| DISTRICT COURT, COUNTY OF DOUGLAS, STATE<br>OF COLORADO<br>4000 Justice Way, Suite 2009<br>Castle Rock, CO 80109<br>720-437-6200 |  |
|--|--|
| IN THE MATTER OF LANTERNS METROPOLITAN<br>DISTRICT NO. 3   |  |
| MaryAnn M. McGeady<br>Kathryn S. Kanda<br>McGEADY SISNEROS, P.C.<br>450 E. 17 <sup>th</sup> Avenue, Suite 400                    | ▲ COURT USE ONLY ▲<br>Case Number: 2014CV30995 |
| Denver, Colorado 80203<br>Phone: (303) 592-4380<br>Fax: (303) 592-4385   | Div.: 1 Ctrm.:                                 |
| E-mail: mmcgeady@mcgeadysisneros.com<br>kkanda@mcgeadysisneros.com<br>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.

O Clay F. Carlson Address: 13536 York St. Thornton, CO 80241 STATE OF COLORADO ) ss. dan COUNTY OF ) day of , 2014. Subscribed and sworn to before me this WITNESS my hand and official seal. JENNY L MOORE NOTARY PUBLIC STATE OF COLORADO NOTARY ID # 200004003852 MY COMMERSION EXPIRES FEBRUARY 09, 2016 Notary Public 2016 My commission expires:

# **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. 3**

#### AT THE ELECTION HELD TUESDAY, NOVEMBER 4, 2014.

Dated: 11-5-14

Signed: Cray

**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 P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

## PUBLIC OFFICIAL POSITION SCHEDULE BOND

Bond No. LSM0675495

Item 1. Name of Insured: Lanterns Metropolitan District No. 3

(the "Insured")

Principal Address: c/o McGeady Sisneros, P.C. 450 E. 17th Avenue, Suite 400 Denver, CO 80203

Item 2. Bond Period <u>November 5, 2014</u> to <u>Continuous Until Cancelled</u>. Item 3. Limit of liability does not exceed the sum specified in the Schedule of named Positions or written acceptances by the Company as to each Position there listed.

#### 1. INSURING AGREEMENT

The RLI Insurance Company, an Illinois corporation (the "Company"), in consideration of an agreed premium is held and firmly bound unto \_\_\_\_\_\_ Lanterns Metropolitan District No. 3 Denver \_\_\_\_\_, CO, Obligee, for the faithful discharge of the duties of any Public of Official or Employee while occupying any position named in the schedule attached, or added thereto by written acceptance of the Company as to said position after the \_\_\_\_\_5th \_\_\_ day of \_\_\_\_\_November \_\_\_\_, \_\_\_\_2014 \_\_\_\_

#### **II. CONDITIONS**

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 \_\_\_\_\_\_ day of \_\_\_\_\_\_, \_\_\_\_2014\_\_\_.

By\_\_ Roy C. Die Vice President

#### RLI Insurance Company

## SCHEDULE OF POSITIONS - EFFECTIVE THE \_\_\_\_\_\_\_ DAY OF \_\_\_\_\_\_\_, \_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_.

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

| Schedule<br>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 |
| 7                  |                |     |                   |             |
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OFF 0102 (2/93)



RL1 Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

## POWER OF ATTORNEY RLI Insurance Company

Bond No. LSM0675495

#### Know All Men by These Presents:

| That the   |               | RLI Insu  | irance Company               | , a corporation organize         | ed and existing under the  | laws of the State of  |
|------------|---------------|-----------|------------------------------|----------------------------------|----------------------------|-----------------------|
|            | Illinois      |           | and authorized and licensed  | to do business in all states and | d the District of Columb   | ia does hereby make,  |
| constitute | and appoint:  |           | Roy C. Die                   | in the City of                   | Peoria                     | , State of            |
| Illinois   |               | , as      | Vice President               | , with full power and authors    | ority hereby conferred u   | pon him/her to sign,  |
| execute, a | acknowledge a | nd delive | r for and on its behalf as S | urety, in general, any and all b | oonds, undertakings, and   | l recognizances in an |
|            |               |           | Five Hundred Thousand        |                                  | ars ( <u>\$ 500,000.00</u> | ) for any single      |
|            |               |           | e following described bond   |                                  |                            |                       |

| Principal:      | Lanterns Metropolitan District No. 3   |
|-----------------|--|
| Obligee:        | Same as Principal                      |
| Type Bond:      | Public Official Position Schedule Bond |
| Bond Amount:    | \$ 10,000.00                           |
| Effective Date: | November 5, 2014                       |

| The          | RLI Insurance Company                | further | certifies | that | the         | following | is a | a true | and   | exact    | сору   | 01   | а |
|--------------|--------------------------------------|---------|-----------|------|-------------|-----------|------|--------|-------|----------|--------|------|---|
| Resolution a | adopted by the Board of Directors of | RLI In  | surance   | Com  | <u>pany</u> | /         | _    | _, and | l nov | v in for | ce to- | wit: |   |

