DISTRICT COURT, COUNTY OF DOUGLAS, STATE OF COLORADO 4000 Justice Way, Suite 2009 Castle Rock, CO 80109 720-437-6200 IN THE MATTER OF LANTERNS METROPOLITAN DISTRICT NO. 2 MaryAnn M. McGeady **▲ COURT USE ONLY ▲** Kathryn S. Kanda Case Number: 2014CV30994 McGEADY SISNEROS, P.C. 450 E. 17th Avenue, Suite 400 Denver, Colorado 80203 Div.: 1 Ctrm.: Phone: (303) 592-4380 Fax: (303) 592-4385 E-mail: mmcgeady@mcgeadysisneros.com kkanda@mcgeadysisneros.com Atty. Reg. #: #12417; #34858 OATH OF DIRECTOR The undersigned solemnly swears (or affirms) that he will faithfully perform the duties of

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.

Clay F. Carlson

Address: 13536 YorkSt.

Thornton, CO 80241

My commission expires: 68/09/2014

CERTIFICATE OF ELECTION

IT IS HEREBY CERTIFIED THAT

CLAY F. CARLSON

WAS ELECTED TO SERVE UNTIL THE SECOND REGULAR ELECTION

AS A MEMBER OF THE BOARD OF DIRECTORS OF THE

LANTERNS METROPOLITAN DISTRICT NO. 2

AT THE ELECTION HELD TUESDAY, NOVEMBER 4, 2014.

Dated: _/(-5-14

Signed:

Designated Election Official

THIS CERTIFICATE OF ELECTION IS MADE PURSUANT TO §§1-11-103(1), 1-13.5-1306 AND 32-1-305(5), C.R.S.



RLI Insurance Company Phone: (309)692-1000, Fax: (309)683 Phone: (309)692-1000 Fax: (309)683-1610

PUBLIC OFFICIAL POSITION SCHEDULE BOND

Bond No. LSM0675493

Item 1. Name of Insured: Lanterns Metropolitan District No. 2	(the "Insured")
Principal Address: c/o McGeady Sisneros, P.C. 450 E. 17th Avenue, Suite 400 Denver, CO 80203	(and meanes)
Item 2. Bond Period November 5, 2014 to Continuous Until Cancelled. Item 3. Limit of liability does not exceed the sum specified in the Schedule of named Positio by the Company as to each Position there listed.	ns or written acceptances
I. INSURING AGREEMENT The RLI Insurance Company, an Illinois corporation (the "Company"), in consideration held and firmly bound unto	of the duties of any Public or added thereto by written
II. CONDITIONS	ic Official or Employee

A. Coverage. Automatic coverage is granted for the first thirty days service of any Public Official or Employee: (1) Occupying a newly created position identical with one listed in the schedule of positions, in an equal amount.

Provided, however, that the automatic coverage herein granted shall be void and of no effect from the beginning, unless during the said thirty day period the Obligee has requested in writing that the position be added to the schedule, and the Company by written acceptance has consented thereto.

Coverage on any position may be increased or decreased upon written request of the Obligee, if agreed to in writing by the Company.

- B. Cancellation. Cancellation hereunder is effective, and all liability under this bond shall cease as to future acts or omissions as to any Public Official or Employee on the date specified in written notice given by the Obligee to the Company as to any or all positions or Public Officials or Employees, or after thirty days' written notice given by the Company to the Obligee of its intent to cancel this bond in its entirety, or as to any Public Official or Employee or position.
- C. Liability. The Company's liability under this bond shall not be cumulative, and in no event shall the Company be called upon to pay as a loss hereunder in an amount greater than the largest single amount for which the position occupied by any Public Official or Employee causing such loss is or has been covered in the schedule, whether said loss occurred during any one or more years. The liability of the Company for any Public Official or Employee occupying more than one position at one time, or at different times, shall not exceed the largest amount of coverage specified for any single position occupied by said Public Official or Employee. The liability of the Company shall never exceed the amount in effect for the position when the act

of the Public Official or Employee causing the loss shall have occurred. In the event there are more Public Officials or Employees occupying the position covered in the schedule than are listed therein, the Company shall be liable for such proportion of the amount of coverage as the number of Public Officials or Employees listed bears to the number of Public Officials or Employees actually occupying the position when the loss occurred.

The Liability of the Company hereunder is subject to the terms and conditions of the following Riders, attached thereto:

None of the specifications of this Bond shall be altered or waived, except in writing by the Company executed by its President, Vice President, Secretary, Assistant Secretary or Treasurer.

Dated this 5th day of November, 2014

RLI Insurance Company

Roy C. Die

Vice President

SCHEDULE OF POSITIONS - EFFECTIVE THE ___5th__ DAY OF ____November____, __2014__.

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

Schedule Number	Position Name	No.	Position Location	Bond Amount
1	Treasurer	1		\$ 5,000.00
2	Board Member 1	1		\$ 1,000.00
3	Board Member 2	1		\$ 1,000.00
4	Board Member 3	1		\$ 1,000.00
5	Board Member 4	1		\$ 1,000.00
6	Board Member 5	1		\$ 1,000.00
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POWER OF ATTORNEY

RLI Insurance Company

Bond No. <u>LSM0675493</u>

Know All Men by These Presents:

