## DISTRICT COURT, COUNTY OF DOUGLAS, STATE OF COLORADO

4000 Justice Way

Castle Rock, Colorado 80109

303-663-7200

PETITIONER: IN RE SOUTH SANTA FE METROPOLITAN DISTRICT NO. 2

Megan Becher

McGEADY SISNEROS, P.C. 450 E. 17<sup>th</sup> Ave., Suite 400

Denver, Colorado 80203-1214

Phone: (303) 592-4380 Fax: (303) 592-4385

E-mail: mbecher@mcgeadysisneros.com

Atty. Reg. #: 33108

▲ COURT USE ONLY ▲

Case Number: 06 CV 1883

Div.:

Ctrm.:

## OATH OF DIRECTOR

The undersigned solemnly swears (or affirms) that he will faithfully perform the duties of this office as required by law and will support the Constitution of the United States, the Constitution of the State of Colorado, and the laws made pursuant thereto.

John Fox

Address: 4131 S. Narcissus Way

Denver, CO 80237

STATE OF COLORADO

) ss.

COUNTY OF V

Subscribed and sworn to before me this 3

\_\_ day of June, 2014.

WITNESS my hand and official seal.

MARCIA J. DOYLE NOTARY PUBLIC STATE OF COLORADO NOTARY ID 19924017676 MY COMMISSION EXPIRES MAY 21, 2017

Notary Public

My commission expires:



DIBLIC O	D D T (C) 12377 Y (C) 244 - C	
South Santa Fe M		Bond No. <u>15152002</u>
ame of Insured	- COTODOTTOWN	
WESTERN SURETY COMPANY, as the Obligge, for the faithful discharge of	s Surety, in consideration of the duties of any Officer or I	an agreed premium is held and firmly bound unto Employee while occupying any position named in the Surety, while in the service of the Insured, not ace of the Surety as to said position after the
2nd day of June	,2008	·
reated position identical with one listed Provided, however, that the autom- inless during the said thirty day period and the Surety by written acceptance ha 2. Coverage on any position may b writing by the Surety. 3. The Surety's liability under this pay as a loss hereunder an amount greator. Fundovee causing said loss is or has	in the schedule of positions atic coverage herein granted the Insured has requested its consented thereto. The increased or decreased up bond shall not be cumulativater than the largest single a been covered in the schedul	on writing that the position be added to the schedule, on written request of the Insured, and agreed to in re, and in no event shall the Surety be called upon to amount for which the position occupied by any Office, whether said loss occurred during any one or more than one position at one time, or a
different times, shall not exceed the lar or Employee. The liability of the Sure Officer or Employee causing the loss state position covered in the schedule the of coverage as the number of Officer 4. Cancellation hereunder is effect as to any Officer or Employee on the d positions or Officers or Employees, or a cancel this bond in its entirety, or as to 5 None of the specifications of this	sty shall never exceed the a hall have occurred. In the ean are listed therein, the Sus or Employees listed bear tive, and all liability under that specified in written not after thirty days' written not any Officer or Employee or is bond shall be altered or with the standard of the st	soified for any single position occupied by said Office mount in effect for the position when the act of the vent there are more Officers or Employees occupying rety shall be liable for such proportion of the amount is to the number of Officers or Employees actually his bond shall cease as to the future acts or omission occupied by the Insured to the Surety as to any or a circe given by the Surety to the Insured of its intent to position.  Alternative of Transports
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SCHEDULE OF POSITIONS EFFECTIVE

June 2nd

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

<del></del>	(If there is more than one position of like classification, t	Lucation	Am ount	Premium
Number	Director		\$1,000.00	\$3.50
1			\$1,000.00	\$3.50
2	Director	· ·		\$3.50
3	Director		\$1,000.00	
4	Director		\$1,000.00	\$3.50
			\$1,000.00	\$3.50
5	Director		\$5,000.00	\$25.00
6	Treasurer		4	
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