"All bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or Agents who shall have authority to issue bonds, policies or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile."

| IN WITNE | SS WHEREOF, the | RLI Insurance Compan                 | y   |          | has caused these p | presents to be executed by |
|----------|-----------------|--------------------------------------|-----|----------|--------------------|----------------------------|
| its      | Vice President  | with its corporate seal affixed this | 5th | _ day of | November,          |                            |

.....

| ATTEST:  | RLI Insurance Company  |
|--|--|
| Cynthia S. Tohm Assistant Secretary                                  | SEAL Roy C. Die Vice President   |
| and <u>Cynthia S. Dohm</u> , who being by r<br>as Vice President and | a Notary Public, personally appeared <u>Roy C. Die</u><br>ne duly sworn, acknowledged that they signed the above Power of Attorney<br><u>Assistant Secretary</u> , respectively, of the said<br>, and acknowledged said instrument to be the voluntary act and deed of |
| said corporation.  |  |
| Jacqueline M. Bockler Notary Public                                  | "OFFICIAL SEAL"<br>PULL<br>STATE OF<br>LINGS COMMISSION EXPIRES 01/14/18   |

A0006104

| DISTRICT COURT, COUNTY OF DOUGLAS, STATE<br>OF COLORADO<br>4000 Justice Way, Suite 2009<br>Castle Rock, CO 80109 |                          |
|--|--------------------------|
| 720-437-6200   |                          |
| IN THE MATTER OF LANTERNS METROPOLITAN<br>DISTRICT NO. 3   |                          |
| MaryAnn M. McGeady   | ▲ COURT USE ONLY ▲       |
| Kathryn S. Kanda<br>McGEADY SISNEROS, P.C.   | Case Number: 2014CV30995 |
| 450 E. 17 <sup>th</sup> Avenue, Suite 400  |                          |
| Denver, Colorado 80203   | Div.: 1 Ctrm.:           |
| Phone: (303) 592-4380  | Div.: 1 Ctrm.:           |
| 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.

Lonny E. Phelps

Address: 6455 S. Netherland Way Centennial, CO 80016

| STATE OF COLORADO )  |  |
|--|--|
| COUNTY OF <u>Deriver</u> )<br>Subscribed and sworn to before me this             | ss.<br>25 <sup>th</sup> day of <u>November</u> , 2014. |
| WITNESS my hand and official   | seal.  |
|  | Amount   |
| AMISHA PADHIAR<br>Notary Public  | Notary Public  |
| State of Colorado<br>Notary ID 20144017958<br>My Commission Expires Apr 30, 2018 | My commission expires: Apr. 30th 2018                  |

# **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. 3**

AT THE ELECTION HELD TUESDAY, NOVEMBER 4, 2014.

Dated: 11-5-14

Signed: Marze

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** P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683 Phone: (309)692-1000 Fax: (309)683-1610

## PUBLIC OFFICIAL POSITION SCHEDULE BOND

Bond No. LSM0675495

Item 1. Name of Insured: Lanterns Metropolitan District No. 3

(the "Insured")

Principal Address: c/o McGeady Sisneros, P.C. 450 E. 17th Avenue, Suite 400 Denver, CO 80203

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 Positions or written acceptances by the Company as to each Position there listed.

#### I. INSURING AGREEMENT

The RLI Insurance Company, an Illinois corporation (the "Company"), in consideration of an agreed premium is held and firmly bound unto \_\_\_\_\_\_ Lanterns Metropolitan District No. 3 Denver \_\_\_\_\_\_, CO, Obligee, for the faithful discharge of the duties of any Public of

Official or Employee while occupying any position named in the schedule attached, or added thereto by written acceptance of the Company as to said position after the \_\_\_\_\_5th \_\_\_\_day of \_\_\_\_\_November \_\_\_\_\_2014 \_\_\_\_

#### **II. CONDITIONS**

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 \_\_\_\_\_\_ day of \_\_\_\_\_\_ November \_\_\_\_, \_\_\_\_2014 \_\_\_\_.

