DISTRICT COURT, COUNTY OF DOUGLAS, STATE OF COLORADO 4000 Justice Way, Suite 2009 Castle Rock, CO 80109 720-437-6200								
IN RE STONE CREEK METROPOLITAN DISTRICT								
Elisabeth A. Cortese	▲ COURT USE ONLY ▲							
McGEADY BECHER P.C.								
450 E. 17 <sup>th</sup> Ave., Suite 400 Denver, Colorado 80203-1254	Case Number: 2014CV31021							
Phone: (303) 592-4380								
Fax: (303) 592-4385	Div.: 1 Ctrm.:							
E-mail: ecortese@specialdistrictlaw.com								
Atty. Reg. #: 41222								
OATH OF DIRECTOR								
I, Eric Kubly, do SWEAR AFFIRM that I will sup United States, the Constitution of the State of Colorado, and the la and will faithfully perform the duties of the office of director of the District upon which I am about to enter to the best of my ability.	ws of the State of Colorado,							
	1/./							
In D.	Kelly							
Name: Eric Kubly	1 15:							
Address: 21483 Unbridled Drive Parker, CO 80138								
	-1.4							
Subscribed and $\mathbb{Z}$ sworn $\square$ affirmed to before me this $29$ day 2018.	of May,							
By:								
	administer oaths, i.e.							
County Clerk and Recorder, Chairman of the								
	or any other person authorized							
to administer oaths)								

STATE OF COLORADO	)
COUNTY OF DINVLY	) ss. )
Subscribed and sworn affirmed to be 2018.	before me this 29th day of MAY,
(Notary's official signature)	AMY L MARTIN NOTARY PUBLIC STATE OF COLORADO
(Commission Expiration)	NOTARY ID # 20084003861 NOTARY ID # 20084003861 COMMISSION EXPIRES FEBRUARY 01, 2020 Notary Scal

# CERTIFICATE

OF

## ELECTION

the Board of Directors of the Stone Creek Metropolitan District at the election held May 8, 2018. This certifies that Eric Kubly was elected to serve a four-year term as a member of

Designated Election Official



### ACORD'

### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/30/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

th	is certificate does not confer rights	to the	certi	ificate holder in lieu of su	ich end	orsement(s)	).	require an end	iorsemen	ii. A 31	atement on	
	DUCER				CONTACT NAME:							
	harles Wilson Insurance Service Inverness Parkway Suite 170				PHONE (A/C, No, Ext): (303) 368-5757 FAX (A/C, No): (303) 368-5863						368-5863	
Eng	lewood, CO 80112				E-MAIL ADDRESS: info@wilsonins.com							
						INS	SURER(S) AFFOR	RDING COVERAGE			NAIC#	
				INSURER A : R. L. I.						0028		
INSURED					INSURER B:							
	Stone Creek Metropolitan D			dana laa	INSURER C:							
	c/o Special District Manage 141 Union Blvd., Ste. 150	ment	Serv	ices, inc.	INSURE							
	Lakewood, CO 80228				INSURER E :							
					INSURER F:							
CO	VERAGES CER	RTIFIC	CATE	E NUMBER:				REVISION NU	MBER:			
IN CE	THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.											
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR	POLICY NUMBER	DELITI	POLICY EFF	POLICY EXP (MM/DD/YYYY)		LIMIT	s		
LIK	COMMERCIAL GENERAL LIABILITY	INSU	WVD	T OLIV HOMBER		(MM/DD/TTTT)	(MM/DD/TTTT)	EACH OCCURREN		\$		
	CLAIMS-MADE OCCUR							DAMAGE TO RENT PREMISES (Ea occ	TED	\$		
								MED EXP (Any one		\$		
								PERSONAL & ADV		\$		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGRE		\$		
	POLICY PRO- JECT LOC							PRODUCTS - COM		\$		
	OTHER:					>		11000010-001	701 400	\$		
	AUTOMOBILE LIABILITY					_		COMBINED SINGL (Ea accident)	E LIMIT	\$		
	ANY AUTO						,	BODILY INJURY (P	er person)	\$		
	OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (F				
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMA (Per accident)	GE	\$		
										\$		
	UMBRELLA LIAB OCCUR							EACH OCCURREN	CE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE		\$		
	DED RETENTION \$									\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. EACH ACCIDE	NT	\$		
								E.L. DISEASE - EA	EMPLOYEE	\$		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - PO	LICY LIMIT	\$		
Α	3 Year Bond			LSM0675499		11/05/2017	11/05/2020	Bond Limit			10,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Public Official Position Schedule Bond 1 Treasurer @ \$5,000 5 Board Members @ \$1,000 each												
									c			
CERTIFICATE HOLDER					CANCELLATION							
Colorado Department of Local Affairs Division of Local Government-Special Districts 1313 Sherman St., Rm 521 Denver, CO 80203					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE							
Deliver, 00 00203						A A A A A						

Colorado Community Media 750 W. Hampden Ave. Suite 225 Englewood, CO 80110

## AFFIDAVIT OF PUBLICATION

State of Colorado }
County of Douglas } ss

This Affidavit of Publication for the DOUGLAS COUNTY NEWS PRESS, a weekly newspaper, printed and published for the County of Douglas, State of Colorado, hereby certifies that the attached legal notice was published in said newspaper once in each week, --1-- successive week(s), the last of which publication was made 19th day April A.D., 2018, and that copies of each number of said paper in which said Public Notice was published were delivered by carriers or transmitted by mail to each of the subscribers of said paper, according to their accustomed mode of business in this office.

For the Douglas County News-Press

State of Colorado }
County of Arapahoe } ss

The above Affidavit and Certificate of Publication was subscribed and sworn to before by the above named Gerard Healey, publisher of said newspaper, who is personally known to me to be the identical person in the above certificate on the 1st day of June A.D., 2018. Gerard Healey has verified to me that he has adopted an electronic signature to function as his signature on this document.

Carla Bethke Notary Public

My commission expires April 11, 2022

CARLA BETHKE
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID 20004025550
MY COMMISSION EXPIRES APRIL 11, 2022

**Public Notice** 

NOTICE OF CANCELLATION and CERTIFIED STATEMENT OF RESULTS §1-13.5-513(6), 32-1-104, 1-11-103(3) C.R.S.

NOTICE IS HEREBY GIVEN by the Stone Creek Metropolitan District, Douglas County, Colorado, that at the close of business on the sixty-third day before the election, there were not more candidates for director than offices to be filled, including candidates filing affidavits of intent to be write-in candidates; therefore, the election to be held on May 8, 2018 is hereby canceled pursuant to section 1-13.5-513(6) C.R.S.

The following candidates are declared elected for the following terms of office:

Patrick Lyng Second Regular Election,
~May 2022
Eric Kubly Second Regular Election,
~May 2022
Vacant Second Regular Election,
~May 2022
Mauricio Barbera Next Regular Election,
~May 2020

/s/ Lisa A. Johnson (Designated Election Official)

Contact Person for the District: Lisa A. Johnson Telephone Number of the District: 303-987-0835 Address of the District: 141 Union Boulevard, Suite 150, Lakewood, CO 80228 District Facsimile Number: 303-987-2032 District Emall: Ijohnson@sdmsi.com

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