That the RLI Insurance	Company	, a corporation or	rganized and ex	isting under the	laws of the State of
Illinois , and au	thorized and licensed t	o do business in all sta	ites and the Dist	trict of Columbia	a does hereby make,
constitute and appoint:	Roy C. Die	in the City	of	Peoria	, State of
Illinois , as	Vice President	_, with full power an	d authority here	eby conferred up	pon him/her to sign,
execute, acknowledge and deliver for a	nd on its behalf as Sur	ety, in general, any ar	nd all bonds, un	dertakings, and	recognizances in an
amount not to exceedFive	Hundred Thousand	and 00/100	Dollars (\$ 500,000.00) for any single
obligation, and specifically for the follo					
Principal: Lanterns Metropoli	tan District No. 2				
()I)IIPCC.					
Type Bond: Public Official Posi	tion Schedule Bond				
Bond Amount: \$ 10,000.00					
Effective Date: November 5, 2014					
					1
The RLI Insurance C	ompany	further certifies the	hat the followi	ng is a true ai	id exact copy of a
Resolution adopted by the Board of Dir	ectors of	RLI Insurance Co	ompany	, and n	ow in force to-wit:
undertakings, Powers of Attorney corporate seal may be printed by fa	csimile."				
IN WITNESS WHEREOF, the	RLI Insuran	ce Company	nas car	iseu mese preser	11s to be exceuted by
its Vice President w	ith its corporate seal at	fixed this a	ay of Nove	mber , 20	<u> </u>
ATTEST: Cynthia S. Dohm	Assistant Secretary	SEAL ROY C	nsurance Com	pany	Vice President
On this <u>5th</u> day of <u>November</u>	2014 before me	Notary Public nersor	nally appeared	Roy	C. Die
and <u>Cynthia S. Dohm</u> as <u>Vice President</u> RLI Insurance Com	, who being by m and pany	e duly sworn, acknow Assistar	rledged that they nt Secretary	y signed the abo	repectively, of the said
said corporation.	warene	********	************		
Jacqueline M. Bockler	Ballex Notary Public	"OFFICIAL PUBLIC STATE OF STATE OF REWORD COMMISSION EXPIRE	SEAL" BOCKLER RES 01/14/18		

DISTRICT COURT, COUNTY OF DOUGLAS, STATE OF COLORADO 4000 Justice Way, Suite 2009 Castle Rock, CO 80109 720-437-6200 IN THE MATTER OF LANTERNS METROPOLITAN DISTRICT NO. 2 MaryAnn M. McGeady **▲ COURT USE ONLY ▲** Kathryn S. Kanda Case Number: 2014CV30994 McGEADY SISNEROS, P.C. 450 E. 17th Avenue, Suite 400 Denver, Colorado 80203 Div.: 1 Ctrm.: Phone: (303) 592-4380 Fax: (303) 592-4385 E-mail: mmcgeady@mcgeadysisneros.com kkanda@mcgeadysisneros.com Atty. Reg. #: #12417; #34858 OATH OF DIRECTOR The undersigned solemnly swears (or affirms) that he will faithfully perform the duties of

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.

Clay F. Carlson

Address: 13536 YorkSt.

Thornton, CO 80241

My commission expires: 68/09/2014

CERTIFICATE OF ELECTION

IT IS HEREBY CERTIFIED THAT

CLAY F. CARLSON

WAS ELECTED TO SERVE UNTIL THE SECOND REGULAR ELECTION

AS A MEMBER OF THE BOARD OF DIRECTORS OF THE

LANTERNS METROPOLITAN DISTRICT NO. 2

AT THE ELECTION HELD TUESDAY, NOVEMBER 4, 2014.

Dated: _/(-5-14

Signed:

Designated Election Official

THIS CERTIFICATE OF ELECTION IS MADE PURSUANT TO §§1-11-103(1), 1-13.5-1306 AND 32-1-305(5), C.R.S.



RLI Insurance Company Phone: (309)692-1000, Fax: (309)683 Phone: (309)692-1000 Fax: (309)683-1610

PUBLIC OFFICIAL POSITION SCHEDULE BOND

Bond No. LSM0675493

Item 1. Name of Insured: Lanterns Metropolitan District No. 2	(the "Insured")
Principal Address: c/o McGeady Sisneros, P.C. 450 E. 17th Avenue, Suite 400 Denver, CO 80203	(and meanes)
Item 2. Bond Period November 5, 2014 to Continuous Until Cancelled. Item 3. Limit of liability does not exceed the sum specified in the Schedule of named Positio by the Company as to each Position there listed.	ns or written acceptances
I. INSURING AGREEMENT The RLI Insurance Company, an Illinois corporation (the "Company"), in consideration held and firmly bound unto	of the duties of any Public or added thereto by written
II. CONDITIONS	ic Official or Employee

A. Coverage. Automatic coverage is granted for the first thirty days service of any Public Official or Employee: (1) Occupying a newly created position identical with one listed in the schedule of positions, in an equal amount.

Provided, however, that the automatic coverage herein granted shall be void and of no effect from the beginning, unless during the said thirty day period the Obligee has requested in writing that the position be added to the schedule, and the Company by written acceptance has consented thereto.

Coverage on any position may be increased or decreased upon written request of the Obligee, if agreed to in writing by the Company.

- B. Cancellation. Cancellation hereunder is effective, and all liability under this bond shall cease as to future acts or omissions as to any Public Official or Employee on the date specified in written notice given by the Obligee to the Company as to any or all positions or Public Officials or Employees, or after thirty days' written notice given by the Company to the Obligee of its intent to cancel this bond in its entirety, or as to any Public Official or Employee or position.
- C. Liability. The Company's liability under this bond shall not be cumulative, and in no event shall the Company be called upon to pay as a loss hereunder in an amount greater than the largest single amount for which the position occupied by any Public Official or Employee causing such loss is or has been covered in the schedule, whether said loss occurred during any one or more years. The liability of the Company for any Public Official or Employee occupying more than one position at one time, or at different times, shall not exceed the largest amount of coverage specified for any single position occupied by said Public Official or Employee. The liability of the Company shall never exceed the amount in effect for the position when the act

of the Public Official or Employee causing the loss shall have occurred. In the event there are more Public Officials or Employees occupying the position covered in the schedule than are listed therein, the Company shall be liable for such proportion of the amount of coverage as the number of Public Officials or Employees listed bears to the number of Public Officials or Employees actually occupying the position when the loss occurred.

