DISTRICT CO	OURT, DOUGLAS COUNTY, COLORADO	
Court Address	s: 4000 Justice Way Castle Rock, CO 80109	
Telephone:	(303) 663-7200	
Petitioner:		
THE CANYO	NS METROPOLITAN DISTRICT NO. 4	▲ COURT USE ONLY ▲
Attorney for	Petitioner:	
Name:	Clint C. Waldron, Esq. Megan J. Murphy, Esq.	Case Number: 2001CV759
Address:	WHITE BEAR ANKELE TANAKA & WALDRON	Division:
	Attorneys at Law 2154 E. Commons Ave., Suite 2000 Centennial, CO 80122	Courtroom:
Phone:	(303) 858-1800	
Fax:	(303) 858-1801	
Email:	cwaldron@wbapc.com; mmurphy@wbapc.com	
Atty. Reg. #:	36689; 47464	
	BOARD OF DIRECTORS OATH OF OFFICE	5
STATE OF C	OLORADO) ss.	
COUNTY OF	,	
by the everlive of the State of duties of the about to enter	ren Everett, do select one of the following oing God, that I will support the Constitution of the Colorado, and the laws of the State of Colorado office of Director of The Canyons Metropolitary to the best of my ability. In accordance with filed at the time of filing of this oath is filed here	he United States, the Constitution lo, and will faithfully perform the District No. 4 upon which I am § 32-1-901(2), C.R.S. the bond

Darren Everett

Darren Everett (May 9, 2020)

Signature

Subscribed and sworn to before me this <u>9</u> day of May, 2020.

By: Jonatha Alperi (Jay 9, 2020)

Officer of the Board of Directors

Canyons MD Nos. 1-5 & 8-11 - Oaths of Office

Final Audit Report 2020-05-09

Created: 2020-05-08

By: Allison Hanson (ahanson@wbapc.com)

Status: Signed

Transaction ID: CBJCHBCAABAAk7QHWg92w6Tq54z9delc9kze_7DNTvnY

"Canyons MD Nos. 1-5 & 8-11 - Oaths of Office" History

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 2020-05-09 9:30:56 PM GMT

EXHIBIT A

Director Bond



or Employee or position.

RLI Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

PUBLIC OFFICIAL POSITION SCHEDULE BOND

Bond No. <u>LSM0770706</u>

lte	m 1. Name of Insured:	The Canyon Metropo	olitan District No	. 4		(
	Principal Address	: c/o White Bear Ankel Centennial, CO 8012		ıldron 2154 E. Co	ommons Ave, Suite 2	(the "Insured") 2000
lte	m 2. Bond PeriodS m 3. Limit of liability do the Company as to eac	es not exceed the sun	n specified in the			ritten acceptances
ı.	INSURING AGREEM					
		Company, an Illinois o				•
		unto				
	of Cer	ntennial	_, <u>CO</u> , Oblige	e, for the faithfu	I discharge of the c	luties of any Public
	• •	while occupying any pmpany as to said positi				•
II.	CONDITIONS					
	_	natic coverage is grante newly created position		•	•	
	beginning, unless	er, that the automatic during the said thirty dule, and the Compan	day period the	Obligee has re	equested in writing t	
	Coverage on any writing by the Con	position may be incre	ased or decreas	sed upon writter	request of the Obli	igee, if agreed to in

position occupied by any Public Official or Employee causing such loss is or has been covered in the schedule, whether said loss occurred during any one or more years. The liability of the Company for any Public Official or Employee occupying more than one position at one time, or at different times, shall **not** exceed the largest amount of coverage specified for any single position occupied by said Public Official or Employee. The liability of the Company shall **never exceed** the amount in effect for the position when the act

C. Liability. The Company's liability under this bond shall **not** be cumulative, and in no event shall the Company be called upon to pay as a loss hereunder in an amount greater than the largest single amount for which the

