SELF-NOMINATION AND ACCEPTANCE

Sections 1-13.5-303; 32-1-103(4); 1-45-109(1); 1-45-110, C.R.S.; SOS CPF Rule 16; 1-4-908(1), 1-4-912

I, _____

who reside at:

_____
(Residence Street Name and Number)

_____
(City or Town, Zip Code)

_____
(County, State)

_____
(Mailing Address, if different from residence address)

whose email address is: _____
(Email Address)

hereby nominate myself and accept such nomination for the office of Director for

a ☐ two-year term **OR** a ☐ four-year term on the Board of Directors of **Lake of the Rockies Metropolitan District** in El Pso County (the "**District**") at the regular election on May 4, 2027, and will serve if elected.

I affirm that I am an eligible elector of the District and am an eligible elector at the date of signing this Self-Nomination and Acceptance form.

I am an eligible elector because I am registered to vote in Colorado and am (mark one):

- ☐ A resident of the District, or area to be included in the district; or
- ☐ The owner (or spouse/civil union partner of owner) of taxable real or personal property situated within the boundaries of the District, Spouse's Name, if property is in spouse's name:_____
- ☐ A person who is obligated to pay taxes under a contract to purchase taxable property within the District.

Mark here ____ if you are a member of an executive board of a unit owner's association, as defined in Section 38-33.3-103 of the C.R.S., located within the boundaries of the district for which you are running for office.

As required by Section 1-45-110(1), C.R.S., I further affirm that I am familiar with the provisions of the Fair Campaign Practices Act. I shall not, in my campaign for this office, receive contributions or make expenditures exceeding $200.00 in the aggregate during the election cycle, however, if I do so, I shall thereafter file all disclosure reports required under the Fair Campaign Practices Act.

DATED this ____ day of _____, 2027.

_____
(Signature of Candidate)

_____
(Printed Full name of Candidate)

_____
(Email Address)

_____
(Telephone Number)

WITNESSED by the following registered elector:

_____
(Signature of Witness)

_____
(Printed Full name of Witness)

_____
(Residence Address)

_____
(City or Town, Zip Code)

Received at Denver, Colorado, this ____ day of _____, 2027.

By: Lisa A. Jacoby, Designated Election Official.

Lake of the Rockies Metropolitan District, El Paso County, Colorado.