BOARD OF DIRECTOR OATH OF OFFICE

§32-1-901, §24-12-101 et seq., C.R.S., and Colorado Constitution Article 12, §9

STATE OF CO	DLORADO
DOUGL COUN	
COTTONWOOD WATER AND	O SANITATION DISTRICT
I,Steven McCulloch, swear that I constitution of the state of Colorado, and the laws of the duties of the office of Director of Cottonwood Water and the best of my ability.	
STATE OF COLORADO)) ss. COUNTY OF DOUGLAS) Subscribed and sworn to before me this <u>18th</u> day of <u>October</u>	
	By: William (Mistrict Officer)
IF SWORN OR AFFIRMED BEFORE A NOTARY THE FOLLO STATE OF COLORADO) ss. COUNTY OF	WING SHOULD BE COMPLETED.
Subscribed and sworn to before me this day of _	, 20
(notary signature)	

PROCEDURAL INSTRUCTIONS: The oath must be taken within 30 days <u>after</u> the election date or appointment to fill a vacancy: Oaths taken prior to the election date are invalid.

A copy of the executed oath and an individual, schedule, or blanket surety <u>bond</u> must be filed with the Clerk of the Court, the Clerk and Recorder in every county in which the district extends and with the Division of Local Government. If this is the oath of an appointed director, also provide the <u>notice of appointment</u> to the Division in addition to the oath and bond documents; note who is being replaced, if applicable.



Workers' Compensation and Employer's Liability Declarations Page

Coverage Number: POL-0007199 FEIN: 84-0859481 Coverage Period: 1/1/2022 — EOD 12/31/2022 Entity ID: 48704

Named Member:
Cottonwood Water & Sanitation District
c/o Mulhern MRE, Inc.
188 Inverness Drive West, Suite 150
Englewood, CO 80112

Broker of Record:
Denver Agency Company
210 University Blvd, Suite 600

Denver, CO 80206

Date: 9/8/2021

Coverage is provided for only those coverages and classifications indicated below.

State: Colorado

Limits of Liability: Coverage A Workers' Compensation Statutory

Coverage B Employer's Liability \$2,000,000

Annual Contribution: \$ 450.00

Class	Description	2022 Estimated Employee Payroll	2022 Estimated Volunteer Payroll
8811	Board Member Coverage		\$ 8,000

This Declarations page is made and is mutually accepted by the Pool and Named Member subject to all terms that are made a part of the Workers' Compensation Coverage Document. This Declarations page represents only a brief summary of coverages. Please refer to the Coverage Document at csdpool.org for actual coverages, terms, conditions, and exclusions. Named Member must be a member of the Special District Association of Colorado and must adopt the Pool's Intergovernmental Agreement.

Countersigned by:

Authorized Representative
Colorado Special Districts Property and Liability Pool



CERTIFICATE OF COVERAGE

ADMINISTRATOR:	CERTIFICATE NO.:	CERT-000710		
Colorado Special Districts Property and Liability Pool	DATE:	9/8/2021		
c/o McGriff, Seibels & Williams, Inc.	This certificate is issued as a matter of information only and confers no			
PO Box 1539	rights upon the certificate holder other than those provided in the			
Portland, OR 97207-1539	coverage document. This certificate does not amend, extend, or alter			
Named Member:	the coverage afforded by the coverage documents listed herein.			
Cottonwood Water & Sanitation District				
c/o Mulhern MRE, Inc.	COMPANIES AFFORDING COVERAGE			
188 Inverness Drive West, Suite 150	COMPANY A:	Colorado Special Districts Property and Liability Pool		
Englewood, CO 80112	COMPANY B:	Safety National Casualty Corporation		

COVERAGES

This is to certify that the coverage documents listed herein have been issued to the Named Member herein for the coverage period indicated. Notwithstanding any requirement, term, or condition of any contract or other document with respect to which the certificate may be issued or may pertain, the coverage afforded by the coverage documents listed herein is subject to all the terms, conditions, and exclusions of such coverage documents.

CO LTR	TYPE OF COVERAGE	LIMITS		COVERAGE NUMBER	EFFECTIVE DATE	EXPIRATION DATE
AB	Workers' Compensation	WC STATUT	TORY LIMITS			
АВ	Employer's Liability	EL EACH ACCIDENT	\$2,000,000			
		EL DISEASE - EACH EMPLOYEE	\$2,000,000	POL-0007199	1/1/2022	EOD 12/31/2022
		EL DISEASE - POLICY LIMIT	\$2,000,000			

Description:

Subject to the terms and conditions of the Workers' Compensation Coverage Document.

Evidence of Coverage Only.

CERTIFICATE HOLDER

CANCELLATION

Should any of the above described coverages be canceled before the expiration date thereof, notice will be delivered in accordance with the coverage and policy for provisions.

AUTHORIZED REPRESENTATIVE: Joseph E. DePaepe

Colorado Water Conservation Board 1313 Sherman Street, Room 718 Denver, CO 80203