

DISTRICT COURT COUNTY OF DOUGLAS, COLORADO Court Address: 4000 Justice Way, Suite 2009 Castle Rock, Colorado 80109 Telephone No.: (303) 663-7200	<p style="text-align: center;">▲ COURT USE ONLY ▲</p>
Petitioners: Park Meadows Metropolitan District	
Attorney for Petitioners: Tamara K. Seaver Anna C. Wool ICENOGLE SEAVER POGUE, P.C. 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 (Wool): AWool@ISP-Law.com Atty. Reg. (Seaver) #24721 Atty. Reg. (Wool) #46237	Case Number: 82 CV 160
<p style="text-align: center;">OATH OF DIRECTOR AND EVIDENCE OF BOND IN THE MATTER OF PARK MEADOWS METROPOLITAN DISTRICT</p>	

OATH OF DIRECTOR

I, Stephen R. Parry, 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.



Stephen R. Parry, Director

Subscribed and sworn to before me this 18th day of May, 2020.


WITNESS my hand and official seal.

My commission expires: _____

(S E A L)

Notary Public

Subscribed and sworn to before me this 18th day of May, 20 .



Officer of the District

Subscribed and sworn to before me this _____ day of _____, 20__.

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 and other oaths or affirmations.

EVIDENCE OF BOND

The Park Meadows 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-0003397**Named Member:**

Park Meadows 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

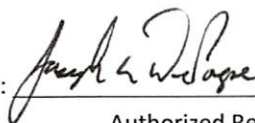
CR 25200300 Debit, Credit or Charge Card Forgery

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