The Liability of the Company hereunder is subject to the terms and conditions of the following Riders, attached thereto:

None of the specifications of this Bond shall be altered or waived, except in writing by the Company executed by its President, Vice President, Secretary, Assistant Secretary or Treasurer.

Dated this 5th day of November, 2014

RLI Insurance Company

Roy C. Die

Vice President

SCHEDULE OF POSITIONS - EFFECTIVE THE ___5th__ DAY OF ____November____, __2014__.

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

Schedule Number	Position Name	No.	Position Location	Bond Amount
1	Treasurer	1		\$ 5,000.00
2	Board Member 1	1		\$ 1,000.00
3	Board Member 2	1		\$ 1,000.00
4	Board Member 3	1		\$ 1,000.00
5	Board Member 4	1		\$ 1,000.00
6	Board Member 5	1		\$ 1,000.00
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POWER OF ATTORNEY

RLI Insurance Company

Bond No. <u>LSM0675493</u>

Know All Men by These Presents:

That the RLI Insurance	Company	, a corporation or	rganized and ex	isting under the	laws of the State of
Illinois , and au	thorized and licensed t	o do business in all sta	ites and the Dist	trict of Columbia	a does hereby make,
constitute and appoint:	Roy C. Die	in the City	of	Peoria	, State of
Illinois , as	Vice President	_, with full power an	d authority here	eby conferred up	pon him/her to sign,
execute, acknowledge and deliver for a	nd on its behalf as Sur	ety, in general, any ar	nd all bonds, un	dertakings, and	recognizances in an
amount not to exceedFive	Hundred Thousand	and 00/100	Dollars (\$ 500,000.00) for any single
obligation, and specifically for the follo					
Principal: Lanterns Metropoli	tan District No. 2				
()I)IIPCC.					
Type Bond: Public Official Posi	tion Schedule Bond				
Bond Amount: \$ 10,000.00					
Effective Date: November 5, 2014					
					1
The RLI Insurance C	ompany	further certifies the	hat the followi	ng is a true ai	id exact copy of a
Resolution adopted by the Board of Dir	ectors of	RLI Insurance Co	ompany	, and n	ow in force to-wit:
undertakings, Powers of Attorney corporate seal may be printed by fa	csimile."				
IN WITNESS WHEREOF, the	RLI Insuran	ce Company	nas car	iseu mese preser	11s to be exceuted by
its Vice President w	ith its corporate seal at	fixed this a	ay of Nove	mber , 20	<u> </u>
ATTEST: Cynthia S. Dohm	Assistant Secretary	SEAL ROY C	nsurance Com	pany	Vice President
On this <u>5th</u> day of <u>November</u>	2014 before me	Notary Public nersor	nally appeared	Roy	C. Die
and <u>Cynthia S. Dohm</u> as <u>Vice President</u> RLI Insurance Com	, who being by m and pany	e duly sworn, acknow Assistar	rledged that they nt Secretary	y signed the abo	repectively, of the said
said corporation.	warene	********	************		
Jacqueline M. Bockler	Ballex Notary Public	"OFFICIAL PUBLIC STATE OF STATE OF REWORD COMMISSION EXPIRE	SEAL" BOCKLER RES 01/14/18		

DISTRICT COURT, COUNTY OF DOUGLAS, STATE OF COLORADO 4000 Justice Way, Suite 2009 Castle Rock, CO 80109 720-437-6200 IN THE MATTER OF LANTERNS METROPOLITAN **DISTRICT NO. 2** MaryAnn M. McGeady ▲ COURT USE ONLY ▲ Kathryn S. Kanda Case Number: 2014CV30994 McGEADY SISNEROS, P.C. 450 E. 17th Avenue, Suite 400 Denver, Colorado 80203 Div.: 1 Ctrm.: Phone: (303) 592-4380 Fax: (303) 592-4385 mmcgeady@mcgeadysisneros.com E-mail: kkanda@mcgeadysisneros.com Atty. Reg. #: #12417; #34858 OATH OF DIRECTOR The undersigned solemnly swears (or affirms) that he will faithfully perform the duties of

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.

Kent D. Carlson

Address: 14119 Lexington Cir. Westminster, CO 80023

CERTIFICATE OF ELECTION

IT IS HEREBY CERTIFIED THAT

KENT D. CARLSON

WAS ELECTED TO SERVE UNTIL THE SECOND REGULAR ELECTION

AS A MEMBER OF THE BOARD OF DIRECTORS OF THE

LANTERNS METROPOLITAN DISTRICT NO. 2

AT THE ELECTION HELD TUESDAY, NOVEMBER 4, 2014.

Dated: 11-5-14

Signed:

Designated Election Official

THIS CERTIFICATE OF ELECTION IS MADE PURSUANT TO §§1-11-103(1), 1-13.5-1306 AND 32-1-305(5), C.R.S.



PUBLIC OFFICIAL POSITION SCHEDULE BOND

Bond No. <u>LSM0675493</u>

Item	1. Name of Insured:	Lanterns Metropolitan Distric	et No. 2	(the "Insured")
	•	c/o McGeady Sisneros, P.C. Denver, CO 80203	450 E. 17th Avenue, Suite 4	•
Item	Bond Period No. 1 S. Limit of liability doe no Company as to each		ontinuous Until Cancelled . ied in the Schedule of name	ed Positions or written acceptances
	INSURING AGREEME		on (the "Company"), in con	sideration of an agreed premium is
				rict No. 2
				scharge of the duties of any Public
	Official or Employee w	hile occupying any position	named in the schedule at	ached, or added thereto by written
				November 2014
	CONDITIONS			
	A Coverage, Automa	itic coverage is granted for the	ne first thirty days service of	any Public Official or Employee:

Provided, however, that the automatic coverage herein granted shall be void and of no effect from the beginning, unless during the said thirty day period the Obligee has requested in writing that the position be added to the schedule, and the Company by written acceptance has consented thereto.

