

**District 12 – Texas Extension Association for Family & Consumer Science**

**Membership Application Year:** 2021-2022

Thank you for your interest in joining D12 TEAFCS. Please fill out and submit this membership form to D12 Treasurer: Dru Benavides, no later than November 15, 2021.

**NOTE: If you are planning to be a NEAFCS member, please submit the NEAFCS Member Application AS WELL. This form is for district records.**

**Personal Information**

Name: Ashley Gregory

Title: CEA - Horticulture

BLT     HST     CEP     FCH     CEP     HORT

Work Address: 410 N. 13th Ave.

County: Hidalgo

City: Edinburg

Zip Code: 78541

**Membership**

Please select the membership desired:

National (\$150)

State (\$65)

District (\$25)

Are you a first-time member with D12 TEAFCS?  Yes     No

Are you a first-time member with NEAFCS?  Yes     No

Please select your strongest area of expertise:

Food & Nutrition

Parenting Education

Community Development

Youth Education

Child Development

Health & Wellness

Financial Literacy

Clothing & Textiles

Physical Activity

# Invoice

## Texas Extension Association Family & Consumer Sciences

Texas AgriLife Extension Service

Phone 830-569-0034 Fax 830-569-0034

Dru.benavides@ag.tamu.edu

INVOICE # 1027

DATE: JANUARY 20, 2022

TO Ashley Gregory  
410 N. 13<sup>th</sup> Ave.  
Edinburg, TX 78541

TREASURER	JOB	PAYMENT TERMS	DUE DATE
Druann Benavides, CEA-FCH	District 12 Treasurer	Due on receipt	January 31, 2022

DESCRIPTION	LINE TOTAL
Association Dues	
NEAFCS Association Dues	\$25.00
<p>Invoice Received by: <u>Sonia Ganza</u> on <u>1/20/22</u></p> <p>Goods/Services Received by: <u>Sonia Ganza</u> on <u>1/20/22</u></p> <p>APPROVED BY: <u>Dr. Andrea A. Valdez</u></p> <p>DATE: <u>1/25/22</u></p>	
Total Due:	\$25.00

Please make all checks payable to District 12 TEAFCS  
Payment is due by January 31, 2022

THANK YOU FOR YOUR BUSINESS!

**TO THE COUNTY AUDITOR  
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES  
TO ASSOCIATIONS OTHER THAN THE TEXAS ASSOCIATION OF COUNTIES**

**THE STATE OF TEXAS  
COUNTY OF HIDALGO**

I, Ashley Gregory, do hereby state that membership in the Texas Extension Association Family & Consumer Sciences, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

- To obtain statutorily required continuing professional education.
- To obtain continuing education necessary to maintain a license or certification.
- To access the association or organization's programs, services, and activities in order to strengthen professional skills and keep up-to-date on developments related to the Department's primary business activities:
  - Publications
  - Periodicals
  - Training
  - Annual Conference
  - Award Programs
  - Representation
  - Technical Inquiry Services

**FOR STATEWIDE ASSOCIATIONS ONLY**

I further state that Texas Extension Assn. Family & Consumer Sciences is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: Ashley Gregory  
TITLE: Hidalgo County Extension Agent-Horticulture

DATE: 1/26/22

Before me Monica Salinas, a Notary Public, appeared Ashley Gregory, and on his/her oath deposed and stated that the facts as set forth in the above affidavit to be true and correct in every respect.



Monica Salinas  
NOTARY PUBLIC IN AND FOR  
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)  
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026



# Active/Affiliate Membership Application & Renewal Form

This is a:  Membership Renewal  New Member Application

Date: 10/26/2021

### Instructions

Please print or type. If you are joining/renewing as an Active member, please submit this form to your state/territory treasurer with your payment of \$100 for national dues and appropriate state/territory dues. If you are joining as an Affiliate member, please submit this form with your \$100 national dues directly to NEAFCS, 325 John Knox Rd. Suite L103 Tallahassee, FL 32303.

### Category (choose one)

Active Membership—To qualify, you must meet the membership qualifications of your state/territory affiliate AND have at least a bachelor's degree and currently be working in Extension in any capacity with family and consumer sciences or home economics programming.

