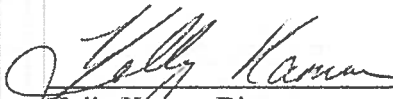


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|---|---|
| DISTRICT COURT COUNTY OF DOUGLAS, COLORADO Court Address: 4000 Justice Way, Ste. 2009 Castle Rock, CO 80109 Telephone No.: (720) 437-6200 | ▲Court Use Only▲ |
| Petitioners: Lincoln Park Metropolitan District <hr/> Attorneys for Petitioners: Tamara K. Seaver, Esq. Shannon S. Johnson, Esq. ICENOGLE SEAVER POGUE, P.C. A Professional Corporation 4725 South Monaco Street, Suite 360 Denver, Colorado 80237 Telephone: 303.292.9100 Facsimile: 303.292.9101 E-mail Seaver: tseaver@isp-law.com E-mail Johnson: sjohnson@isp-law.com Atty. Reg. Seaver: #37851 Atty. Reg. Johnson: #47657 | Case Number: 83CV110 Div.: _____ |
| OATH OF DIRECTOR AND EVIDENCE OF BOND IN THE MATTER OF LINCOLN PARK METROPOLITAN DISTRICT | |

OATH OF DIRECTOR

I, Holly Kamm, do (SWEAR or AFFIRM) that I will support the Constitution of the United States, the Constitution of the State of Colorado, and the laws of the State of Colorado, and will faithfully perform the duties of the office of Director upon which I am about to enter to the best of my ability.



 Holly Kamm, Director

Subscribed and sworn to before me this 7 day of MAY, 2020.

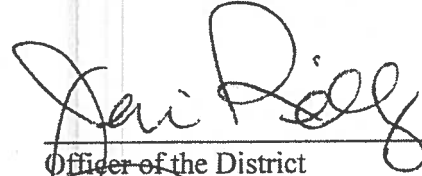
WITNESS my hand and official seal.

My commission expires: _____

(SEAL)

Notary Public

Subscribed and sworn to before me this 7 day of May, 2020.



Officer of the District
(President or Secretary and/or Treasurer)

Subscribed and sworn to before me this _____ day of _____, 2020.

Designee of the District

Pursuant to Section 24-12-103, C.R.S., the courts, judges, magistrates, referees, clerks, and deputy clerks within their respective districts or counties; a person designated by the governing body, or any officer thereof; and notaries public within any county of this state have the power to administer all oaths or affirmations of office.

EVIDENCE OF BOND

The Lincoln Park Metropolitan District hereby provides evidence of an individual, schedule or blanket surety bond for the above named director in satisfaction of the requirements of Section 32-1-901(2), C.R.S., attached hereto as **Exhibit A** and incorporated herein by this reference.

EXHIBIT A
Evidence of Bond



Comprehensive Crime Certificate Holder Declaration

Master Coverage Document Number: CR 00 26 11 15

Certificate Number: POL-0002543

Named Member:

Lincoln Park Metropolitan District
c/o CliftonLarsonAllen LLP
8390 E. Crescent Parkway, Suite 300
Greenwood Village, CO 80111

Insurer: Fidelity and Deposit Company of Maryland

Coverage Period: 1/1/2020 to EOD 12/31/2020

Broker of Record:

T. Charles Wilson Insurance Service
384 Inverness Parkway
Suite 170
Englewood, CO 80112

Covered ERISA Plan:

Covered Designated Agent(s):

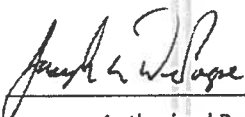
Coverage Limits:

| | |
|--|---------------------------------------|
| Public Employee Dishonesty Coverage: | \$5,000 |
| Limit is Per Loss | |
| Faithful Performance of Duty | |
| Officers, Directors, and Trustees | |
| Welfare and Pension Plan ERISA Compliance if Covered Plan is shown | |
| Volunteer Workers as Employees | |
| Forgery or Alteration Coverage: | \$5,000 |
| Theft, Disappearance, and Destruction Coverage: | \$5,000 |
| Inside Premises | |
| Outside Premises | |
| Computer and Funds Transfer Fraud Coverage: | \$5,000 |
| Debit, Credit or Charge Card Forgery Coverage: | \$5,000 |
| Money Orders and Counterfeit Paper Currency Coverage: | \$5,000 |
| Fraudulent Impersonation Coverage: | \$5,000 |
| Crime Deductible: | \$100 |
| Fraudulent Impersonation Deductible: | 20% of Fraudulent Impersonation Limit |
| Contribution: | \$135 |

Policy Forms:

- CR 00260506 Government Crime Policy
- CR 25070300 Include Specified Directors or Trustees on Committee as Employees
- CR 25080300 Include Specified Non-Compensated Officers as Employees
- CR 25090300 Include Volunteer Workers as Employees
- CR 25190506 Add Faithful Performance of Duty
- CR 25120300 Include Treasurers or Tax Collectors as Employees
- CR 02151104 Colorado Changes
- CR 25200300 Debit, Credit or Charge Card Forgery
- CR 25020506 Include Designated Agents as Employees, when listed
- CR 04171115 Fraudulent Impersonation

This Certificate Holder Declaration is made and is mutually accepted by the CSD Pool and the Named Member subject to all terms which are made a part of the Master Comprehensive Crime Policy. This Certificate represents only a brief summary of coverages. Please refer to the Master Policy Document for actual coverage, terms, conditions, and exclusions.

Countersigned by: 

 Authorized Representative