(1) Occupying a newly created position identical with one listed in the schedule of positions, in an equal

Coverage on any position may be increased or decreased upon written request of the Obligee, if agreed to in writing by the Company.

- B. Cancellation. Cancellation hereunder is effective, and all liability under this bond shall cease as to future acts or omissions as to any Public Official or Employee on the date specified in written notice given by the Obligee to the Company as to any or all positions or Public Officials or Employees, or after thirty days' written notice given by the Company to the Obligee of its intent to cancel this bond in its entirety, or as to any Public Official or Employee or position.
- C. Liability. The Company's liability under this bond shall not be cumulative, and in no event shall the Company be called upon to pay as a loss hereunder in an amount greater than the largest single amount for which the position occupied by any Public Official or Employee causing such loss is or has been covered in the schedule, whether said loss occurred during any one or more years. The liability of the Company for any Public Official or Employee occupying more than one position at one time, or at different times, shall not exceed the largest amount of coverage specified for any single position occupied by said Public Official or Employee. The liability of the Company shall never exceed the amount in effect for the position when the act

amount.

of the Public Official or Employee causing the loss shall have occurred. In the event there are more Public Officials or Employees occupying the position covered in the schedule than are listed therein, the Company shall be liable for such proportion of the amount of coverage as the number of Public Officials or Employees listed bears to the number of Public Officials or Employees actually occupying the position when the loss occurred.

The Liability of the Company hereunder is subject to the terms and conditions of the following Riders, attached thereto:

None of the specifications of this Bond shall be altered or waived, except in writing by the Company executed by its President, Vice President, Secretary, Assistant Secretary or Treasurer.

Dated this 5th day of November, 2014.

RLI Insurance Company

Roy C. Die

Vice President

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

Schedule Number	Position Name	No.	Position Location	Bond Amount
1	Treasurer	1		\$ 5,000.00
2	Board Member 1	1		\$ 1,000.00
3	Board Member 2	1		\$ 1,000.00
4	Board Member 3	1		\$ 1,000.00
5	Board Member 4	1		\$ 1,000.00
6	Board Member 5	1		\$ 1,000.00
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POWER OF ATTORNEY

RLI Insurance Company

Bond No. __LSM0675493__

Know All Men by These Presents:

I hat the	RLI Insuranc	Company			_	
Illino	is and au	thorized and license	d to do business in all s	states and the Di	istrict of Colu	imbia does hereby make,
conctitute and ann	oint:	Roy C. Die	in the Cit	y of	Peoria	, State of
Illinois	- as	Vice President	, with full power :	and authority he	ereby conferre	ed upon him/her to sign,
execute acknowl	edge and deliver for a	and on its behalf as S	Surety, in general, any	and all bonds, u	undertakings,	and recognizances in an
amount not to e	exceed Five	e Hundred Thousan	d and 00/100	Dollars (\$ 500,000.	00) for any single
obligation, and sp	ecifically for the follo	owing described bone	d.			
Principal:	Lanterns Metropol	itan District No. 2				
Oplices	Same as Principal					
Type Rond:	Public Official Pos	ition Schedule Bond	1			
Pand Amounts	\$ 10,000,00					
Effective Date:	November 5, 2014					
Effective Date.						
The	RLI Insurance C	'ompany	further certifies	that the follow	wing is a tru	ue and exact copy of a
Resolution adopt	ed by the Board of Di	rectors of	RLI Insurance	Сотралу	, a	and now in force to-wit:
her anah athan	officers as the Roard	by the President, Se	ney or other obligation ecretary, any Assistant authorize. The President	it Secretary, 11 dent, any Vice	President, Se	ecretary, any Assistant
by such other Secretary, or undertakings undertakings,	officers as the Board the Treasurer may a in the name of the	by the President, Se I of Directors may appoint Attorneys i Company. The co y or other obligati	ecretary, any Assistan authorize. The Presid in Fact or Agents who proprate seal is not a	of Secretary, 11 dent, any Vice no shall have an necessary for t	president, So uthority to is he validity o	ecretary, any Assistant ssue bonds, policies or of any bonds, policies, such officer and the
by such other Secretary, or undertakings undertakings, corporate seal	officers as the Board the Treasurer may a in the name of the Powers of Attorne may be printed by f	by the President, Self of Directors may appoint Attorneys in Company. The column of th	ecretary, any Assistan authorize. The Presicin Fact or Agents whorporate seal is not nitions of the corporat	it Secretary, 11 dent, any Vice to shall have at necessary for t ion. The signs	president, So uthority to is he validity o ature of any	ssue bonds, policies or of any bonds, policies, such officer and the
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by such other Secretary, or undertakings undertakings, corporate seal IN WITNESS W its	officers as the Board the Treasurer may a in the name of the Powers of Attorne may be printed by f VHEREOF, the President V	oy the President, Sed of Directors may appoint Attorneys in Company. The color of t	authorize. The President Fact or Agents who proporate seal is not regions of the corporate seal is not regions of the corp	the Secretary, 11 dent, any Vice to shall have at the signal the s	aused these p	ssue bonds, policies or of any bonds, policies, such officer and the

DISTRICT COURT, COUNTY OF DOUGLAS, STATE OF COLORADO

4000 Justice Way, Suite 2009 Castle Rock, CO 80109 720-437-6200

IN THE MATTER OF LANTERNS METROPOLITAN DISTRICT NO. 2

MaryAnn M. McGeady

Kathryn S. Kanda

McGEADY SISNEROS, P.C.

