

NO CONFLICT DISCLOSURE FORM

Name of Government Officer/Employee: Eduardo Olivarez

Title/Position: Chief Administrative Officer

Contract for Goods/Services: Pharmaceutical Services

Name of Vendors contracting with OR seeking to contract with Hidalgo County:

1. David Max Castro

2. _____

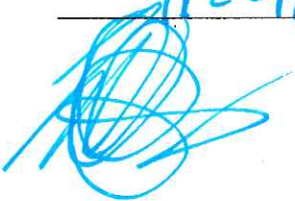
3. _____

4. _____

In my review, grading, selection or approval of the above identified vendors, I hereby affirm that I have no conflicts to disclose (employment/business, family or gifts exceeding \$100) in connection with the above identified vendor(s) as required by section 176 of the Texas Local Government Code.

Signed:

Date:

4/22/16


NO CONFLICT DISCLOSURE FORM

Name of Government Officer/Employee: Consuelo A. Sanchez, RN
Title/Position: RN/Director of Clinical Care Services
Contract for Goods/Services: David Max Castro RPh

Name of Vendors contracting with OR seeking to contract with Hidalgo County:

1. David Max Castro RPh
2. _____
3. _____
4. _____

In my review, grading, selection or approval of the above identified vendors, I hereby affirm that I have no conflicts to disclose (employment/business, family or gifts exceeding \$100) in connection with the above identified vendor(s) as required by section 176 of the Texas Local Government Code.

Signed:

Consuelo A. Sanchez RN

Date:

4/22/16

NO CONFLICT DISCLOSURE FORM

Name of Government Officer/Employee: Gloria Salinas

Title/Position: RN TB Program Manager

Contract for Goods/Services: David Castro Pharmacist MBA

Name of Vendors contracting with OR seeking to contract with Hidalgo County:

1. David Castro
2. _____
3. _____
4. _____

In my review, grading, selection or approval of the above identified vendors, I hereby affirm that I have no conflicts to disclose (employment/business, family or gifts exceeding \$100) in connection with the above identified vendor(s) as required by section 176 of the Texas Local Government Code.

Signed:

Gloria Salinas, RN

Date:

4/28/16