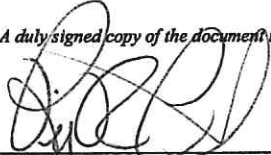


<p>DISTRICT COURT, COUNTY OF DOUGLAS, COLORADO Court Address: Douglas County Justice Center 4000 Justice Way, Suite 2009 Castle Rock, Colorado 80109 Telephone No.: (303) 663-7200</p>	<p style="text-align: center;">▲ COURT USE ONLY ▲</p>
<p>PETITIONER:</p> <p>RAVENNA METROPOLITAN DISTRICT</p>	
<p>Attorneys for Petitioner: Alan D. Pogue Deborah A. Early ICENOGLE SEAVER POGUE, P.C. 4725 S. Monaco St., Suite 360 Denver, Colorado 80237 Phone Number: (303) 292-9100 FAX Number: (303) 292-9101 E-mail: APogue@isp-law.com DEarly@isp-law.com Atty. Reg. #: 30156 (Pogue) 34849 (Early)</p>	<p>Case No: 2004 CV 439</p> <p>Div: 5</p>
<p>OATH OF OFFICE FOR KEVIN COLLINS AND EVIDENCE OF BOND FOR RAVENNA METROPOLITAN DISTRICT</p>	

I, Kevin Collins, 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.

A duly signed copy of the document is on file at the office of Icenogle Seaver Pogue, P.C.



Kevin Collins, Director

STATE OF COLORADO)
) ss.
COUNTY OF DOUGLAS)

Subscribed and sworn to before me this 31st day of May, 2022 by Kevin Collins.

WITNESS my hand and official seal.

My commission expires: 4 DEC 2025

(S E A L)

NORMAN K SOLOMON
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID 20014036966
MY COMMISSION EXPIRES DECEMBER 04, 2025

Norman K Solomon
Notary Public

EVIDENCE OF BOND

The Ravenna Metropolitan District hereby provides evidence of a 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.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/1/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement.

PRODUCER: TCW Risk Management, 384 Inverness Parkway Suite 170, Englewood, CO 80112
INSURED: Ravenna Metropolitan District, c/o TWS Financial, 7345 S Pierce St. #205, Littleton, CO 80128
CONTACT NAME, PHONE, FAX, E-MAIL ADDRESS, INSURER(S) AFFORDING COVERAGE, NAIC #

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Includes Commercial General Liability, Automobile Liability, Umbrella Liab, Excess Liab, Workers Compensation, and a 3 Year Bond.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Public Official Position Schedule Bond
1 Treasurer @ \$5,000
5 Board Members @ \$1,000 each

CERTIFICATE HOLDER CANCELLATION

CERTIFICATE HOLDER: Colorado Department of Local Affairs, Division of Local Government-Special Districts, 1313 Sherman St., Rm 521, Denver, CO 80203
CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE: [Signature]