By\_ Roy C. Die Vice President

#### RLI Insurance Company

#### SCHEDULE OF POSITIONS - EFFECTIVE THE \_\_\_\_\_\_ 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<br>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 <sup>11</sup>   | \$ 1,000.00 |
| 5                  | Board Member 4 | 1   |                   | \$ 1,000.00 |
| 6                  | Board Member 5 | 1   |                   | \$ 1,000.00 |
| 7                  |                |     |                   |             |
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OFF 0102 (2/93)

10.0



RLI Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

## POWER OF ATTORNEY RLI Insurance Company

Bond No. \_\_LSM0675495\_\_

#### Know All Men by These Presents:

| RLI Insu            | игалсе Сотралу                               | , a corporatio   | n organized and  | existing under the  | laws of the State of |
|---------------------|--|--|--|---------------------|----------------------|
| ois, a              | and authorized and lic                       | ensed to do business in al   | states and the I   | District of Columbi | a does hereby make,  |
| point:              | Roy C. Die                                   | in the C   | ity of   | Peoria              | , State of           |
| s, as               |  |  |  |                     |                      |
| ledge and delive    | r for and on its behalf                      | f as Surety, in general, an  | y and all bonds,   | undertakings, and   | recognizances in an  |
| exceed              | Five Hundred Tho                             | usand and 00/100   | Dollars (  | \$ 500,000.00       | ) for any single     |
| pecifically for the | e following described                        | bond.  |  |                     |                      |
|                     | pis, as, as, as, ledge and deliver<br>exceed | point:Roy C. Die<br>, asVice President<br>ledge and deliver for and on its behal<br>exceedFive Hundred Tho | bis, and authorized and licensed to do business in all<br>point: Roy C. Die in the C<br>, as Vice President, with full power<br>ledge and deliver for and on its behalf as Surety, in general, and | bis                 | pois                 |

| Principal:      | Lanterns Metropolitan District No. 3   |
|-----------------|--|
| Obligee:        | Same as Principal                      |
| Type Bond:      | Public Official Position Schedule Bond |
| Bond Amount:    | \$ 10,000.00                           |
| Effective Date: | November 5, 2014                       |
|                 |  |

| The RLI Insurance Company                       | further certifies that the following is | s a true and exact copy of a |
|---|---|------------------------------|
| Resolution adopted by the Board of Directors of | <b>RLI Insurance Company</b>            | , and now in force to-wit:   |

"All bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or Agents who shall have authority to issue bonds, policies or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile."

| ΓN  | WITNESS WHEREOF, the | RLI Insurance Company                | y   |          | has caused thes | e presents to be exe | cuted by |
|-----|----------------------|--------------------------------------|-----|----------|-----------------|----------------------|----------|
| its | Vice President       | with its corporate seal affixed this | 5th | _ day of | November        |                      |          |

| ATTEST:                                     | SUNTE URANC             | RLI Insurance Comp                | any                                |
|---|-------------------------|-----------------------------------|------------------------------------|
| (Joseph Laight)                             |                         | AL                                | ? On                               |
| Cynthia S, Iohm Ass                         | istant Secretary        | OIS ROY C. Die                    | Vice President                     |
| On this <u>5th</u> day of <u>November</u> , | 2014 before me, a Nota  | ry Public, personalty appeared    | Roy C. Die                         |
| and Cynthia S. Dohm                         | , who being by me duly  | y sworn, acknowledged that they s | signed the above Power of Attorney |
| as Vice President                           | and                     | Assistant Secretary               | , respectively, of the said        |
| RLI Insurance Compa                         | ny, and                 | acknowledged said instrument t    | o be the voluntary act and deed of |
| said corporation.                           |                         |                                   |                                    |
| Jacqueline M. E                             | Soller<br>Notary Public | "OFFICIAL SEAL"                   |                                    |

| DISTRICT COURT, COUNTY OF DOUGLAS, STATE<br>OF COLORADO<br>4000 Justice Way, Suite 2009<br>Castle Rock, CO 80109<br>720-437-6200 |  |
|--|--|
| IN THE MATTER OF LANTERNS METROPOLITAN<br>DISTRICT NO. 3   |  |
| MaryAnn M. McGeady<br>Kathryn S. Kanda<br>McGEADY SISNEROS, P.C.<br>450 E. 17 <sup>th</sup> Avenue, Suite 400                    | ▲ COURT USE ONLY ▲<br>Case Number: 2014CV30995 |
| Denver, Colorado 80203<br>Phone: (303) 592-4380<br>Fax: (303) 592-4385   | Div.: 1 Ctrm.:                                 |
| E-mail: mmcgeady@mcgeadysisneros.com<br>kkanda@mcgeadysisneros.com<br>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.

