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DISTRICT COURT, DOUGLAS COUNTY, COLORADO Douglas County Justice Center 4000 Justice Way, Suite 2009 Castle Rock, Colorado 80109	
IN RE THE MATTER OF MERIDIAN METROPOLITAN DISTRICT	▲ COURT USE ONLY ▲
Attorneys for the District: SPENCER FANE LLP Matthew R. Dalton, #11192 1700 Lincoln Street, Suite 2000 Denver, CO 80203-4554 (303) 839-3800 – Telephone; (303) 839-3838 – Facsimile E-mail: mdalton@spencerfane.com	Case No. 1976 CV 4507 Division: Courtroom:
OATH OF OFFICE	
State of Colorado, and the laws made pursuant thereto, and we the office of Director of Meridian Metropolitan District upon volume Signature: Michael A IF SWORN OR AFFIRMED BEFORE THE CHAIRMAN OF THE E BE COMPLETED:	A. Brown BOARD, THE FOLLOWING SHOULD
Subscribed and sworn to before me this day of May 20	018.
By: Title:	
STATE OF COLORADO Subscribed and sworn to before me this \(\frac{1}{2} \) day of May 2018, by Michae My Notary Commission expires on \(\frac{1}{2} \) \(1 A. Brown, Director.
Chairman of the Board of Directors, or any other person author	prized to administer oaths)***

CHATTER

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 confor rights to the certificate holder in light of the policy.

this certificate does not confer rights to the certificate holder in lieu of st					CONTA	CT	'			
T. Charles Wilson Insurance Service 384 Inverness Parkway Suite 170				PHONE (A/C, No, Ext): (303) 368-5757 FAX (A/C, No): (303) 368-5863						
ıgl	ewood, CO 80112				E-Marino@wilsonins.com					
INSURED Meridian Metropolitan District c/o Denver Technology Center 6380 S.Fiddlers Green Circle, Suite 400 Greenwood Village, CO 80111								RDING COVERAGE		NAIC#
					INSURER A : CNA Surety					0022
					INSURER B:					0022
					INSURER C:					
					INSURER D:					
					INSURER E:					
						INSURER F:				
0١	ERAGES CER	TIFK	CATE	E NUMBER:	REVISION NUMBER:					
CE	IS IS TO CERTIFY THAT THE POLICII DICATED. NOTWITHSTANDING ANY R RTIFICATE MAY BE ISSUED OR MAY CLUSIONS AND CONDITIONS OF SUCH	PER	KEMI TAIN	ENT, TERM OR CONDITION THE INSURANCE AFFORM	N OF A	NY CONTRA	CT OR OTHE	RED NAMED ABOVE I	FOR THE PO	MAJICH THE
R	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF	POLICY EXP		LIMITS	
1	COMMERCIAL GENERAL LIABILITY					smm/DU/TTTY)	(mm/DU/YYYY)	EACH OCCURRENCE	LIMITS	
	CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrent		
								MED EXP (Any one person	l.	
								PERSONAL & ADV INJUI		
	GEN'L AGGREGATE LIMIT APPLIES PER							GENERAL AGGREGATE		
	POLICY PRO-							PRODUCTS - COMP/OP		
Ţ	OTHER:							PRODUCTS - COMPTOP	\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMI (Ea accident)		
	ANY AUTO							BODILY INJURY (Per per		
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per acc		
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	S	
				!				(i or accident)	S	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	s	
-	EXCESS LIAB CLAIMS-MADE	' 						AGGREGATE	S	···
1	DED RETENTIONS								s	
	VORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER O	TH-	
	NY PROPRIETOR/PARTNER/EXECUTIVE PFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	s	
I.	Mandatory In NH)		i					E.L. DISEASE - EA EMPL	OYEE \$	
	yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY L	LIMIT S	
1	Year Bond		i	43057306		03/11/2016	03/11/2019	Bond Amount		10,0
ı										
'02	RIPTION OF OPERATIONS / LOCATIONS / VEHICL : Official Position Schedule Bond surer @ \$5,000 rd Members @ \$1,000 each	ES (A	CORD	101, Additional Remarks Scheduk	a, may b	attached if mor	e space is requir	ed)		
R	TIFICATE HOLDER				CANC	ELLATION				
Colorado Department of Local Affairs Division of Local Government-Special Districts 1313 Sherman St., Rm 521					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
	1313 Sustinan St. Km 231									
				Ţ.	AUTHOR	IZED REPRESE	TATIVE			
						ZUZE	NTATIVE		_	