DISTRICT COURT

COUNTY OF DOUGLAS, COLORADO

Court Address: 4000 Justice Way, Suite 2009

Castle Rock, Colorado 80109

Telephone No.: (720) 437-6200

In the Matter of:

Park Meadows Metropolitan District

Attorneys for District:

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▲Court Use Only▲

Case Number: 1982CV000160

Div.: 6

OATH OF DIRECTOR AND EVIDENCE OF BOND IN THE MATTER OF PARK MEADOWS METROPOLITAN DISTRICT

OATH OF DIRECTOR

I, Gary W. Godden, 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.

Gary W. Gooden, Director

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 and other oaths or affirmations. PLEASE SUBSCRIBE AND SWEAR YOUR OATH BEFORE ONE OF THESE AUTHORIZED INDIVIDUALS AND UTILIZE ONE OF THE APPROPRIATE SIGNATURE BLOCKS BELOW:

STATE OF COLORADO)
COUNTY OF Douglas) ss.
Subscribed and sworn to before me this Aday of May, 2022
WITNESS my hand and official seal.
My commission expires: January 27 202-5
MIRICAN MARIN AYON NOTARY PUBLIC - STATE OF COLORADO MIRICAN MARIN AYON NOTARY Public Notary Public
NOTARY ID 20214003364 MY COMMISSION EXPIRES JAN 27, 2025
Subscribed and sworn to before me this day of, 20
Officer of the District
officer of the District
Subscribed and sworn to before me this day of, 20
Designee of the District

PROCEDURAL INSTRUCTIONS: In accordance with Sections 32-1-901 and 24-12-101, C.R.S., file this Oath of Director (1) with the county clerk and recorder in every county in which the District extends; (2) the Division of Local Government; and (3) the clerk of the court. The oath must be taken within 30 days after the individual's election, or if the election is cancelled, within 30 days after the election date or appointment to fill a vacancy. Oaths taken prior to the regular election date are invalid regardless of whether the election was held or cancelled.

EVIDENCE OF BOND

The Park Meadows Metropolitan District hereby provides evidence of 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 AEvidence of Bond



Crime Certificate Holder Declaration

Master Coverage Document Number: J05931794

Certificate Number: POL-0009887

Broker of Record:

TCW Risk Management 384 Inverness Parkway

Suite 170

Englewood, CO 80112

8390 E. Crescent Parkway, Suite 300

Park Meadows Metropolitan District

Greenwood Village, CO 80111

c/o CliftonLarsonAllen LLP

Covered Designated Agent(s):

Insurer: Federal Insurance Company (Chubb)

Coverage Period: 1/1/2022 to EOD 12/31/2022

Coverages and Limits:

Named Member:

Employee Theft: \$10,000

Limit is maximum for each loss

• Employee includes executives, full-time, part-time, seasonal, leased and temporary employee(s), interns or non-compensated volunteer.

· Includes funds from a sponsored benefit plan.

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Public Official Faithful Performance of Duty:	\$10,000
Client Theft:	\$10,000
Forgery or Alteration:	\$10,000
On Premises:	\$10,000
In Transit:	\$10,000
Computer System Fraud:	\$10,000
Funds Transfer Fraud:	\$10,000
Debit, Credit or Charge Card Fraud:	\$10,000
Money Orders and Counterfeit Paper Currency Fraud:	\$10,000
Social Engineering Fraud:	\$10,000

Deductible(s):

All Crime except Social Engineer Fraud: \$250

Social Engineering Fraud: 20% of Social Engineering Fraud Limit

Contribution: \$174

Policy Forms:

PF-52815 (04/20) The Chubb PrimarysM Commercial Crime Insurance

PF-52853 (04/20) Governmental Entity (Colorado Special Districts Pool) Endorsement

PF-53127 (04/20) Colorado Amendatory Endorsement PF-52851 (04/20) Add Corporate Credit Card Coverage

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 Crime Policy. This Certificate represents only a brief summary of coverages. Please refer to the Master Policy Documents for actual coverage, terms, conditions, and exclusions.

Countersigned by:

Authorized Representative