Affiliated Membership—To qualify, you must meet all of the qualifications of Active membership EXCEPT you do not meet the membership qualifications of your state/territory affiliate or there is no state/territory affiliate for you to join.

Katarina		Eva		Rodriguez	
First Name		Middle Name		Last Name	
CEA 4-H Youth & Development			Texas A&M AgriLife Extension Service		
Job Title			Employer		
410 North 13 <sup>th</sup> Avenue		Edinburg		Texas	78541
Work Mailing Address		City		State/Territory	Zip
Work Physical Address (if different from work mailing address)		City		State/Territory	Zip
5323 N. FM 88		Weslaco		Texas	78599
Home Address		City		State/Territory	Zip
katarina.rodriguez@agnet.tamu.edu		Kuker002@gmail.com			
Work Email Address		Home Email Address			
(956)383-1026		(956)383-1735		(956)975-9671	
Work Phone/Extension		Work Fax		Home Phone	

If you work in a county extension office, in which county is the above office located: Hidalgo

Send mail to my (check one):  Work Address  Home Address Are you a former member of NEAFCS?  Yes  No

If you are a former member, please provide the name under which the membership was listed, years of membership and corresponding state/territory:

Katarina Rodriguez and Member since 2019

Please check the ONE box that BEST describes YOUR ROLE IN EXTENSION:

Extension Agent  Extension Specialist  County Director  State Program Leader  State Extension Administrator

Please check the ONE box that BEST describes your AREA OF GREATEST EXPERTISE:

<input type="checkbox"/> Nutrition	<input type="checkbox"/> Parenting Education	<input type="checkbox"/> Community Development	<input type="checkbox"/> Aging
<input type="checkbox"/> Food Safety	<input type="checkbox"/> Child Development	<input type="checkbox"/> Administration	<input type="checkbox"/> Health
<input type="checkbox"/> Financial Management	<input type="checkbox"/> Housing	<input checked="" type="checkbox"/> 4-H Youth Development	
<input type="checkbox"/> Human Development	<input type="checkbox"/> Clothing/Textiles	<input type="checkbox"/> Other: _____	

Please indicate UP TO 3 (three) MAJOR AREAS OF PROGRAMMING for which you have responsibility:

<input checked="" type="checkbox"/> Nutrition	<input type="checkbox"/> Parenting Education	<input type="checkbox"/> Community Development	<input type="checkbox"/> Aging
<input type="checkbox"/> Food Safety	<input checked="" type="checkbox"/> Child Development	<input type="checkbox"/> Administration	<input type="checkbox"/> Health
<input type="checkbox"/> Financial Management	<input type="checkbox"/> Housing	<input checked="" type="checkbox"/> 4-H Youth Development	
<input type="checkbox"/> Human Development	<input type="checkbox"/> Clothing/Textiles	<input type="checkbox"/> Other: _____	

For Active membership status, submit this form directly to your State Affiliate Treasurer. If joining as Affiliate member (see qualifications above), send your form directly to: NEAFCS National Office, 325 John Knox Rd, Suite L-103, Tallahassee, FL 32303

**District 12 – Texas Extension Association for Family & Consumer Science**

**Membership Application Year:** 2021-2022

Thank you for your interest in joining D12 TEAFCS. Please fill out and submit this membership form to D12 Treasurer: Dru Benavides, no later than November 15, 2021.

**NOTE: If you are planning to be a NEAFCS member, please submit the NEAFCS Member Application AS WELL. This form is for district records.**

**Personal Information**

Name: Katarina Rodriguez

Title: CEA- 4-H Youth and Development

BLT     HST     CEP     FCH     CEP     HORT

Work Address: 410 North 13th Avenue

County: Hidalgo

City: Edinburg

Zip Code: 78541

**Membership**

Please select the membership desired:

National (\$150)

State (\$65)

District (\$25)

Are you a first-time member with D12 TEAFCS?  Yes     No

Are you a first-time member with NEAFCS?  Yes     No

Please select your strongest area of expertise:

Food & Nutrition

Parenting Education

Community Development

Youth Education

Child Development

Health & Wellness

Financial Literacy

Clothing & Textiles

Physical Activity

# Invoice

## Texas Extension Association Family & Consumer Sciences

Texas AgriLife Extension Service

Phone 830-569-0034 Fax 830-569-0034

Dru.benavides@ag.tamu.edu

INVOICE # 1027

DATE: JANUARY 20, 2022

TO Katarina Rodriguez  
410 N. 13<sup>th</sup> Ave.  
Edinburg, TX 78541

TREASURER	JOB	PAYMENT TERMS	DUE DATE
Druann Benavides, CEA-FCH	District 12 Treasurer	Due on receipt	January 31, 2022

DESCRIPTION	LINE TOTAL
Association Dues	
NEAFCS Association Dues	\$150.00
<p>Invoice Received by: <u>Sonia Garza</u> on <u>1/20/22</u></p> <p>Goods/Services Received by: <u>Sonia Garza</u> on <u>1/20/22</u></p> <p>APPROVED BY: <u>Dr. Andrea A Valdez</u> DATE: <u>1/25/22</u></p> <p>Total Due: \$150.00</p>	

Please make all checks payable to District 12 TEAFCS  
Payment is due by January 31, 2022

THANK YOU FOR YOUR BUSINESS!

NEAFCS  
325 John Knox Rd.  
Suite L103  
Tallahassee, FL 32303  
850-205-5638  
membership@neafcs.org

## INVOICE 3990



Texas A&M AgriLife Extension  
Katarina Rodriguez  
219 Calizto Mora Ave  
Falfurrias, Texas 78355  
katarina.rodriguez@ag.tamu.edu

Invoice # 3990  
Invoice Date 09/15/2021  
Invoice Due 12/31/2021

<b>Amount Due</b>	<b>\$ 0.00</b>
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### Transactions

Description	Amount
Membership Renewal - Active Member (through December 31, 2022)	\$ 100.00

### Payments

Description	Amount
Check - 3495 on 01/04/2022	-\$ 100.00

<b>Total Amount</b>	<b>\$ 100.00</b>
<b>Amount Paid</b>	<b>-\$ 100.00</b>
<b>Amount Due</b>	<b>\$ 0.00</b>

NEAFCS  
325 John Knox Rd.  
Suite L103  
Tallahassee, FL 32303

**TO THE COUNTY AUDITOR  
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES  
TO ASSOCIATIONS OTHER THAN THE TEXAS ASSOCIATION OF COUNTIES**

**THE STATE OF TEXAS  
COUNTY OF HIDALGO**

I, Katarina Rodriguez, do hereby state that membership in the Texas Extension Association Family & Consumer Sciences, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

- To obtain statutorily required continuing professional education.
- To obtain continuing education necessary to maintain a license or certification.
- To access the association or organization's programs, services, and activities in order to strengthen professional skills and keep up-to-date on developments related to the Department's primary business activities:
  - Publications
  - Periodicals
  - Training
  - Annual Conference
  - Award Programs
  - Representation
  - Technical Inquiry Services

**FOR STATEWIDE ASSOCIATIONS ONLY**

I further state that Texas Extension Assn. Family & Consumer Sciences is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: Katarina Rodriguez  
TITLE: Hidalgo County Extension Agent-4-H Youth Development

DATE: 1/26/2022

Before me Monica Salinas, a Notary Public, appeared Katarina Rodriguez, and on his/her oath deposed and stated that the facts as set forth in the above affidavit to be true and correct in every respect.



Monica Salinas  
NOTARY PUBLIC IN AND FOR  
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)  
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026  
COUNTY AUDITOR'S FORM: RE-CA-041B  
REVISED: 12-2012



# Active/Affiliate Membership Application & Renewal Form

This is a:  Membership Renewal  New Member Application

Date: November 17, 2020

### Instructions

Please print or type. If you are joining/renewing as an Active member, please submit this form to your state/territory treasurer with your payment of \$100 for national dues and appropriate state/territory dues. If you are joining as an Affiliate member, please submit this form with your \$100 national dues directly to NEAFCS, 325 John Knox Rd. Suite L103 Tallahassee, FL 32303.