O Clay F. Carlson Address: 13536 York St. Thornton, CO 80241 STATE OF COLORADO ) ss. dan COUNTY OF ) day of , 2014. Subscribed and sworn to before me this WITNESS my hand and official seal. JENNY L MOORE NOTARY PUBLIC STATE OF COLORADO NOTARY ID # 200004003852 MY COMMERSION EXPIRES FEBRUARY 09, 2016 Notary Public 2016 My commission expires:

# **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. 3**

#### AT THE ELECTION HELD TUESDAY, NOVEMBER 4, 2014.

Dated: 11-5-14

Signed: Cray

**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 P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

## PUBLIC OFFICIAL POSITION SCHEDULE BOND

Bond No. LSM0675495

Item 1. Name of Insured: Lanterns Metropolitan District No. 3

(the "Insured")

Principal Address: c/o McGeady Sisneros, P.C. 450 E. 17th Avenue, Suite 400 Denver, CO 80203

Item 2. Bond Period <u>November 5, 2014</u> to <u>Continuous Until Cancelled</u>. Item 3. Limit of liability does not exceed the sum specified in the Schedule of named Positions or written acceptances by the Company as to each Position there listed.

#### 1. INSURING AGREEMENT

The RLI Insurance Company, an Illinois corporation (the "Company"), in consideration of an agreed premium is held and firmly bound unto \_\_\_\_\_\_ Lanterns Metropolitan District No. 3 Denver \_\_\_\_\_, CO, Obligee, for the faithful discharge of the duties of any Public of Official or Employee while occupying any position named in the schedule attached, or added thereto by written acceptance of the Company as to said position after the \_\_\_\_\_5th \_\_\_ day of \_\_\_\_\_November \_\_\_\_, \_\_\_\_2014 \_\_\_\_

#### **II. CONDITIONS**

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 \_\_\_\_\_\_ day of \_\_\_\_\_\_, \_\_\_\_2014\_\_\_.

By\_\_ Roy C. Die Vice President

#### RLI Insurance Company

## SCHEDULE OF POSITIONS - EFFECTIVE THE \_\_\_\_\_\_\_ DAY OF \_\_\_\_\_\_\_, \_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_.

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

| Schedule<br>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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OFF 0102 (2/93)



RL1 Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

## POWER OF ATTORNEY RLI Insurance Company

Bond No. LSM0675495

#### Know All Men by These Presents:

| That the   |               | RLI Insu  | irance Company               | , a corporation organize         | ed and existing under the  | laws of the State of  |
|------------|---------------|-----------|------------------------------|----------------------------------|----------------------------|-----------------------|
|            | Illinois      |           | and authorized and licensed  | to do business in all states and | d the District of Columb   | ia does hereby make,  |
| constitute | and appoint:  |           | Roy C. Die                   | in the City of                   | Peoria                     | , State of            |
|            | Illinois      | , as      | Vice President               | , with full power and authors    | ority hereby conferred u   | pon him/her to sign,  |
| execute, a | acknowledge a | nd delive | r for and on its behalf as S | urety, in general, any and all b | oonds, undertakings, and   | l recognizances in an |
|            |               |           | Five Hundred Thousand        |                                  | ars ( <u>\$ 500,000.00</u> | ) for any single      |
|            |               |           | e following described bond   |                                  |                            |                       |

| Principal:      | Lanterns Metropolitan District No. 3   |
|-----------------|--|
| Obligee:        | Same as Principal                      |
| Type Bond:      | Public Official Position Schedule Bond |
| Bond Amount:    | \$ 10,000.00                           |
| Effective Date: | November 5, 2014                       |

| The          | RLI Insurance Company                | further | certifies | that | the         | following | is a | a true | and   | exact    | сору   | 01   | а |
|--------------|--------------------------------------|---------|-----------|------|-------------|-----------|------|--------|-------|----------|--------|------|---|
| Resolution a | adopted by the Board of Directors of | RLI In  | surance   | Com  | <u>pany</u> | /         | _    | _, and | l nov | v in for | ce to- | wit: |   |

"All bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or Agents who shall have authority to issue bonds, policies or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile."

| IN WITNE | SS WHEREOF, the | RLI Insurance Compan                 | y   |          | has caused these p | presents to be executed by |
|----------|-----------------|--------------------------------------|-----|----------|--------------------|----------------------------|
| its      | Vice President  | with its corporate seal affixed this | 5th | _ day of | November,          |                            |

.....

