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Received
JUN 03 2010
Dept. of Local Affairs

MADRE METROPOLITAN DISTRICT NO. 2
8390 E. Crescent Pkwy., Suite 500
Greenwood Village, CO 80111-2814
Phone: 303-779-4525 Fax: 303-773-2050

June 1, 2010

Division of Local Government
State of Colorado
1313 Sherman Street, Room 521
Denver, CO 80203

Re: Madre Metropolitan District No. 2

To Whom It May Concern:

Please find enclosed the following documents regarding the May 4, 2010 director election for the Madre Metropolitan District No. 2:

- Notice to Cancel Election
- Resolution to Cancel Election
- Position Schedule Bond No. 14764567, Expiration Date of November 2011

Please place these documents in the Madre Metropolitan District No. 2 file, and feel free to contact our office if you should have any questions.

Sincerely,

Dawne Hirsbrunner

Dawne Hirsbrunner
Administrative Assistant

Enclosure

Cc: Dianne Miller; Miller-Rosenbluth

**NOTICE OF CANCELLATION OF REGULAR ELECTION
BY THE DESIGNATED ELECTION OFFICIAL
OF
MADRE METROPOLITAN DISTRICT #1
MADRE METROPOLITAN DISTRICT #2
MADRE METROPOLITAN DISTRICT #3**

NOTICE IS HEREBY GIVEN by the above referenced Districts of Denver County, Colorado, that at the close of business on the sixty-third day before the election, there were not more candidates for directors than offices to be filled including candidates filing affidavits of intent to be write-in candidates; therefore, the regular election to be held on May 4, 2010, is hereby canceled pursuant to Section 1-5-208, C.R.S. The following candidates are declared elected for the District:

Louis P. Bansbach III to a 4-year term or until May, 2014
Louis P. Bansbach IV to a 4-year term or until May, 2014

By: /s/ Bob Blodgett
Designated Election Official

Publish In: The Daily Journal

Publish On: Thursday, April 1, 2010
(one time only)

RESOLUTION
CANCELLATION OF MAY 4, 2010 REGULAR ELECTION
AND
DECLARATION DEEMING CANDIDATES ELECTED

MADRE METROPOLITAN DISTRICT NO. 2
DENVER COUNTY, COLORADO

WHEREAS, the Designated Election Official of the Madre Metropolitan District of Denver County, Colorado, has been duly authorized by the Board of Directors to cancel the election and declare candidates elected at the close of business on the sixty-third day before the election to be conducted on May 4, 2010; and

WHEREAS, there were not more candidates for director than offices to be filled, including candidates filing affidavits of intent to be write-in candidates.

NOW THEREFORE, pursuant to 1-5-208(1.5), C.R.S. the Designated Election Official hereby cancels the regular election to be conducted on the 4th day of May, 2010, by formal resolution and

THE DESIGNATED ELECTION OFFICIAL DECLARES THE FOLLOWING CANDIDATES ELECTED FOR THE FOLLOWING TERMS OF OFFICE:

Name	Address	Term
Louis P. Bansbach III	65 Charlou Circle Englewood, CO 80111	4-year term or until May 2014
Louis P. Bansbach IV	100 S. Marion Parkway Denver, CO 80209	4-year term or until May 2014

MADRE METROPOLITAN DISTRICT NO. 2



Designated Election Official

Contact Person for the District: Bob Blodgett
Address: 8390 E. Crescent Parkway, #500, Greenwood Village, CO 80111
District Telephone Number: 303-779-4525
District Telefax Number: 303-773-2050
District E-mail: bob. Blodgett@cliftoncpa.com



Western Surety Company

PUBLIC OFFICIAL POSITION SCHEDULE BOND

Name of Oblige Madre Metropolitan District No. 2 Bond No. 14764567
 Name of Insured Madre Metropolitan District No. 2

WESTERN SURETY COMPANY, as Surety, in consideration of an agreed premium is held and firmly bound unto the Oblige, for the faithful discharge of the duties of any Officer or Employee while occupying any position named in the schedule attached, or added thereto by written acceptance of the Surety, while in the service of the Insured, not exceeding the sum specified in said schedule or written acceptance of the Surety as to said position after the 1st day of November, 2005.

This bond is subject to the following expressed conditions:

1. Automatic coverage is granted for the first thirty days' service of any Officer or Employee 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 Insured has requested in writing that the position be added to the schedule, and the Surety by written acceptance has consented thereto.

2. Coverage on any position may be increased or decreased upon written request of the Insured, and agreed to in writing by the Surety.

The Surety's liability under this bond shall not be cumulative, and in no event shall the Surety be called upon to pay a loss or losses an amount greater than the largest single amount for which the position occupied by any Officer or Employee causing the loss is or has been covered in the schedule, whether said loss occurred during any one or more years. The liability of the Surety for any Officer 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 Officer or Employee. The liability of the Surety shall never exceed the amount in effect for the position when the act of the Officer or Employee causing the loss shall have occurred. In the event there are more Officers or Employees occupying the position covered in the schedule than are listed therein, the Surety shall be liable for such proportion of the amount of coverage as the number of Officers or Employees listed bears to the number of Officers or Employees actually

4. Cancellation hereunder is effective, and all liability under this bond shall cease as to the future acts or omissions as to any Officer or Employee on the date specified in written notice given by the Insured to the Surety as to any or all positions or Officers or Employees, or after thirty days' written notice given by the Surety to the Insured of its intent to cancel this bond in its entirety, or as to any Officer or Employee or position.

5. None of the specifications of this bond shall be altered or waived, except in writing by the Surety executed by the Chairman of the Board, its President, Vice President, Secretary, Assistant Secretary or Treasurer.

6. The liability of the Surety hereunder is subject to the terms and conditions of the following or to the following Riders attached thereto:

Dated this 1st day of November, 2005

Countersigned

By [Signature]

Resident Agent

WESTERN SURETY COMPANY

By [Signature]

Surety

SCHEDULE OF POSITIONS EFFECTIVE November 1st, 2005
 (If there is more than one position of like classification, list by number, thus: Cashier No. 1, Cashier No. 2)

Number	Position	Location	Amount	Premium
1	Director		\$1,000.00	\$3.50
2	Director		\$1,000.00	\$3.50
3	Director		\$1,000.00	\$3.50
4	Director		\$1,000.00	\$3.50
5	Director		\$1,000.00	\$3.50
6	Treasurer		\$5,000.00	\$25.00
*****	***** End of Schedule	*****		

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/02/2010

PRODUCER (303)368-5757 FAX (303)368-5863
T. Charles Wilson Insurance Services
2260 So. Xanadu Way # 280
Aurora, CO 80014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED Madre Metropolitan District No. 2
DBA: Miller, Gruber & Rosenbluth
700 17th Street
Suite 2200
Denver, CO 80202

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Western Surety	0022
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

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 ANY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	OTHER Position Schedule Bond	14764567	11/01/2008	11/01/2011	Limit: 10,000 5 Directors @ 1,000 Each 1 Treasurer @ 5,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

Madre Metropolitan District #2
c/o RS Wells, LLC
8390 E. Crescent Parkway
Suite 500
Greenwood Village, CO 80111

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL FAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
Kim Acevedo/KIM

Kim Acevedo