### Category (choose one)

**Active Membership**—To qualify, you must meet the membership qualifications of your state/territory affiliate AND have at least a bachelor's degree and currently be working in Extension in any capacity with family and consumer sciences or home economics programming.

**Affiliated Membership**—To qualify, you must meet all of the qualifications of Active membership EXCEPT you do not meet the membership qualifications of your state/territory affiliate or there is no state/territory affiliate for you to join.

Joanne		Ureste-Armijo	
First Name	Middle Name	Last Name	
Family & Community Health County Extension Agent		Texas A&M AgriLife Extension	
Job Title		Employer	
410 N. 13 <sup>th</sup> Ave.,	Edinburg	TX	78541
Work Mailing Address	City	State/Territory	Zip
Work Physical Address (if different from work mailing address)		City	State/Territory Zip
1931 Evaristo Ln.	Edinburg	TX	78541
Home Address	City	State/Territory	Zip
Joanne.Ureste@ag.tamu.edu		Joanneu29@yahoo.com	
Work Email Address		Home Email Address	
956-383-1026	383-1735	956-789-6719	
Work Phone/Extension	Work Fax	Home Phone	

If you work in a county extension office, in which county is the above office located: Hidalgo

Send mail to my (check one):  Work Address  Home Address Are you a former member of NEAFCS?  Yes  No

If you are a former member, please provide the name under which the membership was listed, years of membership and corresponding state/territory:

Please check the ONE box that BEST describes YOUR ROLE IN EXTENSION:

Extension Agent  Extension Specialist  County Director  State Program Leader  State Extension Administrator

Please check the ONE box that BEST describes your AREA OF GREATEST EXPERTISE:

<input type="checkbox"/> Nutrition	<input checked="" type="checkbox"/> Parenting Education	<input type="checkbox"/> Community Development	<input type="checkbox"/> Aging
<input type="checkbox"/> Food Safety	<input type="checkbox"/> Child Development	<input type="checkbox"/> Administration	<input type="checkbox"/> Health
<input type="checkbox"/> Financial Management	<input type="checkbox"/> Housing	<input type="checkbox"/> 4-H Youth Development	
<input type="checkbox"/> Human Development	<input type="checkbox"/> Clothing/Textiles	<input type="checkbox"/> Other: _____	

Please indicate UP TO 3 (three) MAJOR AREAS OF PROGRAMMING for which you have responsibility:

<input type="checkbox"/> Nutrition	<input type="checkbox"/> Parenting Education	<input type="checkbox"/> Community Development	<input type="checkbox"/> Aging
<input type="checkbox"/> Food Safety	<input type="checkbox"/> Child Development	<input type="checkbox"/> Administration	<input type="checkbox"/> Health
<input type="checkbox"/> Financial Management	<input type="checkbox"/> Housing	<input type="checkbox"/> 4-H Youth Development	
<input type="checkbox"/> Human Development	<input type="checkbox"/> Clothing/Textiles	<input type="checkbox"/> Other: _____	

For Active membership status, submit this form directly to your State Affiliate Treasurer.  
If joining as Affiliate member (see qualifications above), send your form directly to:  
NEAFCS National Office, 325 John Knox Rd, Suite L-103, Tallahassee, FL 32303

# Invoice

## Texas Extension Association Family & Consumer Sciences

Texas AgriLife Extension Service

Phone 830-569-0034 Fax 830-569-0034

Dru.benavides@ag.tamu.edu

INVOICE # 1027

DATE: JANUARY 20, 2022

TO Joanne Ureste-Armijo  
410 N. 13<sup>th</sup> Ave.  
Edinburg, TX 78541

TREASURER	JOB	PAYMENT TERMS	DUE DATE
Druann Benavides, CEA-FCH	District 12 Treasurer	Due on receipt	January 31, 2022

DESCRIPTION	LINE TOTAL
Association Dues	
NEAFCS Association Dues	\$150.00
<p>Invoice Received by: <u>Sonia Garza</u> on <u>1/20/22</u></p> <p>Goods/Services Received by: <u>Sonia Garza</u> on <u>1/20/22</u></p> <p>APPROVED BY: <u>Dr. Andrei A Valdez</u> DATE: <u>1/25/22</u></p> <p>Total Due: \$150.00</p>	

Please make all checks payable to District 12 TEAFCS  
Payment is due by January 31, 2022

THANK YOU FOR YOUR BUSINESS!

