



TEXAS PENSION
REVIEW BOARD

Please fill in only portions of form that pertain to your pension plan

P.O. Box 13498, Austin, TX 78711 | Phone: (800) 213-9425 or (512) 463-1736 | Fax: (512) 463-1882 | Email: prb@prb.texas.gov

PENSION SYSTEM REGISTRATION PRB-100

RETIREMENT SYSTEM PROFILE

System Name and Mailing Address
Houston Police Officers' Pension System

Dwayne Ready (Chairman)
CEO, Chairperson or other key contact
713-869-8734 713-869-7657
Phone Number Fax Number
info@hpops.org
E-mail Address
http://www.hpops.org
Web Address

ADMINISTRATOR PROFILE

Company Name and Mailing Address
602 Sawyer ST #300
Houston, TX 77007

Patrick S. Franey (Executive Director)
Contact Person
713-869-8734 713-869-7657
Phone Number Fax Number
info@hpops.org
E-mail Address
http://www.hpops.org
Web Address

SYSTEM BACKGROUND INFORMATION

Article 6243-g 1947 June 30
Specify plan statute, ordinance, or charter governing the system Year Plan Created Plan's Fiscal Year End

Benefit Type: Defined Benefit Defined Contribution Other: _____

Participant Desc: General Employees Police Fire Volunteer Fire Other: _____
(check all that apply)

Are employees covered by Social Security? Yes No

If yes, are pension benefits offset by Social Security payments? Yes No

RETIREMENT SYSTEM GOVERNING BODY

Need to report more than 6 members? Please attach a separate sheet.

Name	Position	Occupation	Mailing Address	Phone Number
Dwayne Ready Terry Bratton	Chairman Vice Chairman	Retired Member Retired Member	602 Sawyer St #300 Houston, TX 77007	713-869-8734
Trey Coleman George Guerrero	Secretary Trustee	Active Member Active Member	602 Sawyer St #300 Houston, TX 77007	713-869-8734
Steven Le	Trustee	Active Member	602 Sawyer St #300 Houston, TX 77007	713-869-8734
Melissa Dubowski	Finance Designee	Designee	611 Walker, 10th floor Houston, TX 77002	713-869-8734
Don Sanders	Mayor Representative	Appointed	600 Travis St, 59th Floor Houston, TX 77002	713-869-8734

CERTIFICATION

I hereby certify that the information provided above is complete and accurate and that I am duly authorized by the pension system to complete this form.

Patrick S. Franey

Authorizing Signature

Patrick S. Franey

Printed Name

1/20/22

Date

Name(s) of other form contributors