450 E. 17th Avenue, Suite 400

Denver, Colorado 80203

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

E-mail:

mmcgeady@mcgeadysisneros.com

kkanda@mcgeadysisneros.com

Atty. Reg. #: #12417; #34858

▲ COURT USE ONLY ▲

Case Number: 2014CV30994

Div.: 1

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.

Lonny E. Phelps

Address: 6455 S. Netherland Way Centennial, CO 80016

STATE OF COLORADO

) ss.

COUNTY OF DEVILED)

WITNESS my hand and official seal.

AMISHA PADHIAR
Notary Public
State of Colorado
Notary ID 20144017958
Ily Commission Expires Apr 30, 2018

Notary Public

My commission expires: ___

DX 30th, 2015

CERTIFICATE OF ELECTION

IT IS HEREBY CERTIFIED THAT

LONNY E. PHELPS

WAS ELECTED TO SERVE UNTIL THE NEXT REGULAR ELECTION

AS A MEMBER OF THE BOARD OF DIRECTORS OF THE

LANTERNS METROPOLITAN DISTRICT NO. 2

AT THE ELECTION HELD TUESDAY, NOVEMBER 4, 2014.

Signed:

Designated Election Official

THIS CERTIFICATE OF ELECTION IS MADE PURSUANT TO §§1-11-103(1), 1-13.5-1306 AND 32-1-305(5), C.R.S.



PUBLIC OFFICIAL POSITION SCHEDULE BOND

Bond No. <u>LSM0675493</u>

Item 1.	Name of Insured:	Lanterns Metropolitan Distri		(the "leaved")
	Principal Address:	c/o McGeady Sisneros, P.C Denver, CO 80203	C. 450 E. 17th Avenue, Suite 400	(the "Insured")
Item 3.	Limit of liability doe	November 5, 2014 to Coes not exceed the sum specin Position there listed.	Continuous Until Cancelled . ified in the Schedule of named Positions or written	acceptances
I. IN	SURING AGREEME	ENT		
Th	e RLI Insurance C	ompany, an Illinois corpora	tion (the "Company"), in consideration of an agre	ed premium is
he	ld and firmly bound	unto	Lanterns Metropolitan District No. 2	
of	De	enver , CC), Obligee, for the faithful discharge of the duties	s of any Public
Of	ficial or Employee v	while occupying any position	n named in the schedule attached, or added the	reto by written
ac	ceptance of the Con	npany as to said position afte	er the5th day ofNovember,	2014
II. CO	ONDITIONS			

A. Coverage. Automatic coverage is granted for the first thirty days service of any Public Official or Employee: (1) Occupying a newly created position identical with one listed in the schedule of positions, in an equal amount.

Provided, however, that the automatic coverage herein granted shall be void and of no effect from the beginning, unless during the said thirty day period the Obligee has requested in writing that the position be added to the schedule, and the Company by written acceptance has consented thereto.

Coverage on any position may be increased or decreased upon written request of the Obligee, if agreed to in writing by the Company.

- B. Cancellation. Cancellation hereunder is effective, and all liability under this bond shall cease as to future acts or omissions as to any Public Official or Employee on the date specified in written notice given by the Obligee to the Company as to any or all positions or Public Officials or Employees, or after thirty days' written notice given by the Company to the Obligee of its intent to cancel this bond in its entirety, or as to any Public Official or Employee or position.
- C. Liability. The Company's liability under this bond shall not be cumulative, and in no event shall the Company be called upon to pay as a loss hereunder in an amount greater than the largest single amount for which the position occupied by any Public Official or Employee causing such loss is or has been covered in the schedule, whether said loss occurred during any one or more years. The liability of the Company for any Public Official or Employee occupying more than one position at one time, or at different times, shall not exceed the largest amount of coverage specified for any single position occupied by said Public Official or Employee. The liability of the Company shall never exceed the amount in effect for the position when the act

of the Public Official or Employee causing the loss shall have occurred. In the event there are more Public Officials or Employees occupying the position covered in the schedule than are listed therein, the Company shall be liable for such proportion of the amount of coverage as the number of Public Officials or Employees listed bears to the number of Public Officials or Employees actually occupying the position when the loss occurred.

The Liability of the Company hereunder is subject to the terms and conditions of the following Riders, attached thereto:

By _____ Roy C. Die

None of the specifications of this Bond shall be altered or waived, except in writing by the Company executed by its President, Vice President, Secretary, Assistant Secretary or Treasurer.

Dated this 5th day of November, 2014.

RLI Insurance Company

Vice President

SCHEDULE OF POSITIONS - EFFECTIVE THE __5th_ DAY OF __November____, __2014___.

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

Schedule Number	Position Name	No.	Position Location	Bond Amount
1	Treasurer	1		\$ 5,000.00
2	Board Member 1	1		\$ 1,000.00
3	Board Member 2	1		\$ 1,000.00
4	Board Member 3	1		\$ 1,000.00
5	Board Member 4	1	at a second	\$ 1,000.00
6	Board Member 5	1		\$ 1,000.00
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POWER OF ATTORNEY

RLI Insurance Company

Bond No. <u>LSM0675493</u>

Know All Men by These Presents:

That the	RLI Insurance C	ompany	, a corporation o	organized and ex	sisting under the la	aws of the State of
Illinoi	s and author	rized and licensed to	do business in all st	ates and the Dis	trict of Columbia	does hereby make,
constitute and app	oint:	Roy C. Die	in the City	of	Peoria	, State of
Illinois	, as	ce President	_, with full power at	nd authority her	eby conferred upo	on him/her to sign,
execute, acknowle	edge and deliver for and	on its behalf as Sure	ety, in general, any a	ınd all bonds, ur	ndertakings, and r	ecognizances in an
amount not to e	xceed Five H	undred Thousand a	nd 00/100	_ Dollars (\$ 500,000.00	_) for any single
obligation, and sp	ecifically for the following	ng described bond.				
Principal: _	Lanterns Metropolitan	District No. 2				
	Same as Principal					
J 1	Public Official Position					
Bond Amount:						
Effective Date:	November 5, 2014					
The	RLI Insurance Com	nonv	further certifies t	that the follow	ing is a true and	d exact copy of a
Pasalution adopte	ed by the Board of Direct	ors of	RLI Insurance C	lompany	and no	w in force to-wit:
	Ž					
	may be printed by facsi HEREOF, the		е Сотрапу	has cai	used these present	as to be executed by
ite Vice	President with	its corporate seal aff	ixed this 5th	day of Nove	ember 201	4
ATTEST: Cynthia S. Dohm	mPP. Coi		ANCE OU	Insurance Com		Vice President
On this C as said corporation.	RLI Insurance Compai	2014 before me, a _, who being by me and	Notary Public, perso e duly sworn, acknow Assista , and acknowledged	vledged that the ant Secretary said instrumen	y signed the abov resp,	e Power of Attorney bectively, of the said
Jacqueline M. Boo	Mouseline M. E	Soullex Notary Public	"OFFICIAL NOTAR" JACQUELINE M STATE OF COMMISSION EXPI	. SEAL" N. BOCKLER RES 01/14/18		

DISTRICT COURT, COUNTY OF DOUGLAS, STATE OF COLORADO

4000 Justice Way, Suite 2009 Castle Rock, CO 80109 720-437-6200

IN THE MATTER OF LANTERNS METROPOLITAN DISTRICT NO. 2

MaryAnn M. McGeady

Kathryn S. Kanda

McGEADY SISNEROS, P.C.

450 E. 17th Avenue, Suite 400

Denver, Colorado 80203

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

E-mail:

mmcgeady@mcgeadysisneros.com

kkanda@mcgeadysisneros.com

Atty. Reg. #: #12417; #34858

▲ COURT USE ONLY ▲

Case Number: 2014CV30994

Div.: 1

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.

Ryan L. Carlson

) ss.

Address: 14270 Inca St.

Westminster, CO 80023

STATE OF COLORADO

COUNTY OF

Subscribed and sworn to before me this

day of

2014

WITNESS my hand and official seal.

JENNY L MOORE
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID # 200004083852
MY COMMISSION EXPIRES FERRUARY NO. 2016

Notary Public

My commission expires:

08/09/2016

CERTIFICATE OF ELECTION

IT IS HEREBY CERTIFIED THAT

RYAN L. CARLSON

WAS ELECTED TO SERVE UNTIL THE NEXT REGULAR ELECTION

AS A MEMBER OF THE BOARD OF DIRECTORS OF THE

LANTERNS METROPOLITAN DISTRICT NO. 2

AT THE ELECTION HELD TUESDAY, NOVEMBER 4, 2014.

Dated: 11-5-14

Signed:

Designated Election Official

THIS CERTIFICATE OF ELECTION IS MADE PURSUANT TO §§1-11-103(1), 1-13.5-1306 AND 32-1-305(5), C.R.S.



PUBLIC OFFICIAL POSITION SCHEDULE BOND

Bond No. <u>LSM0675493</u>

Item 1.	Name of Insured:	Lanterns Metropolitan Distric	et No. 2		(the "Insured")
	Principal Address:	c/o McGeady Sisneros, P.C. Denver, CO 80203	450 E. 17th Avenue, Su	uite 400	(inc modred)
Item 3.	Limit of liability doe	November 5, 2014 to Control to Sum specification there listed.			en acceptances
Th he of Of	d and firmly bound of the bound	ompany, an Illinois corporate unto	Lanterns Metropolitan , Obligee, for the faithfu named in the schedule	District No. 2 ul discharge of the duti e attached, or added th	es of any Public nereto by written
II. CC	NDITIONS				

A. Coverage. Automatic coverage is granted for the first thirty days service of any Public Official or Employee: (1) Occupying a newly created position identical with one listed in the schedule of positions, in an equal amount.

Provided, however, that the automatic coverage herein granted shall be void and of no effect from the beginning, unless during the said thirty day period the Obligee has requested in writing that the position be added to the schedule, and the Company by written acceptance has consented thereto.

Coverage on any position may be increased or decreased upon written request of the Obligee, if agreed to in writing by the Company.

- B. Cancellation. Cancellation hereunder is effective, and all liability under this bond shall cease as to future acts or omissions as to any Public Official or Employee on the date specified in written notice given by the Obligee to the Company as to any or all positions or Public Officials or Employees, or after thirty days' written notice given by the Company to the Obligee of its intent to cancel this bond in its entirety, or as to any Public Official or Employee or position.
- C. Liability. The Company's liability under this bond shall not be cumulative, and in no event shall the Company be called upon to pay as a loss hereunder in an amount greater than the largest single amount for which the position occupied by any Public Official or Employee causing such loss is or has been covered in the schedule, whether said loss occurred during any one or more years. The liability of the Company for any Public Official or Employee occupying more than one position at one time, or at different times, shall not exceed the largest amount of coverage specified for any single position occupied by said Public Official or Employee. The liability of the Company shall never exceed the amount in effect for the position when the act

of the Public Official or Employee causing the loss shall have occurred. In the event there are more Public Officials or Employees occupying the position covered in the schedule than are listed therein, the Company shall be liable for such proportion of the amount of coverage as the number of Public Officials or Employees listed bears to the number of Public Officials or Employees actually occupying the position when the loss occurred.