B. Cancellation. Cancellation hereunder is effective, and all liability under this bond shall cease as to future acts or omissions as to any Public Official or Employee on the date specified in written notice given by the Obligee to the Company as to any or all positions or Public Officials or Employees, or after thirty days' written notice given by the Company to the Obligee of its intent to cancel this bond in its entirety, or as to any Public Official

OFF 0102 (2/93)

Page 1 of 3 Pages

00002304-30,30

of the Public Official or Employee causing the loss shall have occurred. In the event there are more Public Officials or Employees occupying the position covered in the schedule than are listed therein, the Company shall be liable for such proportion of the amount of coverage as the number of Public Officials or Employees listed bears to the number of Public Officials or Employees actually occupying the position when the loss occurred.

The Liability of the Company hereunder is subject to the terms and conditions of the following Riders, attached thereto:

None of the specifications of this Bond shall be altered or waived, except in writing by the Company executed by its President, Vice President, Secretary, Assistant Secretary or Treasurer.

Dated this <u>14th</u> day of <u>August</u>, <u>2015</u>.

RLI Insurance Company

By _______ Vice President

CORPORATE SEAL

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Page 2 of 3 Pages
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SCHEDULE OF POSITIONS - EFFECTIVE THE 15th DAY OF September, 2015.

(If there is more than one position of like classification, list by number, thus: Cashier No. 1, Cashier No. 2)

Schedule Number	Position Name	No.	Position Location	Bond Amount
1	Treasurer	1		\$ 5,000.00
2	Board Member	1		\$ 1,000.00
3	Board Member	1		\$ 1,000.00
4	Board Member	1		\$ 1,000.00
5	Board Member	1		\$ 1,000.00
6	Board Member	1		\$ 1,000.00
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RLI Insurance Company
P.O. Box 3967 Peoria IL 61612-3967
Phone: (309)692-1000 Fax: (309)683-1610

POWER OF ATTORNEY

RLI Insurance Company

Bond No. <u>LSM0770706</u>

Know All Men by These Presents:

That the	RLI Insu	rance Company	, a corporation	organized and ex	xisting under the la	ws of the State of
Illin	ois, ar	nd authorized and licensed	to do business in all s	states and the Dis	trict of Columbia	does hereby make,
constitute and ap	ppoint:	Barton W. Davis	in the Cit	y of	Peoria	, State of
Illinois	s, as	Vice President	, with full power a	and authority her	eby conferred upo	n him/her to sign,
execute, acknow	ledge and deliver	for and on its behalf as Su	arety, in general, any	and all bonds, ur	ndertakings, and re	cognizances in an
amount not to	exceed	Five Hundred Thousand	and 00/100	_ Dollars (\$ 500,000.00	_) for any single
obligation, and s	specifically for the	following described bond.				
Principal:	_The Canyon M	etropolitan District No. 4	<u>.</u>			
Obligee:	Same as Princip	pal				
Type Bond:	Public Official	Position Schedule Bond				
Bond Amount:	\$ 10,000.00					
Effective Date:	September 15,	2015				
The	RLI Insuran	ce Company	further certifies	that the followi	ng is a true and	exact copy of a
		f Directors of				
undertakings,		the Company. The corp rney or other obligation by facsimile."				
IN WITNESS W	WHEREOF, the	RLI Insuran	ice Company	has cau	sed these presents	to be executed by
		_ with its corporate seal at				
ATTEST:	mA.Coi	Manager Manage	CORPORATE SEAL	Insurance Comp	pany	
Cynthia S. Iohm		Assistant Secretary Assistant	Barton	n W. Davis		Vice President
and Constant Said Corporation.	Vice Presiden RLI Insurance C	t, 2015 before me, a, who being by m t and Company A. Couller	Assista , and acknowledged "OFFICIAL NOTARY JACQUELINE M	vledged that they nt Secretary said instrument SEAL" . BOCKLER	signed the above l	Power of Attorney ctively, of the said
Jacqueline M. Boo	ckler	Notary Public	COMMISSION EXPIR	RES 01/14/18		