

EMERGENCY MANAGEMENT DIRECTOR/COORDINATOR NOTIFICATION

Section 418.101 of the Texas Government Code states: *"The presiding officer of the governing body of each political subdivision will notify the Division of Emergency Management of the manner in which the political subdivision is providing or securing an emergency management program, identify the person who heads the agency responsible for the program, and furnish additional pertinent information."* This form is used to make the required notification to TDEM.

The information on this form may be released to those inquiring about local emergency management programs pursuant to the Texas Open Records Act. Hence, TDEM recommends that you provide business addresses and mobile telephone numbers rather than home addresses and telephone numbers.

COUNTY:	Jackson	<i>(Required)</i>
Jurisdiction:	Jackson County	<i>(City or County Name)</i>
Official's Title:	Judge Jill S. Sklar	<i>(Mayor/Judge)</i>
Name:	Jill S. Sklar	<i>(First & Last Name)</i>
Mailing Address:	115 W. Main RM 207	<i>(The best address to receive mail)</i>
City, State, Zip:	Edna, Texas 77957	
Office Number:	361-782-2352	
Cell Number:	361-308-9998	
Fax Number:	361-782-5253	
E-mail:	j.sklar@co.jackson.tx.us	<i>(Please include – this is a back-up for mailing)</i>

EMERGENCY MANAGEMENT PROGRAM APPOINTMENT STATUS

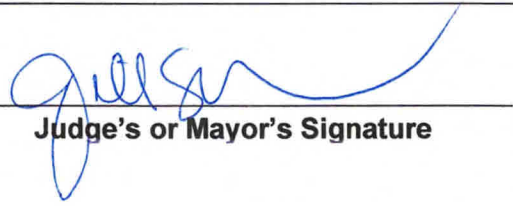
- I HAVE NOT appointed an Emergency Management Coordinator and will personally direct the local emergency management program.
- I HAVE appointed/re-appointed the Emergency Management Coordinator identified below to conduct the emergency management program for this jurisdiction. The effective date of the appointment is: 1/21/19
- We share our EMC with _____ (name of jurisdiction).

*If the COUNTY Emergency Management Coordinator has been appointed to other jurisdictions within the county, the County Judge and the participating City Mayors must sign this form.
(See the third page for additional signature blocks.)*

The EMC for this jurisdiction is (please select one):

- Paid, Full Time, EMC only
- Paid, Full Time, EMC and other job duties (Fire Chief, Fire Marshal, Police Chief, EMS Director, Etc.) *(please specify other duty/duties)* _____
- Paid part time, EMC only
- Paid, Part Time, EMC and other job duties (Fire Chief, Fire Marshal, Police Chief, EMS Director, Etc.) *(please specify other duty/duties)* _____
- Unpaid/volunteer EMC only
- Unpaid/Volunteer, EMC and other volunteer job duties (Fire Chief, Fire Marshal, Police Chief, EMS Director, Etc.) *(please specify other duty/duties)* _____
- Other *(please describe)* _____

EMERGENCY MANAGEMENT COORDINATOR		
	Coordinator	Asst Coordinator
Name:	Kelly Janica	
Mailing Address:	115 W. Main Rm 104	
City, State, Zip:	Edna, Texas 77957	
Office Phone:	361-782-3398	
Cell Number:	361-771-5449	
Fax Number:	361-782-5253	
E-mail Address:	jceoc@co.jackson.tx.us	
Emergency Operations Center Number: 361-772-3398		



Judge's or Mayor's Signature

1-21-19

Date

<p>PLEASE RETURN TO: Texas Division of Emergency Management Operations Section PO Box 4087 Austin, TX 78773-0220 Phone: (512) 424-2208 Email: Click to Submit Form to SOC</p>	
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