

NO CONFLICT DISCLOSURE FORM

Name of Government Officer/Employee: David Suarez

Title/Position: Chief Administrator

Contract for Goods/Services: Stop Loss Reinsurance Services

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

1. Aetna
2. UNUM
3. _____

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 \$100.00) in connection with the above identified vendor(s) as required by section 176 of the Texas Local Government Code.

David Suarez
Signature

11/9/22
Date

NO CONFLICT DISCLOSURE FORM

Name of Government Officer/Employee: Jorge Arcante

Title/Position: Chief Administrator

Contract for Goods/Services: Stop Loss Reinsurance Services

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

1. Aetna

2. UNUM

3. _____

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 \$100.00) in connection with the above identified vendor(s) as required by section 176 of the Texas Local Government Code.



Signature

10-25-22

Date

NO CONFLICT DISCLOSURE FORM

Name of Government Officer/Employee: Armando Garza

Title/Position: Chief of Staff

Contract for Goods/Services: Stop Loss Reinsurance Services

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

1. Aetna

2. UNUM

3. _____

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 \$100.00) in connection with the above identified vendor(s) as required by section 176 of the Texas Local Government Code.



Signature

11/17/22

Date

NO CONFLICT DISCLOSURE FORM

Name of Government Officer/Employee: Isaac V. Sulemana

Title/Position: Chief of Staff

Contract for Goods/Services: Stop Loss Reinsurance Services

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

1. Aetna

2. UNUM

3. _____

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 \$100.00) in connection with the above identified vendor(s) as required by section 176 of the Texas Local Government Code.

Isaac V. Sulemana

Signature

11/17/2022

Date

NO CONFLICT DISCLOSURE FORM

Name of Government Officer/Employee: Velinda Reyes

Title/Position: Chief of Staff External Affairs

Contract for Goods/Services: Stop Loss Reinsurance Services

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

1. Aetna

2. UNUM

3. _____

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 \$100.00) in connection with the above identified vendor(s) as required by section 176 of the Texas Local Government Code.

Velinda Reyes
Signature

10/25/22
Date 11/15/22