DISTRICT COURT COLORADO	Γ, DOUGLAS COUNTY,				
Douglas County Ju 4000 Justice Way, Colorado 80104	stice Center Suite 2009 Castle Rock,				
IN RE:					
COLORADO ME	F THE STERLING RANCH TROPOLITAN DISTRICT NO. 6, UGLAS, STATE OF COLORADO	▲ COURT USE ONLY ▲			
Attorneys for the D	istrict:	Case Number: 2013 CV 30442			
Name(s): Address: Phone Number:	Cameron J. Richards, #45032 GREENBERG TRAURIG, LLP 1144 15th Street, Suite 3300 Denver, CO 80202 303.572.6500	Div.: 6			
Email:	Cameron.richards@gtlaw.com				
that I will support the and the laws of the S	susan Beckman TERM TO MAY 2022 ckman, do [select one: swear, saffirm the Constitution of the United States, the State of Colorado, and will faithfully perfect Colorado Metropolitan District No. 6	m, or □swear by the everliving God Constitution of the State of Colorado form the duties of the office of Directo			
STATE OF COLORA		DECRIVIAN			
COUNTY OF Jone) ss.				
Subscribed hand swe	orn to before me this <u>24</u> day of <u></u>	, 2025 by			
N Sta Notary	YN D SUTTON lotary Public te of Colorado ID # 19934002649 gion Expires 02-22-2029 By: Roby	Notary/Chair)			



SARULRAJ



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/12/2023

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. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER				CONTACT NAME:							
TCW Risk Management 384 Inverness Parkway Suite 170 Englewood, CO 80112				PHONE (A/C, No, Ext): (303) 368-5757 FAX (A/C, No): (303)				_{):} (303) 3	368-5863		
				E-MAIL ADDRESS: tcwinfo@wilsonins.com							
INSURED Sterling Ranch Colorado Metropolitan District No. 6 c/o Clifton Larson Allen, LLP 8390 E. Crescent Parkway, Suite 500 Greenwood Village, CO 80111					INSURER(S) AFFORDING COVERAGE				NAIC#		
					INSURER A : RLI Insurance Company						
					INSURER B:						
					INSURER C:						
					INSURER D:						
					INSURER E :						
					INSURER F:						
COVERAGES CER	RTIFICATE 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.											
INSR LTR TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIN	ITS			
COMMERCIAL GENERAL LIABILITY						•	EACH OCCURRENCE	\$			
CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$			
							MED EXP (Any one person)	\$			
							PERSONAL & ADV INJURY	\$			
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$			
POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGO	\$			
OTHER:								\$			
AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$			
ANY AUTO							BODILY INJURY (Per person)	\$			
OWNED AUTOS ONLY SCHEDULED AUTOS							BODILY INJURY (Per acciden	t) \$			
HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$			
								\$			
UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$			
EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$			
DED RETENTION \$							DED OTH	\$			
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N							PER OTH- STATUTE ER				
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?							E.L. EACH ACCIDENT	\$			
(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE \$				
DÉSCRIPTION OF OPERATIONS below			I CMOE4E204		11/6/2022	11/6/2025	E.L. DISEASE - POLICY LIMIT Public Officials	\$	40.000		
A 3 Year Bond			LSM0545281		11/6/2022	11/6/2025	Public Officials		10,000		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC Public Official Position Schedule Bond 1 Treasurer @ \$5,000 5 Board Members @ \$1,000 each	LES (#	ACORD	101, Additional Remarks Schedu	le, may b≀	e attached if mor	e space is requir	ed)				
CERTIFICATE HOLDER				CANC	ELLATION						
Colorado Department of Local Affairs Division of Local Government- Special Districts 1313 Sherman St., Rm 521 Denver, CO 80203				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							