| ATTEST:  | RLI Insurance Company  |
|--|--|
| Cynthia S. Tohm Assistant Secretary                                  | SEAL Roy C. Die Vice President   |
| and <u>Cynthia S. Dohm</u> , who being by r<br>as Vice President and | a Notary Public, personally appeared <u>Roy C. Die</u><br>ne duly sworn, acknowledged that they signed the above Power of Attorney<br><u>Assistant Secretary</u> , respectively, of the said<br>, and acknowledged said instrument to be the voluntary act and deed of |
| said corporation.  |  |
| Jacqueline M. Bockler Notary Public                                  | "OFFICIAL SEAL"<br>PULL<br>STATE OF<br>LINGS COMMISSION EXPIRES 01/14/18   |

A0006104

| DISTRICT COURT, COUNTY OF DOUGLAS, STATE<br>OF COLORADO<br>4000 Justice Way, Suite 2009<br>Castle Rock, CO 80109<br>720-437-6200 |              |             |
|--|--------------|-------------|
| IN THE MATTER OF LANTERNS METROPOLITAN<br>DISTRICT NO. 3   |              |             |
| MaryAnn M. McGeady   | COURT        | USE ONLY    |
| Kathryn S. Kanda<br>McGEADY SISNEROS, P.C.<br>450 E. 17 <sup>th</sup> Avenue, Suite 400  | Case Number: | 2014CV30995 |
| Denver, Colorado 80203<br>Phone: (303) 592-4380<br>Fax: (303) 592-4385   | Div.: 1      | Ctrm.:      |
| E-mail: mmcgeady@mcgeadysisneros.com<br>kkanda@mcgeadysisneros.com<br>Atty. Reg. #: #12417; #34858                               |              |             |
|  | 1            |             |

**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.

Kent D. Carlson Address: 14119 Lexington Cir. Westminster, CO 80023 STATE OF COLORADO ) ) ss. 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 # 200004003852 mil Notary Public 08/09/2016 MY COMMISSION EXPIRES ( ENRUMRY 09, 2016 My commission expires:

# 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. 3**

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.

## RLI®

RLI Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

## PUBLIC OFFICIAL POSITION SCHEDULE BOND

Bond No. LSM0675495

Item 1. Name of Insured: Lanterns Metropolitan District No. 3

(the "Insured")

Principal Address: c/o McGeady Sisneros, P.C. 450 E. 17th Avenue, Suite 400 Denver, CO 80203

Item 2. Bond Period <u>November 5, 2014</u> to <u>Continuous Until Cancelled</u>.

Item 3. Limit of liability does not exceed the sum specified in the Schedule of named Positions or written acceptances by the Company as to each Position there listed.

#### I. INSURING AGREEMENT

The **RLI Insurance Company**, an Illinois corporation (the "Company"), in consideration of an agreed premium is held and firmly bound unto \_\_\_\_\_\_\_ Lanterns Metropolitan District No. 3 \_\_\_\_\_\_ of \_\_\_\_\_\_ Denver \_\_\_\_\_\_ CO , Obligee, for the faithful discharge of the duties of any Public

of \_\_\_\_\_\_\_ Denver\_\_\_\_\_\_, CO, Obligee, for the faithful discharge of the duties of any Public Official or Employee while occupying any position named in the schedule attached, or added thereto by written acceptance of the Company as to said position after the \_\_\_\_5th\_\_\_ day of \_\_\_\_\_November \_\_\_\_\_, 2014\_\_\_\_.

#### **II. CONDITIONS**

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 Obligee of its intent to cancel this bond in its entirety, or as to any Public Official or Employee 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 \_\_\_\_\_\_ day of \_\_\_\_\_\_ 2014\_\_\_\_

.

By\_ Vice President Roy C. Die

#### RLI Insurance Company

### SCHEDULE OF POSITIONS - EFFECTIVE THE \_\_\_\_\_\_ 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<br>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 |
| 7                  |                |     |                   |             |
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RLI Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

## POWER OF ATTORNEY RLI Insurance Company

#### Know All Men by These Presents:

| That the   | F                 | RLI Insurance Company                  | , a corporation organized ar        | nd existing under the l | aws of the State of |
|------------|-------------------|--|-------------------------------------|-------------------------|---------------------|
|            | Illinois          | , and authorized and licensed to       | o do business in all states and the | District of Columbia    | does hereby make,   |
| constitute | and appoint:      | Roy C. Die                             | in the City of                      | Peoria                  | , State of          |
|            | Illinois          | , as Vice President                    | _, with full power and authority    |                         |                     |
| execute, a | acknowledge an    | d deliver for and on its behalf as Sur | ety, in general, any and all bond   | s, undertakings, and r  | ecognizances in an  |
| amount r   | not to exceed     | Five Hundred Thousand a                | and 00/100 Dollars (                | \$ 500,000.00           | _) for any single   |
| obligation | n, and specifical | y for the following described bond.    |                                     |                         |                     |

