



OATH OF OFFICE

For Health Authorities in the State of Texas

I, Chris Burling M.D., do solemnly swear (or affirm), that I will faithfully execute the duties of the office of Health Authority (HA) 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.

<u>[Signature]</u> Affiant*	Preferred Name (e.g. "J. Paul Doe")
<u>618 N. Jefferson MP, TX 75455</u> Mailing Address*	<u>K7670</u> Texas Medical License Number*
<u>(903) 563-6053</u> Phone Number (Emergency/After Hours)*	Are you a deputy/backup HA?
<u>burlingmd@gmail.com</u> Email Address (Official, if you have one)*	Additional Email Address

SWORN TO and subscribed before me this 22 day of January, 2024.



[Signature]
Signature of Person Administering Oath

Kent Cooper
Printed Name

Titus County Judge
Title

(Seal)

*=denotes required field



Certificate of Appointment

for a

Health Authority

The Health Authority has been appointed and approved by the:

(Put an "X" by the appropriate designation below)

Commissioners Court for Titus County
 Governing Body for the Municipality of _____
 Director, _____ Health Department
 Director, _____ Public Health District

I, _____, acting in my capacity
as: (Put an "X" by 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, Chris Burling, 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 Titus County, Texas.

Date term of office begins January 22, 2024

Date term of office ends January 21, 2026, unless removed by law.

I certify to the above information on this the 22 day of January, 2024



Signature of Appointing Official



THE STATE OF TEXAS

Statement of Elected/Appointed Officer

(Please type or print legibly)

I Chris Burling M.D. do solemnly swear (or affirm) that I have not directly or indirectly paid, offered, promised to pay, contributed, or promised to contribute any money or thing of value, or promised any public office or employment for the giving or withholding of a vote at the election at which I was elected or as a reward to secure my appointment or confirmation, whichever the case may be, so help me God.

Affiant's Signature

[Handwritten Signature]

Printed Name

Chris Burling

Position to Which Elected/Appointed

Local Health Authority

City and/or County

Titus County

SWORN TO and subscribed before me by affiant on this 22 day of January 2024.



(Seal)

Signature of Person Authorized to Administer Oaths/Affidavits

[Handwritten Signature]

Printed Name

Kent Cooper

Title

Titus County Judge