The Liability of the Company hereunder is subject to the terms and conditions of the following Riders, attached thereto:

None of the specifications of this Bond shall be altered or waived, except in writing by the Company executed by its President, Vice President, Secretary, Assistant Secretary or Treasurer.

Dated this 5th day of November, 2014

RLI Insurance Company

Roy C. Die

Vice President

SCHEDULE OF POSITIONS - EFFECTIVE THE 5th DAY OF November , 2014

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

Schedule Number	Position Name	No.	Position Location	Bond Amount
1	Treasurer	1		\$ 5,000.00
2	Board Member 1	1		\$ 1,000.00
3	Board Member 2	1		\$ 1,000.00
4	Board Member 3	1		\$ 1,000.00
5	Board Member 4	1		\$ 1,000.00
6	Board Member 5	1		\$ 1,000.00
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POWER OF ATTORNEY

RLI Insurance Company

Bond No. <u>LSM0675493</u>

Know All Men by These Presents:

That the		RLI Insurance Co	mpany	, a corporatio	on organized and e	xisting under	the laws of the State of
	Illinois	, and authori	zed and licensed t	to do business in al	l states and the Di	strict of Colu	mbia does hereby make,
constitute	e and appoint:	R	ov C. Die	in the C	City of	Peoria	, State of
	Illinois	, asVice	e President	, with full power	r and authority he	reby conferre	ed upon him/her to sign,
execute,	acknowledge	and deliver for and o	n its behalf as Su	rety, in general, an	y and all bonds, u	ındertakings,	and recognizances in an
amount	not to exceed	Five Hu	ndred Thousand	and 00/100	Dollars (\$ 500,000.	00) for any single
		cally for the following					
Principa	al: _Lan	terns Metropolitan	District No. 2				
Obligee:		ie as Principal					
Type Bo	ond: Pub						
Bond Ar	mount: \$_1						
Effective	e Date: Nov	ember 5, 2014					
The	R	LI Insurance Comp	any	further certifie	es that the follow	ving is a tru	ne and exact copy of a
Resolution	on adopted by	the Board of Director	rs of	RLI Insurance	e Company	, a	nd now in force to-with
		be printed by facsing		as Company	has ca	used these n	resents to be executed by
IN WIII	NESS WHER	dent with its	RLI Insuran	Fixed this 5th	day of Nov	ambar	2014
ATTES	T: (India)	. Dam	Manager Hall	SEAL RI	LI Insurance Con		Vice President
Cynthia S	U	Assist f <u>November</u> , 2	ant Secretary	CLIN O Same			
and as	Cynthi	a S. Dohm Vice President	, who being by m	ne duly sworn, ackı Ass	nowledged that the istant Secretary	ey signed the	above Power of Attorney, respectively, of the said voluntary act and deed of
Jacquelir	ne M. Bockler	isline M. E	Notary Public	PUBLIC JACQUELIN	IAL SEAL" JE M. BOCKLER EXPIRES 01/14/18		

DISTRICT COURT, COUNTY OF DOUGLAS, STATE **OF COLORADO** 4000 Justice Way, Suite 2009 Castle Rock, CO 80109 720-437-6200 IN THE MATTER OF LANTERNS METROPOLITAN **DISTRICT NO. 2** MaryAnn M. McGeady **▲** COURT USE ONLY **▲** Kathryn S. Kanda Case Number: 2014CV30994 McGEADY SISNEROS, P.C. 450 E. 17th Avenue, Suite 400 Denver, Colorado 80203 Div.: 1 Ctrm.: Phone: (303) 592-4380 Fax: (303) 592-4385 E-mail: mmcgeady@mcgeadysisneros.com kkanda@mcgeadysisneros.com Atty. Reg. #: #12417; #34858 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. Scott I. Carlson Address: 13500 York St. Thornton, CO 80241 STATE OF COLORADO COUNTY OF AJAMJ Subscribed and sworn to before me this // day of November, 2014. WITNESS my hand and official seal. ROBERT C. SORENSEN Notary Public **NOTARY PUBLIC**

My commission expires: 10-24-2017

STATE OF COLORADO

NOTARY ID 19934014135 MY COMMISSION EXPIRES OCTOBER 24, 2017

CERTIFICATE OF ELECTION

IT IS HEREBY CERTIFIED THAT

SCOTT L. CARLSON

WAS ELECTED TO SERVE UNTIL THE SECOND REGULAR ELECTION

AS A MEMBER OF THE BOARD OF DIRECTORS OF THE

LANTERNS METROPOLITAN DISTRICT NO. 2

AT THE ELECTION HELD TUESDAY, NOVEMBER 4, 2014.

Dated: __//- 5 - 7 Y

Signed:

Designated Election Official

THIS CERTIFICATE OF ELECTION IS MADE PURSUANT TO §§1-11-103(1), 1-13.5-1306 AND 32-1-305(5), C.R.S.



PUBLIC OFFICIAL POSITION SCHEDULE BOND

Bond No. <u>LSM0675493</u>

Item 1.	Name of Insured:	Lanterns Metropolitan Distri	ct No. 2			(the "Insured")
	E	c/o McGeady Sisneros, P.C Denver, CO 80203	. 450 E. 17th	Avenue, Suite	400	(ind masses)
Item 3.	Limit of liability does	ovember 5, 2014 to to to s not exceed the sum speci Position there listed.				written acceptances
Th he of Of	ld and firmly bound u	NT ompany, an Illinois corpora into, CO vhile occupying any position pany as to said position after	Lanterns M _, Obligee, fo n named in th	etropolitan Di r the faithful o ne schedule a	strict No. 2 discharge of the attached, or adde	duties of any Publiced thereto by writter
II. CC	ONDITIONS					

A. Coverage. Automatic coverage is granted for the first thirty days service of any Public Official or Employee:(1) Occupying a newly created position identical with one listed in the schedule of positions, in an equal

amount.

