DISTRICT COU	JRT, DOUGLAS COUNTY, COLORADO	
Court Address	s: 4000 Justice Way Suite 2009 Castle Rock, CO 80109	
Petitioner:		]
MIRABELLE	E METROPOLITAN DISTRICT NO. 2	▲ COURT USE ONLY ▲
Attorney for	Petitioner:	
Name:	Kristen D. Bear, Esq. Trisha K. Harris, Esq.	Case Number: 2016CV30968
Address:	WHITE BEAR ANKELE TANAKA & WALDRON	Division:
	Attorneys at Law 2154 E. Commons Ave., Suite 2000 Centennial, CO 80122	Courtroom:
Phone:	(303) 858-1800	
Fax:	(303) 858-1801	
Email:	kbear@wbapc.com;	
Atty. Reg. #:	tharris@wbapc.com 23680; 34820	
	BOARD OF DIRECTOR OATH OF OFFICE	S
STATE OF CO		
COUNTY OF	Douglas ) ss.	
swear by the e Constitution of perform the du which I am abo	has John Schriefer, [select one of the following everliving God], that I will support the Const the State of Colorado, and the laws of the State of the office of Director of the Mirabelle I but to enter to the best of my ability. In accordance to be filed at the time of filing of this oath is filed.	itution of the United States, the e of Colorado, and will faithfully Metropolitan District No. 2 upon ce with § 32-1-901(2), C.R.S. the
	<u>Thomas Schrieg</u> Thomas Schriefer (May 8, 2020)  Signature	Gor_

Subscribed and sworn to before me this  $8_{day}$  of  $May_{,2020}$ .

By: Jennifer E. Fulton-Miller
Officer of the Board of Directors

# Oath of Office, District Nos 1-4 - Thomas John Schriefer

Final Audit Report 2020-05-08

Created: 2020-05-08

By: Rose Vallesio (rvallesio@wbapc.com)

Status: Signed

Transaction ID: CBJCHBCAABAAKk34zeIECLyqdihsxM9RU4KFfppTYgPn

## "Oath of Office, District Nos 1-4 - Thomas John Schriefer" Histor y

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#### **EXHIBIT A**

Director Bond



or Employee or position.

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>LSM0933041</u>

ltei	m 1. Name of Insur	: Mirabelle Metropolitan District No. 2	
	Principal Addr	(the "Insus: c/o White Bear Ankele Tanaka & Waldron 2154 East Commons Avenue, Suite 2000 Centennial, CO 80122	red")
ltei	m 3. Limit of liability	November 1, 2016 to Continuous Until Cancelled of named Positions or written acceptant ch Position there listed.	ıces
l.		Company, an Illinois corporation (the "Company"), in consideration of an agreed premiu	um is
	of Official or Employ	d unto	ritten/
II.	_	matic coverage is granted for the first thirty days service of any Public Official or Employee newly created position identical with one listed in the schedule of positions, in an equal	:
	beginning, un	ver, that the automatic coverage herein granted shall be void and of no effect from some during the said thirty day period the Obligee has requested in writing that the position edule, and the Company by written acceptance has consented thereto.	
	Coverage on writing by the	y position may be increased or decreased upon written request of the Obligee, if agreed	to in

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

**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

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

OFF 0102 (2/93)

Page 1 of 3 Pages

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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 11th day of October, 2016.

**RLI Insurance Company** 

Vice President

OFF 0102 (2/93) Page 2 of 3 Pages SCHEDULE OF POSITIONS - EFFECTIVE THE <u>1st</u> DAY OF <u>November</u>, <u>2016</u>.

(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		\$ 1,000.00
3	Board Member	1		\$ 1,000.00
4	Board Member	1		\$ 1,000.00
5	Board Member	1		\$ 1,000.00
6	Board Member	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. <u>LSM0933041</u>

### Know All Men by These Presents:

That the	RLI Insura	ance Company	, a corporation	organized and ex	isting under the la	ws of the State of
Illin	nois , and	l authorized and licensed	to do business in all s	states and the Dis	trict of Columbia d	loes hereby make,
constitute and a	ppoint:	Barton W. Davis	in the Cit	y of	Peoria	, State of
Illinoi	<u>is</u> , as	Vice President	, with full power a	and authority here	eby conferred upor	n him/her to sign,
execute, acknow	wledge and deliver for	or and on its behalf as Su	urety, in general, any	and all bonds, un	dertakings, and red	cognizances in an
amount not to	exceed	Five Hundred Thousand	and 00/100	_ Dollars (	\$ 500,000.00	_) for any single
obligation, and	specifically for the fo	ollowing described bond.				
Principal:	_Mirabelle Metro	politan District No. 2				
Obligee:	Same as Principa	al				
Type Bond:	Public Official P	osition Schedule Bond				
<b>Bond Amount:</b>	\$ 10,000.00					
<b>Effective Date:</b>	November 1, 201	.6				
The	RLI Insurance	e Company	further certifies	that the following	ng is a true and	exact copy of a
		Directors of				
	, Powers of Attorn I may be printed by	ney or other obligation facsimile.''	ns of the corporation	on. The signatu	re of any such o	officer and the
		RLI Insuran				
its <u>Vic</u>	e President	with its corporate seal at	ffixed this <u>11th</u>	day of Octo	ber , 2016	<u>_</u> ·
ATTEST:	i I Montana	Assistant Secretary	CORPORATE SEAL	Insurance Comp		
Cherie L. Montgo	omery	Assistant Secretary	Barto	n W. Davis		Vice President
	vice President  RLI Insurance Co	, 2016 before me, a, who being by m and	ne duly sworn, acknow Assista	wledged that they ant Secretary	signed the above F	Power of Attorney tively, of the said
Jacqueline M. Bo	asqueline M	Notary Public	"OFFICIAL NOTARY JACQUELINE M	SEAL"		