Form #2204 Rev 9/2017

Submit to: SECRETARY OF STATE Government Filings Section P O Box 12887 Austin, TX 78711-2887 512-463-6334 FAX 512-463-5569

Filing Fee: None

STE OF

OATH OF OFFICE

This space reserved for office use

N THE NAME AND BY THE AUTHORITY OF	
, Eva Alexander	, do solemnly swear (or affirm), that I will faithfull
execute the duties of the office of Councilmember	0
the State of Texas, and will to the best of my ability pof the United States and of this State, so help me God	preserve, protect, and defend the Constitution and laws .
Signa Signa	Alexander ture of Officer

Certification of Person Authorized to Administer Oath

State of	Texas				
County of	Cherokee		· 6		
Sworn to an	d subscribed before me on this	8th	day of	May	, 20 23

(Affix Notary Seal, only if oath administered by a notary.)

MELANIE D WILLIAMSON Notary ID #129450208 My Commission Expires June 7, 2025 Melavie Pounds Williamson

Signature of Notary Public or

Signature of Other Person Authorized to Administer An Oath

Melanie Denise Williamson (Pounds)

Printed or Typed Name

Form #2204 Rev 9/2017

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Filing Fee: None

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OATH OF OFFICE

IN THE NAME AND BY THE AUTHORITY I, Clint Smith execute the duties of the office of Councilment the State of Texas, and will to the best of my ab of the United States and of this State, so help me	ber of of bility preserve, protect, and defend the Constitution and laws
	Signature of Officer
Certification of Person	on Authorized to Administer Oath
State of Texas	
County of Cherokee	
Sworn to and subscribed before me on this8	oth _day of _ May, 20_23
(Affix Notary Seal,	
	Melane Welliamson Signature of Notary Public or Signature of Other Person Authorized to Administer An Oath
7	Melanie Denise Williamson (Pounds)
-	Printed or Typed Name

Form #2204 Rev 9/2017

Submit to: SECRETARY OF STATE Government Filings Section P O Box 12887 Austin, TX 78711-2887 512-463-6334 FAX 512-463-5569

Filing Fee: None

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OATH OF OFFICE

IN THE NA	ME AND BY THE AUTHORITY OF THE STATE OF TEXAS,
I, Gordon (Cole , do solemnly swear (or affirm), that I will faithfully
execute the c	duties of the office of Councilmember of
the State of	Texas, and will to the best of my ability preserve, protect, and defend the Constitution and laws
	d States and of this State, so help me God.
	Signature of Officer
	Certification of Person Authorized to Administer Oath
State of	Texas
County of	Cherokee
Sworn to an	d subscribed before me on this8thday ofMay, 20_23
(Affix	Notary Seal,

only if oath

administered by AllE D WILLIAMSON
MELANIE D #129450208
My Commission Expires
June 7, 2025

Melanie Williamson

Signature of Notary Public or

Signature of Other Person Authorized to Administer An Oath

Melanie Denise Williamson (Pounds)

Printed or Typed Name

Form #2204 Rev 9/2017

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FAX 512-463-5569		
Filing Fee: None	OATH OF OFFICE	
I, Kayla White execute the duties of the office of C	est of my ability preserve, protect, and defend the Constitution and laws	
	Kayla Whita Signature of Officer	
	ion of Person Authorized to Administer Oath	
State of Texas		
County of Cherokee		
Sworn to and subscribed before me	on this 10th day of July , 20 23.	
(Affix Notary Seal, only if oath administered by a notary.)		
MELANIE D WILLIAMSO Notary ID #129450208 My Commission Expire	Signature of Other Person Authorized to Administer An	

June 7, 2025

Oath

Melanie Denise Williamson (Pounds)

Printed or Typed Name