Provided, however, that the automatic coverage herein granted shall be void and of no effect from the beginning, unless during the said thirty day period the Obligee has requested in writing that the position be added to the schedule, and the Company by written acceptance has consented thereto.

Coverage on any position may be increased or decreased upon written request of the Obligee, if agreed to in writing by the Company.

- B. Cancellation. Cancellation hereunder is effective, and all liability under this bond shall cease as to future acts or omissions as to any Public Official or Employee on the date specified in written notice given by the Obligee to the Company as to any or all positions or Public Officials or Employees, or after thirty days' written notice given by the Company to the Obligee of its intent to cancel this bond in its entirety, or as to any Public Official or Employee or position.
- C. Liability. The Company's liability under this bond shall **not** be cumulative, and in no event shall the Company be called upon to pay as a loss hereunder in an amount greater than the largest single amount for which the position occupied by any Public Official or Employee causing such loss is or has been covered in the schedule, whether said loss occurred during any one or more years. The liability of the Company for any Public Official or Employee occupying more than one position at one time, or at different times, shall **not** exceed the largest amount of coverage specified for any single position occupied by said Public Official or Employee. The liability of the Company shall **never exceed** the amount in effect for the position when the act

of the Public Official or Employee causing the loss shall have occurred. In the event there are more Public Officials or Employees occupying the position covered in the schedule than are listed therein, the Company shall be liable for such proportion of the amount of coverage as the number of Public Officials or Employees listed bears to the number of Public Officials or Employees actually occupying the position when the loss occurred.

The Liability of the Company hereunder is subject to the terms and conditions of the following Riders, attached thereto:

By.

Roy C. Die

None of the specifications of this Bond shall be altered or waived, except in writing by the Company executed by its President, Vice President, Secretary, Assistant Secretary or Treasurer.

Dated this 5th day of November, 2014.

RLI Insurance Company

Vice President

SCHEDULE OF POSITIONS - EFFECTIVE THE ______ 5th___ DAY OF _____ November _____ 2014___.

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

Schedule Number	Position Name	No.	Position Location	Bond Amount
1	Treasurer	1		\$ 5,000.00
2	Board Member 1	1		\$ 1,000.00
3	Board Member 2	1		\$ 1,000.00
4	Board Member 3	1		\$ 1,000.00
5	Board Member 4	1		\$ 1,000.00
6	Board Member 5	1		\$ 1,000.00
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POWER OF ATTORNEY

RLI Insurance Company

Bond No. <u>LSM0675493</u>

Know All Men by These Presents:

		RLI Insurance Co	mpany	, a corporation orga	nized and existing u	inder the laws of the State of
	Illinois	, and authori	zed and licensed to d	lo business in all states	s and the District of	Columbia does hereby make,
constitute	and appoint:	R	ov C. Die	in the City of	Pe	oria , State of
	Illinois	as Vice	President ,	with full power and a	authority hereby cor	iferred upon him/her to sign,
execute.	acknowledge	and deliver for and o	n its behalf as Surety	y, in general, any and	all bonds, undertaki	ngs, and recognizances in an
amount 1	not to exceed	iFive Hu	ndred Thousand and	d 00/100 D	Oollars (<u>\$ 500.</u>	000.00) for any single
obligation	n, and specific	cally for the following	described bond.			
Principa						
Obligee:	San	ie as Principal				
Type Bo	nd: Pub	lic Official Position	Schedule Bond			
Bond Ar	mount: \$_1	0,000.00				
Effective	e Date: Nov	ember 5, 2014				
The	R	LI Insurance Comp	any	further certifies that	the following is	a true and exact copy of a
Resolutio	on adopted by	the Board of Directo	rs of	RLI Insurance Com	pany	, and now in force to-wit:
corpor	rate seal may	be printed by facsin	nile."			any such officer and the
IN WIT	NESS WHER	EOF, the	RLI Insurance	Сотралу	nas caused the	ese presents to be executed by
its	Vice Presi	dent with it	s corporate seal affix	ted this 5th day	of November	
			minn.	ANCE COM		
ATTEST	т:	<u>~</u>	A CO	RLI Inst	urance Company	
ATTEST	TE Caldred	Dam .	S	EAL	1	- Ju
Cynthia S	Colors S. Dohm		rant Secretary	EAL Roy C. D.	ig J	Vice President
Cynthia S	Sth. day o	f November , 2	2014 before me, a N	EAL Roy C. D. Otary Public, personal	iy appeared	Roy C. Die
Cynthia S On this	S. Dohm Sth_day o	f November, 2	2014 before me, a N	Roy C. De Roy Public, personali duly sworn, acknowled	ty appeareddged that they signe	Roy C. Die d the above Power of Attorney
Cynthia S On this and	S. Dohm Sth_day o	f November, 2 a S. Dohm	2014 before me, a N , who being by me of	ROY C. D. Assistant S.	by appeared	Roy C. Die d the above Power of Attorney , respectively, of the said
Cynthia S On this and as	S. Dohm Sth_day o	f November, 2 a S. Dohm	2014 before me, a N , who being by me of	ROY C. D. Assistant S.	by appeared	Roy C. Die d the above Power of Attorney
Cynthia S On this and as	S. John Sth day of Cynthic RLI poration.	f November, 2 a S. Dohm	2014 before me, a N , who being by me of and	ROY C. D. Assistant S.	ly appeared	Roy C. Die d the above Power of Attorney , respectively, of the said