

## 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 telephone numbers rather than home addresses and telephone numbers.

<b>COUNTY:</b>	JACKSON	(Required)
<b>Jurisdiction:</b>	JACKSON COUNTY	(City or County Name)
<b>Official's Title:</b>	COUNTY JUDGE	(Mayor/Judge)
<b>Name:</b>	DENNIS SIMONS	(First & Last Name)
<b>Mailing Address:</b>	115 W. MAIN	(The best address to receive mail)
	ROOM 207	
<b>City, State, Zip:</b>	EDNA, TEXAS 77957	
<b>Office Number:</b>	(361) 782-2352	
<b>Cell Number:</b>		
<b>Fax Number:</b>	(361) 782-3730	
<b>E-mail:</b>	d.simons@co.jackson.tx.us	(Please include – this is a back up for mailing)

### EMERGENCY MANAGEMENT PROGRAM APPOINTMENT STATUS

- I HAVE NOT appointed an Emergency Management Coordinator and will personally direct the local emergency management program.
- I HAVE re-appointed the Emergency Management Coordinator identified below to conduct the emergency management program for this jurisdiction. The effective date of the appointment is: January 3, 2011.
- We share our EMC with La Ward, Texas (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 second page for additional signature blocks.)*

EMERGENCY MANAGEMENT COORDINATOR		
	Coordinator	Asst Coordinator
<b>Name:</b>	Allan Friedrich	
<b>Mailing Address:</b>	115 W Main	
	Room 104	
<b>City, State, Zip:</b>	Edna, Texas 77957	
<b>Office Phone:</b>	(361) 782-3398	
<b>Cell Number:</b>	(361) 782-1743	
<b>Fax Number:</b>	(361) 782-3071	
<b>E-mail Address:</b>	jceoc@co.jackson.tx.us	
<b>Emergency Operations Center Number:</b>		(361) 782-3398

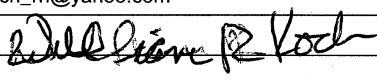
  
 \_\_\_\_\_  
 Judge's Signature

January 3, 2011  
 \_\_\_\_\_  
 Date

**PLEASE RETURN TO:**  
 Texas Division of Emergency Management  
 Preparedness Section  
 PO Box 4087  
 Austin, TX 78773-0220  
 Or fax to: (512) 424-5637

**FOR SHARED EMC USE ONLY**

By signing this form, you agree the appointed Emergency Management Coordinator (EMC) listed on the first page is also your EMC. If you have a separate EMC, you must submit the first page for your jurisdiction.

Mayor	
<b>City:</b>	LaWard, Texas
<b>Name:</b>	Richard Koch
<b>Mailing Address:</b>	P.O. <del>Box 2</del> Box 125
<b>City, State, Zip</b>	LaWard, Texas 77970
<b>Office Phone:</b>	361 872-2455 2362
<b>Cell Phone:</b>	361 781 2929
<b>Fax Number:</b>	N/A
<b>E-mail Address:</b>	Koch_rm@yahoo.com
<b>Signature:</b>	

Mayor	
<b>City:</b>	
<b>Name:</b>	
<b>Mailing Address:</b>	
<b>City, State, Zip</b>	
<b>Office Phone:</b>	
<b>Cell Phone:</b>	
<b>Fax Number:</b>	
<b>E-mail Address:</b>	
<b>Signature:</b>	

Mayor	
<b>City:</b>	
<b>Name:</b>	
<b>Mailing Address:</b>	
<b>City, State, Zip</b>	
<b>Office Phone:</b>	
<b>Cell Phone:</b>	
<b>Fax Number:</b>	
<b>E-mail Address:</b>	
<b>Signature:</b>	

