EMAIL

APPLICATION FOR EXEMPTION FROM AUDIT

SHORT FORM

NAME OF GOVERNMENT	Prosper Metropolitan District No. 2	For the Year Ended
ADDRESS	8390 E Crescent Parkway	12/31/22
	Suite 300	or fiscal year ended:
	Greenwood Village, CO 80111	
CONTACT PERSON	Jason Carroll	
PHONE	303-779-5710	

Jason.Carroll@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:	Jason Carroll				
TITLE	Accountant for the District				
FIRM NAME (if applicable)	CliftonLarsonAllen LLP				
ADDRESS	8390 E Crescent Parkway, Suite 300, Greenwood Village, CO 80111				
PHONE	303-779-5710				
DATE PREPARED	February 25, 2023				
PREPARER (SIGNATURE REQUIRED)					

SEE ATTACHED ACCOUNTANT'S COMPILATION REPORT					
Please indicate whether the following financial information is recorded	GOVERNMENTAL (MODIFIED ACCRUAL BASIS)	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#		Des	scription	Round to nearest Dollar	Please use this
2-1	Taxes: Pro	operty	(report mills levied in Question 10-6)	\$	space to provide
2-2	Sp	ecific owners	ship	\$	any necessary
2-3	Sa	les and use		\$	explanations
2-4	Otl	her (specify):		\$	-
2-5	Licenses and permits			\$	-
2-6	Intergovernmental:		Grants	\$	-
2-7			Conservation Trust Funds (Lottery)	\$	-
2-8			Highway Users Tax Funds (HUTF)	\$	<u>-</u>
2-9			Other (specify):	\$	<u>-</u>
2-10	Charges for services			\$	<u>-</u>
2-11	Fines and forfeits			\$	<u>-</u>
2-12	Special assessments			Ψ	<u>-</u>
2-13	Investment income			\$	<u>-</u>
2-14	Charges for utility servi	ces		\$	<u>-</u>
2-15	Debt proceeds		(should agree with line 4-4, column 2)	T	<u>-</u>
2-16	Lease proceeds			\$	<u>-</u>
2-17	Developer Advances rec		(should agree with line 4-4)		-
2-18	Proceeds from sale of o	•		\$	-
2-19	Fire and police pension			\$	-
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.

Line#	Description	ade faild equity illion	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 (sh	ould agree with Part 4)	\$ -	
3-18	Debt service interest		\$ -	
3-19	Repayment of Developer Advance Principal (sho	uld agree with line 4-4)	\$ -	
3-20	Repayment of Developer Advance Interest		\$ -	
3-21		hould agree to line 7-2)	\$ -	
3-22	Contribution to Fire & Police Pension Assoc. (s	hould agree to line 7-2)	\$ -	
3-23	Other (specify):			
3-24			\$ -	
3-25			\$ -	
3-26	(add lines 3-1 through 3-24) TOTAL EXPENDIT	URES/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>".

	PART 4 - DEBT OUTSTANDING	2 10	CHED	AND	ETID	ED		
				, AND I		LD (es		-
4-1	Please answer the following questions by marking the appropriate boxes. 4-1 Does the entity have outstanding debt?						N V	
	If Yes, please attach a copy of the entity's Debt Repayment S	chedul	e.		_	-		•
4-2	Is the debt repayment schedule attached? If no, MUST explai	n:			_]	✓	
	N/A							
4-3	Is the entity current in its debt service payments? If no, MUS	Гехріа	in:]	J	
	N/A							
4-4	Please complete the following debt schedule, if applicable: (please only include principal amounts)(enter all amount as positive numbers)		anding at prior year*	Issued during year		d during ear	Outstar year	nding at -end
	General obligation bonds	\$	-	\$ -	\$	-	\$	-
	Revenue bonds	\$	-	\$ -	\$	-	\$	-
	Notes/Loans	\$	-	\$ -	\$	-	\$	-
	Lease Liabilities	\$	-	\$ -	\$	-	\$	-
	Developer Advances	\$	-	\$ -	\$	-	\$	-
	Other (specify):	\$	-	\$ -	\$	-	\$	-
	TOTAL	\$	-	\$ -	\$	-	\$	-
		*must t	ie to prior ye	ar ending balanc	e			
	Please answer the following questions by marking the appropriate boxes					/es	N	0
4-5	Does the entity have any authorized, but unissued, debt?				_ `	J		
If yes:		\$	·	73,760,000.00	_			
	Date the debt was authorized:		11/2/2	2015				
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 s	till res	ponsible	for?	_ [Ŀ	/
If yes:	What is the amount outstanding?	\$		-				
4-8	Does the entity have any lease agreements?				_ [Ŀ	/
If yes:	What is being leased?				4			
	What is the original date of the lease?				+			
	Number of years of lease?				_		Г	٦
	Is the lease subject to annual appropriation? What are the annual lease payments?	\$			ا ا	_		_
	Please use this space to provide any		ations or	comments:				
	Ticase use this space to provide any	oxpiail	ations of	-comments.				

