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



OATH OF OFFICE

IN THE NAME AND BY THE AUTHORITY OF THE STATE OF TEXAS,

I, <u>Steve Brown, Ed.D.</u>, do solemnly swear (or affirm), that I will faithfully execute the duties of the office of <u>Ector County ISD</u>, Board of Trustee, Position 5 of the State of Texas, and will to the best of my ability preserve, protect, and defend the Constitution and laws of the United States and of this State, so help me God.

Signature of Officer

Certification of Person Authorized to Administer Oath						
State of	Texas					
County of	Ector					
Sworn to and subscribed before me on this		11	day of	May	, 20 <u>21</u> .	
(Affix Notary Seal,						
only if oath						
administered by a						
notary	y.)					
Signature of Notary Public or						
			Signature of Other Person Authorized to Administer An			
		Oath				
		D 1 7				

Printed or Typed Name

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