

**Record of Commissioner Services for Compensation
Under Health and Safety Code §775.038**

STATE OF TEXAS
FORT BEND COUNTY EMERGENCY
SERVICES DISTRICT NO. 7

Commissioner _____ performed the following duties of a commissioner as defined in §775.038 and by reference Water Code §49.060(c) on the following dates:

- Attend District meeting held on _____.
- Other: _____ on _____.
- Attend District meeting held on _____.
- Other: _____ on _____.

The maximum allowed compensation is \$150 per day.

Verification in the presence of a notary:

I, the undersigned member of the Board of Commissioners of the District do hereby solemnly swear (or affirm) that I performed the stated duties for the District. The expenses listed, if any, were reasonably and necessarily incurred by me in connection with the service(s) described.

By: _____ Date: _____

Printed name: _____

STATE OF TEXAS §
COUNTY OF _____ §

This instrument was signed and sworn before me on the _____ day of _____ 20____, by the above named commissioner.

(NOTARY SEAL)

Notary Public, State of Texas

Unsworn Declaration in Lieu of Verification (if a notary is not available):

"My name is _____, my date of birth is _____, and my address is _____. I declare under penalty of perjury that the foregoing is true and correct. Executed in _____ County, State of Texas, on the _____ day of _____, 20____."

Declarant