

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) *

Parker County ESD No. 3

County or Counties in Which ESD is Located *

Parker

ESD Business Address *

150 N. Oakridge Drive

Street Address

Street Address Line 2

Hudson Oaks

City

Texas

State / Province

76087

Postal / Zip Code

United States

Country

ESD email *

dlambert@esd3.org

ESD phone *

817 - 5990576
Area Code Phone Number

ESD website

esd3.org

Type of ESD *

- Fire
- Emergency Medical Service
- Both

Annual ESD Budget *

1,753,540.00

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

\$0.10

Population of ESD

15,000

Area (sq. miles) of ESD

78

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)

Name of Person Completing this Form *

Donna Lambert
First Name Last Name

E-mail *

dlambert@esd3.org

Phone Number *

337 303-7875
Area Code Phone Number

Name of ESD President (Commissioner No. 1) *

Ed Huddleston
First Name Last Name

E-mail *

ehuddleston@esd3.org

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

12/31/20

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

Jerry Brooks
First Name Last Name

E-mail *

jbrooks@esd3.org

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

12/31/21

Name of ESD Secretary (Commissioner No. 3) *

Betty Reinert
First Name Last Name

E-mail *

breinert@esd3.org

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

12/31/20

Name of ESD Treasurer (Commissioner No. 4) *

Elvera Johnson
First Name Last Name

E-mail *

ejohnson@esd3.org

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

12/31/20

Name of ESD Commissioner (Commissioner No. 5) *

N/A
First Name Last Name

E-mail *

N/A

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

N/A

Name of ESD's legal counsel *

Ken Campbell
First Name Last Name

Address

4807 Spicewood Springs Road
Street Address

Street Address Line 2

Austin Texas
City State / Province

78759 United States
Postal / Zip Code Country

Phone Number

512 - 338-5322
Area Code Phone Number

E-mail *

kcampbell@bajb.com

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

Donna Lambert
First Name Last Name

E-mail

dlambert@esd3.org

Name of fire chief or EMS CEO

Ronald Schultz
First Name Last Name

E-mail

rschultz@esd3.org

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

Submit Form