	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			\$ -	
3-3			\$ -	
			\$ -	
	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.		П	7
	seq., C.R.S.?	Ц		Ľ
5-5	Are the entity's deposits in an eligible (Public Deposit Protection Act) public			7
	depository (Section 11-10.5-101, et seq. C.R.S.)?	Ш	ш	<u> </u>
If no, Ml	JST use this space to provide any explanations:			

	PART 6 - CAPITAL AND RI	GH1	Γ-TO-U	SE ASS	SETS			
	Please answer the following questions by marking in the appropriate box	es.			Yes		N	lo
6-1	Does the entity have capital assets?						G	
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:							1
	N/A							
6-3	Complete the following capital & right-to-use assets table:	ht-to-use assets table: Balance - beginning of the year* Balance - beginning of the Part 3)				ns	Year-End Balance	
	Land	\$	-	\$ -	\$	-	\$	_
	Buildings	\$	-	\$ -	\$	-	\$	-
	Machinery and equipment	\$	-	\$ -	\$	-	\$	-
	Furniture and fixtures	\$	-	\$ -	\$	-	\$	-
	Infrastructure	\$	-	\$ -	\$	-	\$	-
	Construction In Progress (CIP)	\$	-	\$ -	\$	-	\$	-
	Leased Right-to-Use Assets	\$	-	\$ -	\$	-	\$	-
	Other (explain):	\$	-	\$ -	\$	-	\$	-
	Accumulated Depreciation/Amortization	\$	-	\$ -	\$	-	•	
	(Please enter a negative, or credit, balance) TOTAL	\$		\$ -	\$	\longrightarrow	\$ \$	
	Please use this space to provide any	_ +	nations or	7	Ψ		φ	-
	r rouge and time opace to provide any	олріа						
	DADT 7 DENCIÓN	INIE		TION				
	PART 7 - PENSION		URIVIA	HON				
- 4	Please answer the following questions by marking in the appropriate box	es.			Yes			lo
7-1	Does the entity have an "old hire" firefighters' pension plan?						7	
7-2	Does the entity have a volunteer firefighters' pension plan?					1		
If yes:	Who administers the plan?							
	Indicate the contributions from:		ı					
	Tax (property, SO, sales, etc.):			\$ -				
	State contribution amount:			\$ -	\dashv			
	Other (gifts, donations, etc.): TOTAL			\$ - \$ -	\dashv			
	What is the monthly benefit paid for 20 years of service per re	tiroo :	ac of lan	Ψ -	\dashv			
	1?	eliree (as oi Jaii	\$ -				
	Please use this space to provide any	evnlai	nations or	comments:				
	r icuse use tills space to provide uny	САРІСІ	ilations of	comments.				
	PART 8 - BUDGET I	NE	ODMA.	TION				
8-1	Please answer the following questions by marking in the appropriate box Did the entity file a budget with the Department of Local Affai		tho	Yes	No		N	/A
0-1	current year in accordance with Section 29-1-113 C.R.S.?	15 101	uie	✓				
	current year in accordance with dection 25-1-115 C.N.O.:							
8-2								
0-2	Did the entity pass an appropriations resolution, in accordance with Section							
	29-1-108 C.R.S.? If no, MUST explain:							
16	Disease in disease the surrount handward for each found for the con-		41-					
If yes:	Please indicate the amount budgeted for each fund for the ye	ar rep	orted:					
	Governmental/Proprietary Fund Name	Tot	al Appropria	tions By Fund				
	General Fund	\$		-				

Does the entity have a certified Mill Levy?