| Principal:      | Lanterns Metropolitan District No. 3   |  |
|-----------------|--|--|
| Obligee:        | Same as Principal                      |  |
| Type Bond:      | Public Official Position Schedule Bond |  |
| Bond Amount:    | \$ 10,000.00                           |  |
| Effective Date: | November 5, 2014                       |  |
|                 |  |  |

| The        | RLI Insurance Company                | further | certifies | that | the  | following | is a | true   | and   | exact    | сору   | 01   | а |
|------------|--------------------------------------|---------|-----------|------|------|-----------|------|--------|-------|----------|--------|------|---|
| Resolution | adopted by the Board of Directors of | RLI In  | surance   | Com  | рапу | /         |      | _, and | d nov | v in for | ce to- | wit: |   |

"All bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or Agents who shall have authority to issue bonds, policies or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile."

| IN V  | WITNESS WHEREOF, the | RLI Insurance Company                    |          | has caused the | se presents to be executed | 1 by |
|-------|----------------------|--|----------|----------------|----------------------------|------|
| its _ | Vice President       | with its corporate seal affixed this5th0 | day of _ | November       |                            |      |

| ATTEST:   | RLI Insurance Company   |
|---|---|
| (undeleditoria)   | SEAL  |
| Cynthia S. Ipphin Assistant Secretary                             | Roy C. Die Vice President   |
| On this <u>5th</u> day of <u>November</u> , <u>2014</u> before me | e, a Notary Public, personally appeared Roy C. Die  |
| and Cynthia S. Dohm, who being by                                 | me duly sworn, acknowledged that they signed the above Power of Attorney                      |
| as Vice President and   |   |
| RLI Insurance Company   | and acknowledged said instrument to be the voluntary act and deed of                          |
| said corporation.   |   |
| Jacqueline M. Bockler<br>Notary Public                            | "OFFICIAL SEAL"<br>PUBLIC<br>SACQUELINE M. BOCKLER<br>ILLINOIS<br>COMMISSION EXPIRES 01/14/18 |
|   |   |

| DISTRICT COURT, COUNTY OF DOUGLAS, STATE<br>OF COLORADO<br>4000 Justice Way, Suite 2009<br>Castle Rock, CO 80109<br>720-437-6200 |                          |
|--|--------------------------|
| IN THE MATTER OF LANTERNS METROPOLITAN<br>DISTRICT NO. 3   |                          |
| MaryAnn M. McGeady   | ▲ COURT USE ONLY ▲       |
| Kathryn S. Kanda<br>McGEADY SISNEROS, P.C.   | Case Number: 2014CV30995 |
| 450 E. 17 <sup>th</sup> Avenue, Suite 400<br>Denver, Colorado 80203  |                          |
| Phone: (303) 592-4380  | Div.: 1 Ctrm.:           |
| 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.

Ryan L. Carlson Address: 14270 Inca St. Westminster, CO 80023

| STATE OF COLORADO )  |
|--|
| COUNTY OF dans ) ss.   |
| Subscribed and sworn to before me this day of, 2014.   |
| WITNESS my hand and official seal.   |
| JENNY L MOORE<br>NOTARY PUBLIC<br>STATE OF COLORADO<br>NOTARY ID # 200004003852<br>MY COMMIDSION EXPIRES FERRUARY 09, 2015 |
| My commission expires: 02/09/2016  |

# 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. 3

#### 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.

## RLI

RLI Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

## PUBLIC OFFICIAL POSITION SCHEDULE BOND

Bond No. <u>LSM0675495</u>

Item 1. Name of Insured: Lanterns Metropolitan District No. 3

(the "Insured")

Principal Address: c/o McGeady Sisneros, P.C. 450 E. 17th Avenue, Suite 400 Denver, CO 80203

Item 2. Bond Period <u>November 5, 2014</u> to <u>Continuous Until Cancelled</u>. Item 3. Limit of liability does not exceed the sum specified in the Schedule of named Positions or written acceptances by the Company as to each Position there listed.

#### I. INSURING AGREEMENT

The **RLI Insurance Company**, an Illinois corporation (the "Company"), in consideration of an agreed premium is held and firmly bound unto \_\_\_\_\_\_\_ Lanterns Metropolitan District No. 3

#### **II. CONDITIONS**

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 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 <u>5th</u> day of <u>November</u>, <u>2014</u>.

