted: 1/12/2023 5:13:22 PM ID: 09fc810e-a395-4f0c-acd2-952213dd3262

In Person Signer Events

Holder: CLA Operations Holly.Hayes@claconnect.com

Signature

DocuSigned by: Mary Fontana AAECE889B19E41E...

Signature Adoption: Drawn on Device Using IP Address: 98.55.5.33 Signed using mobile

DocuSigned by: Gina (imino — C069AD02CFB2436...

Signature Adoption: Pre-selected Style Using IP Address: 172.58.56.175 Signed using mobile Status: Sent

Envelope Originator: CLA Operations 220 S 6th St Ste 300 Minneapolis, MN 55402-1418 Holly.Hayes@claconnect.com IP Address: 47.186.198.210

Location: DocuSign

Timestamp

Sent: 3/25/2025 3:04:09 PM Viewed: 3/25/2025 5:39:57 PM Signed: 3/25/2025 5:40:47 PM

Sent: 3/25/2025 3:04:09 PM Viewed: 3/25/2025 3:26:15 PM Signed: 3/25/2025 3:26:38 PM

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— DocuSigned by: Timotly Lamb — E7908DCE18B141D...

Signature

Signature Adoption: Pre-selected Style Using IP Address: 50.205.254.235

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
Carrie Bartow carrie.bartow@claconnect.com Accountant Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure:	COPIED	Sent: 3/25/2025 3:04:11 PM Viewed: 3/25/2025 3:43:34 PM
Accepted: 3/10/2025 10:08:28 AM ID: 57e31ad5-96fa-465e-ac6a-5d7775748e57 Spencer Johnson spencer.johnson@claconnect.com Intern Security Level: Email, Account Authentication	COPIED	Sent: 3/25/2025 3:04:11 PM Viewed: 3/31/2025 3:48:08 PM
(None) Electronic Record and Signature Disclosure: Not Offered via Docusign		
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent Certified Delivered Signing Complete	Hashed/Encrypted Security Checked Security Checked	3/25/2025 3:04:11 PM 3/25/2025 3:17:46 PM 3/25/2025 3:19:30 PM
Payment Events	Status	Timestamps
Electronic Record and Signature Discl	osure	

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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: <u>https://support.docusign.com/guides/signer-guide-signing-system-requirements</u>.

Acknowledging your access and consent to receive and sign documents electronically

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

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