Emergency Services District (ESD) Reporting Form Jan. 1, 2021

Information received from this form will be transmitted to the Texas Division of Emergency Management in satisfaction of reporting requirements under Chapter 775 of the Health and Safety Code. This form is for the report required for Jan. 1, 2021.

Please familiarize yourself with the form before you begin submitting answers, because there is no mechanism to save the form and return later.

ESD Name (i.e., Buffalo County ESD No. 99) *

Comal County Emergency Services District No. 4

County or Counties in Which ESD is Located *

Comal

ESD Business Address *

353 Rodeo Drive
Street Address

Street Address Line 2

Spring Branch Texas
City State / Province

78070 United States
Postal / Zip Code Country

ESD email *

treasurer@ccesd4.com
ESD phone *
830 - 228-4501
Area Code Phone Number

ESD website
www.ccesd4.com

Type of ESD *
☐ Fire
☐ Emergency Medical Service
☐ Both

Annual ESD Budget *
2916575

Tax rate (most recently adopted; i.e., $0.10/$100) *
$06.498/$100

Population of ESD
20000

Area (sq. miles) of ESD
216

Does your ESD collect a sales tax?
☐ Yes
☐ No

If your ESD collects a sales tax, what is the rate of the sales tax? (i.e. 1/2 percent)
1%
Name of Person Completing this Form

Deena
First Name
Clausen
Last Name

E-mail

treasurer@ccesd4.com

Phone Number

210
Area Code
218-5687
Phone Number

Name of ESD President (Commissioner No. 1)

Paul
First Name
Graf
Last Name

E-mail

president@ccesd4.com

Term Expires (example: 12/31/20)

12/31/21
Name of ESD Vice President (Commissioner No. 2) *

Joshua
Dean

E-mail *

vicepresident@ccesd4.com

Term Expires (example: 12/31/19) *

12/31/22

Name of ESD Secretary (Commissioner No. 3) *

Jeremy
VanAusdall

E-mail *

secretary@ccesd4.com

Term Expires (example: 12/31/19) *

12/31/21

Name of ESD Treasurer (Commissioner No. 4) *

Deena
Clausen

E-mail *

treasurer@ccesd4.com

Term Expires (example: 12/31/19) *

12/31/22
<table>
<thead>
<tr>
<th>Name of ESD Commissioner (Commissioner No. 5) *</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Robert</td>
<td>Bruce</td>
</tr>
<tr>
<td>First Name</td>
<td>Last Name</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E-mail *</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="mailto:assistanttreasurer@ccesd4.com">assistanttreasurer@ccesd4.com</a></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>12/31/22</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Name of ESD’s legal counsel *</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>John</td>
<td>Peeler</td>
</tr>
<tr>
<td>First Name</td>
<td>Last Name</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
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</thead>
<tbody>
<tr>
<td>Two Memorial City Plaza</td>
<td></td>
</tr>
<tr>
<td>Street Address</td>
<td></td>
</tr>
<tr>
<td>820 Gessner, Suite 170</td>
<td></td>
</tr>
<tr>
<td>Street Address Line 2</td>
<td></td>
</tr>
<tr>
<td>Houston</td>
<td>Texas</td>
</tr>
<tr>
<td>City</td>
<td>State / Province</td>
</tr>
<tr>
<td>77024-4298</td>
<td>United States</td>
</tr>
<tr>
<td>Postal / Zip Code</td>
<td>Country</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Phone Number</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>713</td>
<td>984-8222</td>
</tr>
<tr>
<td>Area Code</td>
<td>Phone Number</td>
</tr>
</tbody>
</table>
E-mail  *
peeler@coveler.com

Name of ESD's general manager, executive director or administrator (N/A if none)

First Name  Last Name
Bulverde Spring B

E-mail
n/a

Name of fire chief or EMS CEO

First Name  Last Name
Mark  Southwell

E-mail
mark.southwell@bsb911.com

Names of Other Consultant

First Name  Last Name
Ken  Ward

Service provided (i.e. audit)

audit
E-mail
ken@reedcocpa.com

Names of Other Consultant
n/a
First Name  Last Name

Service provided (i.e. audit)

E-mail

Question or comment

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