By\_ Vice President Roy C. Die

#### RLI Insurance Company

## SCHEDULE OF POSITIONS - EFFECTIVE THE \_\_\_\_\_\_ DAY OF \_\_\_\_\_\_. 2014\_\_\_.

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

| Schedule<br>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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RLI Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

## **POWER OF ATTORNEY RLI Insurance Company**

Bond No. \_\_LSM0675495\_\_

#### Know All Men by These Presents:

| That the   |                  |            | irance Company               |                                |             |                     | e laws of the State of |
|------------|------------------|------------|------------------------------|--------------------------------|-------------|---------------------|------------------------|
|            | Illinois         |            | nd authorized and license    | d to do business in all states | s and the I | District of Columb  | ia does hereby make,   |
| constitute |                  |            | Roy C. Die                   | in the City of                 |             | Peoria              | , State of             |
|            | Illinois         | , as       | Vice President               | , with full power and a        | authority l | hereby conferred u  | upon him/her to sign,  |
| execute, a | acknowledge a    | nd delive  | r for and on its behalf as S | Surety, in general, any and    | all bonds,  | , undertakings, and | l recognizances in an  |
| amount r   | not to exceed    | -          | Five Hundred Thousan         | d and 00/100 I                 | Dollars (_  | \$ 500,000.00       | ) for any single       |
| obligation | n, and specifica | lly for th | e following described bond   | d.                             |             |                     |                        |

| Principal:      | Lanterns Metropolitan District No. 3   |  |
|-----------------|--|--|
| Obligee:        | Same as Principal                      |  |
| Type Bond:      | Public Official Position Schedule Bond |  |
| Bond Amount:    | \$ 10,000.00                           |  |
| Effective Date: | November 5, 2014                       |  |

| The        | RLI Insurance Company                | further | certifies | that | the  | following | is a | true   | and   | exact    | сору   | of   | а |
|------------|--------------------------------------|---------|-----------|------|------|-----------|------|--------|-------|----------|--------|------|---|
| Resolution | adopted by the Board of Directors of | RLI In  | surance   | Com  | pany | /         |      | _, and | i nov | v in for | ce to- | wit: |   |

"All bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or Agents who shall have authority to issue bonds, policies or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile."

| IN    | WITNESS WHEREOF, the | RLI Insurance Company                              | _ has caused these presents to be executed by |
|-------|----------------------|--|---|
| its , | Vice President       | _ with its corporate seal affixed this5th day of _ | November , 2014                               |

| ATTEST:               | ANCE CO                    | RLI Insurance Company   |                                 |
|-----------------------|----------------------------|---|---------------------------------|
| Cynthia S. John Assi  | stant Secretary            | Roy C. Die  | Vice President                  |
| 0                     | 2014 before me, a Notary P |   | Roy C. Die                      |
| andCynthia S. Dohm    |                            | orn, acknowledged that they sign  |                                 |
| as Vice President     | and                        |   | , respectively, of the said     |
| RLI Insurance Compar  | , and ack                  | mowledged said instrument to be   | e the voluntary act and deed of |
| said corporation.     | 98)<br>1                   |   |                                 |
| Jacqueline M. Bockfor | SIAR OF                    | "OFFICIAL SEAL"<br>JACQUELINE M. BOCKLER<br>SOMMISSION EXPIRES 01/14/18 |                                 |

A0006104

| DISTRICT COURT, COUNTY OF DOUGLAS, STATE<br>OF COLORADO<br>4000 Justice Way, Suite 2009<br>Castle Rock, CO 80109<br>720-437-6200  |  |
|---|--|
| IN THE MATTER OF LANTERNS METROPOLITAN<br>DISTRICT NO. 3  |  |
| MaryAnn M. McGeady<br>Kathryn S. Kanda<br>McGEADY SISNEROS, P.C.<br>450 E. 17 <sup>th</sup> Avenue, Suite 400<br>Denver, Colorado 80203<br>Phone: (303) 592-4380<br>Fax: (303) 592-4385 | ▲ COURT USE ONLY ▲<br>Case Number: 2014CV30995<br>Div.: 1 Ctrm.: |
| E-mail: mmcgeady@mcgeadysisneros.com<br>kkanda@mcgeadysisneros.com<br>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 L. Carlson Address: 13500 York St. Thornton, CO 80241 STATE OF COLORADO ) ss. COUNTY OF ADAMS Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ NOVEMBER , 2014. WITNESS my hand and official seal. ROBERT C. SORENSEN Notary Public NOTARY PUBLIC STATE OF COLORADO NOTARY ID 19934014135 My commission expires: 10 - 24-2019 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. 3

## 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.



RLI Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone (200)502 1000 Eox: (200)583 Phone: (309)692-1000 Fax: (309)683-1610

## **PUBLIC OFFICIAL POSITION** SCHEDULE BOND

Bond No. LSM0675495

Item 1. Name of Insured: Lanterns Metropolitan District No. 3

(the "Insured")

Principal Address: c/o McGeady Sisneros, P.C. 450 E. 17th Avenue, Suite 400 Denver, CO 80203

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 Positions or written acceptances by the Company as to each Position there listed.

