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. 3	
MaryAnn M. McGeady Kathryn S. Kanda McGEADY SISNEROS, P.C. 450 E. 17 <sup>th</sup> Avenue, Suite 400	▲ COURT USE ONLY ▲ Case Number: 2014CV30995
Denver, Colorado 80203 Phone: (303) 592-4380 Fax: (303) 592-4385	Div.: 1 Ctrm.:
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.

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 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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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 as Vice President and	a Notary Public, personally appeared <u>Roy C. Die</u> ne duly sworn, acknowledged that they signed the above Power of Attorney <u>Assistant Secretary</u> , respectively, of the said , and acknowledged said instrument to be the voluntary act and deed of
said corporation.	
Jacqueline M. Bockler Notary Public	"OFFICIAL SEAL" PULL STATE OF LINGS COMMISSION EXPIRES 01/14/18

A0006104

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. 3	
MaryAnn M. McGeady	▲ COURT USE ONLY ▲
Kathryn S. Kanda 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> ) Subscribed and sworn to before me this	ss. 25 <sup>th</sup> day of <u>November</u> , 2014.
WITNESS my hand and official	seal.
	Amount
AMISHA PADHIAR Notary Public	Notary Public
State of Colorado Notary ID 20144017958 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 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
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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:

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 exceed	point:Roy C. Die , asVice President ledge and deliver for and on its behal exceedFive Hundred Tho	bis, and authorized and licensed to do business in all point: Roy C. Die in the C , as Vice President, with full power 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 Notary Public	"OFFICIAL SEAL"	

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. 3	
MaryAnn M. McGeady Kathryn S. Kanda McGEADY SISNEROS, P.C. 450 E. 17 <sup>th</sup> Avenue, Suite 400	▲ COURT USE ONLY ▲ Case Number: 2014CV30995
Denver, Colorado 80203 Phone: (303) 592-4380 Fax: (303) 592-4385	Div.: 1 Ctrm.:
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.

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 Number	Position Name	No.	Position Location	Bond Amount
1	Treasurer	1		\$ 5,000.00
2	Board Member 1	1		\$ 1,000.00
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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 as Vice President and	a Notary Public, personally appeared <u>Roy C. Die</u> ne duly sworn, acknowledged that they signed the above Power of Attorney <u>Assistant Secretary</u> , respectively, of the said , and acknowledged said instrument to be the voluntary act and deed of
said corporation.	
Jacqueline M. Bockler Notary Public	"OFFICIAL SEAL" PULL STATE OF LINGS COMMISSION EXPIRES 01/14/18

A0006104

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. 3		
MaryAnn M. McGeady	COURT	USE ONLY
Kathryn S. Kanda McGEADY SISNEROS, P.C. 450 E. 17 <sup>th</sup> Avenue, Suite 400	Case Number:	2014CV30995
Denver, Colorado 80203 Phone: (303) 592-4380 Fax: (303) 592-4385	Div.: 1	Ctrm.:
E-mail: mmcgeady@mcgeadysisneros.com kkanda@mcgeadysisneros.com Atty. Reg. #: #12417; #34858		
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**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 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

#### 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 Notary Public	"OFFICIAL SEAL" PUBLIC SACQUELINE M. BOCKLER ILLINOIS COMMISSION 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. 3	
MaryAnn M. McGeady	▲ COURT USE ONLY ▲
Kathryn S. Kanda McGEADY SISNEROS, P.C.	Case Number: 2014CV30995
450 E. 17 <sup>th</sup> Avenue, Suite 400 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 NOTARY PUBLIC STATE OF COLORADO NOTARY ID # 200004003852 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 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) 1		
Jacqueline M. Bockfor	SIAR OF	"OFFICIAL SEAL" JACQUELINE M. BOCKLER SOMMISSION EXPIRES 01/14/18	

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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. 3	
MaryAnn M. McGeady Kathryn S. Kanda McGEADY SISNEROS, P.C. 450 E. 17 <sup>th</sup> Avenue, Suite 400 Denver, Colorado 80203 Phone: (303) 592-4380 Fax: (303) 592-4385	▲ COURT USE ONLY ▲ Case Number: 2014CV30995 Div.: 1 Ctrm.:
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 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 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
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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: Andio J. Dom 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 Notary Public Notary Public	SEAL" BOCKLER

\*