**TO THE COUNTY AUDITOR  
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES  
TO ASSOCIATIONS OTHER THAN THE TEXAS ASSOCIATION OF COUNTIES**

**THE STATE OF TEXAS  
COUNTY OF HIDALGO**

I, Joanne Ureste-Armijo, do hereby state that membership in the Texas Extension Association Family & Consumer Sciences, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

- To obtain statutorily required continuing professional education.
- To obtain continuing education necessary to maintain a license or certification.
- To access the association or organization's programs, services, and activities in order to strengthen professional skills and keep up-to-date on developments related to the Department's primary business activities:
  - Publications
  - Periodicals
  - Training
  - Annual Conference
  - Award Programs
  - Representation
  - Technical Inquiry Services

**FOR STATEWIDE ASSOCIATIONS ONLY**

I further state that Texas Extension Assn. Family & Consumer Sciences is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: *Joanne Ureste-Armijo*  
TITLE: Hidalgo County Extension Agent-Family & Community Health

DATE: 1/26/2022

Before me Monica Salinas, a Notary Public, appeared Joanne Ureste-Armijo, and on his/her oath depose and stated that the facts as set forth in the above affidavit to be true and correct in every respect.



*Monica Salinas*  
NOTARY PUBLIC IN AND FOR  
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)  
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026



# Active/Affiliate Membership Application & Renewal Form

This is a:  Membership Renewal  New Member Application

Date: November 9, 2021

### Instructions

Please print or type. If you are joining/renewing as an Active member, please submit this form to your state/territory treasurer with your payment of \$100 for national dues and appropriate state/territory dues. If you are joining as an Affiliate member, please submit this form with your \$100 national dues directly to NEAFCS, 325 John Knox Rd. Suite L103 Tallahassee, FL 32303.

### Category (choose one)

**Active Membership**—To qualify, you must meet the membership qualifications of your state/territory affiliate AND have at least a bachelor's degree and currently be working in Extension in any capacity with family and consumer sciences or home economics programming.

**Affiliated Membership**—To qualify, you must meet all of the qualifications of Active membership EXCEPT you do not meet the membership qualifications of your state/territory affiliate or there is no state/territory affiliate for you to join.

Dr. Andrea	Anne	Valdez
First Name	Middle Name	Last Name
County Extension Agent-Family & Community Health		Texas A&M AgriLife Extension Service
Job Title		Employer
410 N. 13 <sup>th</sup> Ave	Edinburg	Texas 78541
Work Mailing Address	City	State/Territory Zip
Same as above		
Work Physical Address (if different from work mailing address)	City	State/Territory Zip
6107 N. Seminary Rd.	Edinburg	Texas 78541
Home Address	City	State/Territory Zip
<a href="mailto:Andrea.valdez@ag.tamu.edu">Andrea.valdez@ag.tamu.edu</a>	<a href="mailto:Andrea629@hotmail.com">Andrea629@hotmail.com</a>	
Work Email Address	Home Email Address	
956-383-1026	956-383-1735	956-292-6664
Work Phone/Extension	Work Fax	Home Phone

If you work in a county extension office, in which county is the above office located: Hidalgo

Send mail to my (check one):  Work Address  Home Address Are you a former member of NEAFCS?  Yes  No

If you are a former member, please provide the name under which the membership was listed, years of membership and corresponding state/territory:

Please check the ONE box that BEST describes YOUR ROLE IN EXTENSION:

Extension Agent  Extension Specialist  County Director  State Program Leader  State Extension Administrator

Please check the ONE box that BEST describes your AREA OF GREATEST EXPERTISE:

<input checked="" type="checkbox"/> Nutrition	<input type="checkbox"/> Parenting Education	<input type="checkbox"/> Community Development	<input type="checkbox"/> Aging
<input type="checkbox"/> Food Safety	<input type="checkbox"/> Child Development	<input type="checkbox"/> Administration	<input type="checkbox"/> Health
<input type="checkbox"/> Financial Management	<input type="checkbox"/> Housing	<input type="checkbox"/> 4-H Youth Development	
<input type="checkbox"/> Human Development	<input type="checkbox"/> Clothing/Textiles	<input type="checkbox"/> Other: _____	

Please indicate UP TO 3 (three) MAJOR AREAS OF PROGRAMMING for which you have responsibility:

<input checked="" type="checkbox"/> Nutrition	<input type="checkbox"/> Parenting Education	<input type="checkbox"/> Community Development	<input type="checkbox"/> Aging
<input checked="" type="checkbox"/> Food Safety	<input type="checkbox"/> Child Development	<input type="checkbox"/> Administration	<input type="checkbox"/> Health
<input type="checkbox"/> Financial Management	<input type="checkbox"/> Housing	<input type="checkbox"/> 4-H Youth Development	
<input type="checkbox"/> Human Development	<input type="checkbox"/> Clothing/Textiles	<input checked="" type="checkbox"/> Other: <u>Leadership</u>	

For Active membership status, submit this form directly to your State Affiliate Treasurer.  
If joining as Affiliate member (see qualifications above), send your form directly to:  
NEAFCS National Office, 325 John Knox Rd, Suite L-103, Tallahassee, FL 32303

# Invoice

## Texas Extension Association Family & Consumer Sciences

Texas AgriLife Extension Service

Phone 830-569-0034 Fax 830-569-0034

Dru.benavides@ag.tamu.edu

INVOICE # 1027

DATE: JANUARY 20, 2022

TO Dr. Andrea Valdez  
410 N. 13<sup>th</sup> Ave.  
Edinburg, TX 78541

TREASURER	JOB	PAYMENT TERMS	DUE DATE
Druann Benavides, CEA-FCH	District 12 Treasurer	Due on receipt	January 31, 2022

DESCRIPTION	LINE TOTAL
Association Dues	
NEAFCS Association Dues	\$150.00
<p>Invoice Received by: <u>Sonia Garza</u> on <u>1/20/22</u> Goods/Services Received by: <u>Sonia Garza</u> on <u>1/20/22</u></p> <p>APPROVED BY: <u>Dr. Andrea A Valdez</u> DATE: <u>1/23/22</u></p> <p>Total Due: \$150.00</p>	

Please make all checks payable to District 12 TEAFCS  
Payment is due by January 31, 2022

THANK YOU FOR YOUR BUSINESS!

**TO THE COUNTY AUDITOR  
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES  
TO ASSOCIATIONS OTHER THAN THE TEXAS ASSOCIATION OF COUNTIES**

**THE STATE OF TEXAS  
COUNTY OF HIDALGO**

I, Dr. Andrea Valdez, do hereby state that membership in the Texas Extension Association Family & Consumer Sciences, and dues to be paid to the association, serve to accomplish one or more of the following County purposes:

- To obtain statutorily required continuing professional education.
- To obtain continuing education necessary to maintain a license or certification.
- To access the association or organization's programs, services, and activities in order to strengthen professional skills and keep up-to-date on developments related to the Department's primary business activities:
  - Publications
  - Periodicals
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  - Award Programs
  - Representation
  - Technical Inquiry Services

**FOR STATEWIDE ASSOCIATIONS ONLY**

I further state that Texas Extension Assn. Family & Consumer Sciences is a statewide association with a minimum membership of at least 25 percent of eligible political subdivisions.

SIGNATURE: Dr. Andrea A Valdez  
TITLE: Hidalgo County Extension Educator-Family & Community Health Administrator

DATE: 01/28/22

Before me Monica Salinas, a Notary Public, appeared Dr. Andrea Valdez, and on his/her oath deposed and stated that the facts as set forth in the above affidavit to be true and correct in every respect.



Monica Salinas  
NOTARY PUBLIC IN AND FOR  
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT: LGC § 113.064(b)  
AUTHORITY TO PAY MEMBERSHIP DUES: GC § 305.026  
COUNTY AUDITOR'S FORM: RE-CA-041B  
REVISED: 12-2012