## EMERGENCY MANAGEMENT DIRECTOR/COORDINATOR NOTIFICATION

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<b>COUNTY:</b>	JACKSON	(Required)
<b>Jurisdiction:</b>	GANADO	(City or County Name)
<b>Official's Title:</b>	MAYOR	(Mayor/Judge)
<b>Name:</b>	CLINTON TEGELER	(First & Last Name)
<b>Mailing Address:</b>	PO BOX GANADO, TX	(The best address to receive mail)
<b>City, State, Zip:</b>	GANADO, TX 77962	
<b>Office Number:</b>	361 771 2800 OR 2232	
<b>Cell Number:</b>	361 771 5213	
<b>Fax Number:</b>	361 771 3015	
<b>E-mail:</b>	clintontegeler@yahoo.com	(Please include – this is a back up for mailing)

### 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:** 1/13/15
- 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 second page for additional signature blocks.)*

### EMERGENCY MANAGEMENT COORDINATOR

	Coordinator	Asst Coordinator
<b>Name:</b>	DAVID MERRITT	Bernard Scott
<b>Mailing Address:</b>	PO BOX 264	P.O. Box 264
<b>City, State, Zip:</b>	GANADO, TX 77962	GANADO TX. 77962
<b>Office Phone:</b>	361-771-2800 OR 2232	361-771-2232
<b>Cell Number:</b>		
<b>Fax Number:</b>	361-771-3015	361-771-3015
<b>E-mail Address:</b>		bscott@ykc.com
<b>Emergency Operations Center Number:</b>		

\_\_\_\_\_  
Judge's or Mayor's Signature

1/13/15  
Date

#### PLEASE RETURN TO:

Texas Division of Emergency Management  
Operations Section

PO Box 4087

Austin, TX 78773-0220

Phone: (512) 424-2208

Email: soc@dps.texas.gov

## EMERGENCY MANAGEMENT DIRECTOR/COORDINATOR NOTIFICATION

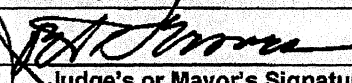
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<b>COUNTY:</b>	JACKSON		<i>(Required)</i>
<b>Jurisdiction:</b>	CITY OF EDNA		<i>(City or County Name)</i>
<b>Official's Title:</b>	MAYOR		<i>(Mayor/Judge)</i>
<b>Name:</b>	JOE D. HERMES		<i>(First &amp; Last Name)</i>
<b>Mailing Address:</b>			<i>(The best address to receive mail)</i>
<b>City, State, Zip:</b>	EDNA, TX 77957		
<b>Office Number:</b>	(361) 782-3529		
<b>Cell Number:</b>			
<b>Fax Number:</b>	(361) 782-6465		
<b>E-mail:</b>	joehermescpa@yahoo.com		<i>(Please include - this is a back up for mailing)</i>

<i>EMERGENCY MANAGEMENT PROGRAM APPOINTMENT STATUS</i>	
<input type="checkbox"/>	I HAVE NOT appointed an Emergency Management Coordinator and will <u>personally</u> direct the local emergency management program.
<input checked="" type="checkbox"/>	I HAVE appointed/re-appointed the Emergency Management Coordinator identified below to conduct the emergency management program for this jurisdiction. <b>The effective date of the appointment is:</b> <u>6/15/11</u>
<input type="checkbox"/>	We share our EMC with _____ <i>(name of jurisdiction).</i>
<i>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 second page for additional signature blocks.)</i>	

EMERGENCY MANAGEMENT COORDINATOR		
	Coordinator	Asst Coordinator
<b>Name:</b>	CLINTON WOOLDRIDGE	
<b>Mailing Address:</b>	103 N. Allen	
<b>City, State, Zip:</b>	EDNA, TX 76837	
<b>Office Phone:</b>	(361) 782-5271	
<b>Cell Number:</b>	(361) 782-2616	
<b>Fax Number:</b>	(361) 782-6602	
<b>E-mail Address:</b>	cwooldridge@cityofedna.com	
<b>Emergency Operations Center Number:</b>	(361) 782-5271	

  
 \_\_\_\_\_  
 Judge's or Mayor's Signature

3/4/14  
 \_\_\_\_\_  
 Date

PLEASE RETURN TO:  
 Texas Division of Emergency Management  
 Operations Section  
 PO Box 4087  
 Austin, TX 78773-0220  
 Phone: (512) 424-2208      Email: soc@dps.texas.gov