

## Emergency Services District (ESD) Reporting Form Jan. 1, 2020

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, 2020.

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) \***

Kenedy County Fire & Emergency Services District No. 1

**County or Counties in Which ESD is Located \***

Kenedy

**ESD Business Address \***

P O Box 221

Street Address

Street Address Line 2

Sarita

City

Texas

State / Province

78385

Postal / Zip Code

United States

Country

**ESD email \***

[kenedyesd1@gmail.com](mailto:kenedyesd1@gmail.com)

**ESD phone \***

361 - 294-5511

Area Code Phone Number

**ESD website**

none

**Type of ESD \***

- Fire
- Emergency Medical Service
- Both

**Annual ESD Budget \***

721950.00

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

\$0.064241

**Population of ESD**

420

**Area (sq. miles) of ESD**

1946

**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)**

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**Name of Person Completing this Form \***

Leo Villarreal  
First Name Last Name

**E-mail \***

dlvillarreal@villarrealaw.net

**Phone Number \***

361 592-9347  
Area Code Phone Number

**Name of ESD President (Commissioner No. 1) \***

William Dieterle  
First Name Last Name

**E-mail \***

wed@kenedy.org

**Term Expires (example: 12/31/20) \***

12/31/2020

**Name of ESD Vice President (Commissioner No. 2) \***

Denise                  Recio  
First Name              Last Name

**E-mail \***

reciojoedenise@yahoo.com

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

12/31/2021

**Name of ESD Secretary (Commissioner No. 3) \***

Mitchell                Thomas  
First Name              Last Name

**E-mail \***

mitchellthomas65@msn.com

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

12/31/2021

**Name of ESD Treasurer (Commissioner No. 4) \***

Mitchell                Thomas  
First Name              Last Name

**E-mail \***

mitchellthomas65@msn.com

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

12/31/2021

**Name of ESD Commissioner (Commissioner No. 5) \***

Michelle

First Name

Alegria

Last Name

**E-mail \***

alegriamichelle@icloud.com

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

12/31/2020

**Name of ESD's legal counsel \***

Leo

First Name

Villarreal

Last Name

**Address**

P O Box 1433

Street Address

Street Address Line 2

Kingsville

City

Texas

State / Province

78364

Postal / Zip Code

United States

Country



**Phone Number**

361

Area Code

- 592-9347

Phone Number

**E-mail \***

dlvillarreal@villarrealaw.net

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

Leo Villarreal  
First Name Last Name

**E-mail**

dlvillarreal@villarrealaw.net

**Name of fire chief or EMS CEO**

Jose Mendieta  
First Name Last Name

**E-mail**

kenedyesd1@gmail.com

**Names of Other Consultant**

First Name Last Name

**Service provided (i.e. audit)**

**E-mail**

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**Names of Other Consultant**

First Name

Last Name

**Service provided (i.e. audit)**

**E-mail**

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**Question or comment**

**Submit Form**