



# Certificate of Appointment

For a  
**Health Authority**

The Health Authority has been appointed and approved by the:

(Check the appropriate designation below)

\_\_\_ Commissioners Court for Brown County

\_\_\_ Governing Body for the Municipality of \_\_\_\_\_

\_\_\_ Director, \_\_\_\_\_ Health Department

\_\_\_ Director, \_\_\_\_\_ Public Health District

I, E. Ray West III, acting in my capacity as:

(Check the appropriate designation below)

\_\_\_ County Judge or Designee

\_\_\_ Mayor or Designee

\_\_\_ Non-physician and the Local Health Department Director

\_\_\_ Non-physician and the Public Health District Director

do hereby certify the physician, James Hays, M.D., who is licensed by the Texas Board of Medical Examiners, was duly appointed as the (check as applicable),

Health Authority

\_\_\_ Health Authority Designee

for the jurisdiction of Brown County, Texas.

Date term of office begins October 17, 2016

Date term of office ends October 16, 2018, unless removed by law.

I certify to the above information on this the 17 day of October, 2016

E Ray West III  
Signature of Appointing Official

October 17, 2016  
(Exhibit #5)