10-6

If yes:

		iti o i i i i i i i i i i i i i i i i i		
	Please answer the follow	ing question by marking in the appropriate box	Yes	No
9-1	Is the entity in compliance	e with all the provisions of TABOR [State Constitution, Article X, Section 20(5)]?		п ——
		overnment from the spending limitations of TABOR does not exempt the government from the 3 percent emergency ents should determine if they meet this requirement of TABOR.		Ц
f no, Ml	JST explain:			
		PART 10 - GENERAL INFORMATION		
	Please answer the follow	ing questions by marking in the appropriate boxes.	Yes	No
10-1	Is this application for	a newly formed governmental entity?		7
If yes:	Date of formation:			
10-2	Has the entity change	ed its name in the past or current year?		V
		•	_	_
If was:	Disease Bat the NEW	ome 9 DDIOD nome.		
If yes:	Please list the NEW n	name & PKIUK name:		
10-3	Is the entity a matron	olitan district?	V	П
10-5	Is the entity a metrop		ŭ	Ш
	See below	services the entity provides:		
40.4		an agreement with another gevernment to provide considera		
10-4	_	an agreement with another government to provide services?	✓	
If yes:		other governmental entity and the services provided:		
40.5	See below	Title 00 Auticle 4 Chapiel District Notice of Investigation (4-4)		V
10-5	_	a Title 32, Article 1 Special District Notice of Inactive Status during	Ш	<u> </u>
If yes:	Date Filed:			

PART 9 - TAYPAYER'S BILL OF RIGHTS (TAROR)

Bond Redemption mills

General/Other mills

Total mills

Please use this space to provide any explanations or comments:

4

10-3: The District was created to build or acquire public infrastructure for water, sanitation, storm, street improvements, safety protection, fire protection, park and recreation, transportation improvements, and other facilities and services. The District was organized in conjunction with other Districts in order to provide community services.

Please provide the following mills levied for the year reported (do not report \$ amounts):

10-4: The Prosper Coordinating Metropolitan District is established to provide construction, administration, and operation and maintenance services for all of the Prosper districts. Prosper Metro Districts Nos. 1-4, Prosper Park & Recreation Metro District, and Prosper Water & Sanitation Financing Metro District are the financing districts and generate the tax revenues for operations and for debt service. Prosper Regional Water & Sanitation Metro District will provide water and sanitation services within the development.

	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?	V			

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 MAJORITY of the members of the governing body must complete and sign in the column below.
Board	Print Board Member's Name	I <u>Maribeth D'Amico</u> , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from
Member 1	Maribeth D'Amico	audit. Signed Date: Boats312/01242-3/9/2023 My term Expires: May 2023
Board	Print Board Member's Name	I <u>William Smith</u> , attest I am a duly elected or appointed board member, and that I have personally reviewed and approve this application for exemption from audit.
Board Member 2	William Smith	Signed William Swift Date:
Board	Print Board Member's Name	I <u>Don Sullivan</u> , 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 3	Don Sullivan	Signed Date: Date: Wy term Expires: May 2025
Board	Print Board Member's Name	I <u>Kari Wright</u> , 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 4	Kari Wright	Signed Date: My term Expires: May 2025
	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
Board Member 5		exemption from audit. Signed Date: My term Expires:
	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
Board Member 6		exemption from audit. Signed Date: My term Expires:
Board Member 7	Print Board Member's Name	I
		My term Expires:



CliftonLarsonAllen LLP 8390 East Crescent Pkwy., Suite 300 Greenwood Village, CO 80111

phone 303-779-5710 fax 303-779-0348 **CLAconnect.com**

Accountant's Compilation Report

Board of Directors Prosper Metropolitan District No. 2 Arapahoe County, Colorado

Management is responsible for the accompanying Application for Exemption from Audit of Prosper Metropolitan District No. 2 as of and for the year ended December 31, 2022, 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 Prosper Metropolitan District No. 2.