#### I. INSURING AGREEMENT

The RLI Insurance Company, an Illinois corporation (the "Company"), in consideration of an agreed premium is held and firmly bound unto \_\_\_\_\_\_ Lanterns Metropolitan District No. 3 Denver \_\_\_\_\_, CO, Obligee, for the faithful discharge of the duties of any Public of Official or Employee while occupying any position named in the schedule attached, or added thereto by written acceptance of the Company as to said position after the \_\_\_\_\_5th \_\_\_ day of \_\_\_\_\_November \_\_\_\_\_, \_\_\_\_2014\_\_\_\_.

#### **II. CONDITIONS**

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:

**RLI Insurance Company** 

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\_\_\_.

By\_\_\_ Roy C. Die Vice President

### SCHEDULE OF POSITIONS - EFFECTIVE THE \_\_\_\_\_\_\_ 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<br>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 |
| 7                  |                |     |                   |             |
| 8                  |                |     |                   |             |
| 9                  |                |     |                   |             |
| 10                 |                |     |                   |             |
| 11                 |                |     |                   |             |
| 12                 |                |     |                   |             |
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| 26                 |                |     |                   |             |

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RLI Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

## **POWER OF ATTORNEY RLI Insurance Company**

Bond No. \_\_LSM0675495\_\_

#### Know All Men by These Presents:

| That the   |                  | <u>RLI Ins</u> | urance Company                | , a corporation         | organized an  | d existing under the | laws of the State of |
|------------|------------------|----------------|-------------------------------|-------------------------|---------------|----------------------|----------------------|
|            | Illinois         | ,;             | and authorized and licensed   | to do business in all s | tates and the | District of Columbi  | a does hereby make,  |
| constitute | e and appoint: _ |                | Roy C. Die                    | in the Cit              | y of          | Peoria               | , State of           |
|            | Illinois         | , as           | Vice President                | , with full power a     | ind authority | hereby conferred u   | pon him/her to sign, |
| execute,   | acknowledge a    | nd delive      | r for and on its behalf as Su | rety, in general, any   | and all bonds | s, undertakings, and | recognizances in an  |
| amount     | not to exceed    |                | Five Hundred Thousand         | and 00/100              | _ Dollars (   | \$ 500,000.00        | ) for any single     |
| obligatio  | n, and specifica | lly for th     | e following described bond.   |                         |               |                      |                      |
|            |                  |                |                               |                         |               |                      |                      |

| Principal:          | Lanterns Metropolitan District No. 3   |
|---------------------|--|
| Obligee:            | Same as Principal                      |
| Type Bond:          | Public Official Position Schedule Bond |
| <b>Bond Amount:</b> | \$ 10,000.00                           |
| Effective Date:     | November 5, 2014                       |
|                     |  |

| The RLI Insurance Company                       | her certifies that the following is a | true and exact copy of a |
|---|---------------------------------------|--------------------------|
| Resolution adopted by the Board of Directors of | I Insurance Company                   | and now in force to-wit: |

"All bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or Agents who shall have authority to issue bonds, policies or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile."

| IN WITNESS WHEREOF, the                    | RLI Insurance Company                               | has caused these presents to be executed by        |
|--|---|--|
| its Vice President                         | with its corporate seal affixed this <u>5th</u> day | y of <u>November</u> , <u>2014</u> .               |
| ATTEST:<br>Andio J. Dom<br>Cynthia S. Pohm | Assistant Secretary                                 | Dige Vice President                                |
| On this 5th day of Novemb                  | er, 2014 before me, a Notary Public, persona        | alteranneared Roy C. Die                           |
| and <u>Cumthia S Dohm</u>                  | who being by me duly sworn acknowle                 | edged that they signed the above Power of Attorney |
| as Vice President                          |   | t Secretary , respectively, of the said            |
|  |   | aid instrument to be the voluntary act and deed of |
| said corporation.                          |   |  |
| Jacqueline M. Bockler                      | 1. Buller<br>Notary Public<br>Notary Public         | SEAL"<br>BOCKLER                                   |

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