

**EXHIBIT** 

## **Certificate of Appointment** For a

## Local Health Authority (Please type or print legibly)

| I,       | Robert Newsom   | _, acting in the capacity as            | a                                |
|----------|---|---|----------------------------------|
| (Check   | the appropriate designation below) Non-physician and the Local Homeonic Mayor or Designee X County Judge of Designee Chairperson of the Public Health |   |                                  |
| Texas 1  | eby certify the physician, <u>Dr. Darrel P</u><br>Board of Medical Examiners, was duly<br>Hopkins, Texas.   |   |                                  |
| Date to  | erm of office begins March 28,  | 2022                                    |                                  |
| Date te  | erm of office ends March 28   | _, 20 <u>24</u> , unless remove by law. |                                  |
| The Lo   | ocal Health Authority has been appoin   | ted and approved by the:                |                                  |
| (Check   | the appropriate designation below) Director,  |   |                                  |
|          | City Council for the City of  |   |                                  |
|          | _X_ Commissioners Court for   | Hopkins                                 | County                           |
|          | Board of Health for the   | Pu                                      | blic Health District             |
| I certif | y to the above information on this the  | 28 day of March                         | , 2 <del>0</del> 2 <u>0</u> . 22 |
|          | Signature of app  | ointing official                        | <b>-</b>                         |