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) *

Village Mills ESD No. 8

County or Counties in Which ESD is Located *

Hardin, Tyler

ESD Business Address *

204 Button Willow
Street Address

PO Box 117
Street Address Line 2

Village Mills
City

77663
Postal / Zip Code

Texas
State / Province

United States
Country

ESD email *

vmesd8@gmail.com
ESD phone *

409 - 499-7859
Area Code Phone Number

ESD website
vmesd8.org

Type of ESD *

- Fire
- Emergency Medical Service
- Both

Annual ESD Budget *

$34,000*

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

$0.03/$100

Population of ESD
approx. 1500

Area (sq. miles) of ESD
28

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)
<table>
<thead>
<tr>
<th>Name of Person Completing this Form *</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Sharon</td>
<td>Wornick</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E-mail *</th>
<th></th>
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</thead>
<tbody>
<tr>
<td><a href="mailto:swornickcp@gmail.com">swornickcp@gmail.com</a></td>
<td></td>
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<table>
<thead>
<tr>
<th>Phone Number *</th>
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<tbody>
<tr>
<td>409</td>
<td>834-2266</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of ESD President (Commissioner No. 1) *</th>
<th></th>
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<tbody>
<tr>
<td>Mike</td>
<td>Liles</td>
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</tbody>
</table>

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<tr>
<th>E-mail *</th>
<th></th>
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<tbody>
<tr>
<td><a href="mailto:HardinComm1@gmail.com">HardinComm1@gmail.com</a></td>
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<table>
<thead>
<tr>
<th>Term Expires (example: 12/31/20) *</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>12/31/2022</td>
<td></td>
</tr>
</tbody>
</table>
Name of ESD Vice President (Commissioner No. 2) *

Sharon Wornick

E-mail *

HardinComm3@gmail.com

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

12/31/2022

Name of ESD Secretary (Commissioner No. 3) *

Mike McDonald

E-mail *

HardinComm2@gmail.com

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

12/31/2022

Name of ESD Treasurer (Commissioner No. 4) *

Bob Fisher

E-mail *

TylerComm2@gmail.com

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

12/31/2021
Name of ESD Commissioner (Commissioner No. 5) *
Duane Bales
First Name Last Name

E-mail *
TylerComm1@gmail.com

Term Expires (example: 12/31/19) *
12/31/2021

Name of ESD's legal counsel *
Timothy McDonough
First Name Last Name

Address
8098 FM 943
Street Address

City
Kountze

Texas
State / Province

Postal / Zip Code
77625

Country
United States

Phone Number
409 - 553-9395
Area Code Phone Number
E-mail  *

tnkmcd@wtd.net

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

First Name  Last Name

E-mail

Name of fire chief or EMS CEO

Randy  Odom

First Name  Last Name

E-mail

randycodom@aol.com

Names of Other Consultant

First Name  Last Name

Service provided (i.e. audit)


E-mail

__________________________________

Names of Other Consultant

First Name  Last Name

Service provided (i.e. audit)

E-mail

__________________________________

Question or comment

*Budget amount adjusted from previously reported amounts to reflect annual budget and not overall totals

Submit Form

Must be using Adobe Reader to submit form.