Greenwood Village, Colorado

Clifton Larson allen LL

February 25, 2023

DocuSign^{*}

Certificate Of Completion

Envelope Id: BFB40AAEAE724470B785C098FA2ACEB9

Subject: Complete with DocuSign: Prosper MD No. 2 - 2022 Audit Exemption.pdf

Client Name: Prosper Metropolitan District No. 2

Client Number: A193043

Source Envelope:

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

AutoNav: Enabled
Envelopeld Stamping: Enabled

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

Status: Completed

Envelope Originator: Spencer Johnson

220 S 6th St Ste 300

Minneapolis, MN 55402-1418 spencer.johnson@claconnect.com IP Address: 50.169.146.162

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Status: Original

3/7/2023 1:50:33 PM

Holder: Spencer Johnson

spencer.johnson@claconnect.com

Location: DocuSign

Signer Events

Don Sullivan

don@studiodonsullivan.com

Security Level: Email, Account Authentication

(None)

Signature

DocuSigned by:

Don Sullivan

Signature Adoption: Pre-selected Style Using IP Address: 174.51.117.250

Timestamp

Sent: 3/7/2023 1:58:11 PM Viewed: 3/9/2023 8:20:14 AM Signed: 3/9/2023 8:20:34 AM

Electronic Record and Signature Disclosure:

Accepted: 3/9/2023 8:20:14 AM

ID: 3051dfaf-8cee-4a61-975e-54f1b47682ed

Maribeth D'Amico

maribeth.damico@furniturerow.com

Security Level: Email, Account Authentication

(None)

DocuSigned by:

—B6AE53127D12442...

Using IP Address: 76.120.78.246

Signature Adoption: Drawn on Device

Sent: 3/7/2023 1:58:11 PM Viewed: 3/9/2023 8:49:24 AM Signed: 3/9/2023 8:49:35 AM

Electronic Record and Signature Disclosure:

Accepted: 9/27/2021 12:13:33 PM

ID: c7fb5834-3938-4fa7-ae4c-1f5214d92b71

William Smith

bill.smith@furniturerow.com

Security Level: Email, Account Authentication

(None)

Docusigned by:
William Smith
8C9FB316BE71497...

Signature Adoption: Pre-selected Style

Using IP Address: 4.8.9.114

Sent: 3/7/2023 1:58:11 PM Viewed: 3/7/2023 3:57:44 PM Signed: 3/7/2023 3:57:52 PM

Electronic Record and Signature Disclosure:

Accepted: 3/8/2019 3:01:06 PM

ID: 58357a92-d975-4a4f-a181-738aabc23e4a

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	3/7/2023 1:58:12 PM
Envelope Updated	Security Checked	3/9/2023 3:20:31 PM
Certified Delivered	Security Checked	3/7/2023 3:57:44 PM
Signing Complete	Security Checked	3/7/2023 3:57:52 PM
Completed	Security Checked	3/9/2023 3:20:31 PM
Payment Events	Status	Timestamps
Electronic Record and Signature Disclosure		

ELECTRONIC RECORD AND SIGNATURE DISCLOSURE

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Withdrawing your consent

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

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.

To withdraw your consent with CliftonLarsonAllen LLP

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..

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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.

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.

By selecting the check-box next to 'I agree to use electronic records and signatures', you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify CliftonLarsonAllen LLP as described above, you consent to
 receive exclusively through electronic means all notices, disclosures, authorizations,
 acknowledgements, and other documents that are required to be provided or made
 available to you by CliftonLarsonAllen LLP during the course of your relationship with
 CliftonLarsonAllen LLP.