



2812 S. Bus. Hwy 281, Edinburg, Texas 78539 | Phone: (956) 318-2626 | www.co.hidalgo.tx.us/purchasing

## NO-CONFLICT DISCLOSURE FORM

Project No.: 24-0396-12-27-03

Project Name: Emergency Ambulance Services for Precinct No. 3

Type of Service: Emergency Ambulance Services

Evaluator's Name: Jorge Arcaute

Title/Position: Chief Administrator, Pct 3

**Evaluated Firms:**

1. Lone Star Ambulance, Inc.
2. Skyline Emergency Medical Services Inc.
3. \_\_\_\_\_

Through my evaluation 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 aforementioned potential vendor(s), as required by Section 176 of the Texas Local Government Code.

Jorge Arcaute  
Signature

1-15-25  
Date



## NO-CONFLICT DISCLOSURE FORM

Project No.: 24-0396-12-27-03

Project Name: Emergency Ambulance Services for Precinct No. 3

Type of Service: Emergency Ambulance Services

Evaluator's Name: Anibal Resendez

Title/Position: Assistant Chief of Staff, Precinct 3

### Evaluated Firms:

1. Lone Star Ambulance, Inc.
2. Skyline Emergency Medical Services Inc.
3. \_\_\_\_\_

Through my evaluation 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 aforementioned potential vendor(s), as required by Section 176 of the Texas Local Government Code.

Anibal Resendez  
Signature

01/22/2025  
Date



## NO-CONFLICT DISCLOSURE FORM

Project No.: 24-0396-12-27-03

Project Name: Emergency Ambulance Services for Precinct No. 3

Type of Service: Emergency Ambulance Services

Evaluator's Name: Arnold J. Salazar

Title/Position: Executive Assistant III

### Evaluated Firms:

1. Lone Star Ambulance, Inc.
2. Skyline Emergency Medical Services Inc.
3. \_\_\_\_\_

Through my evaluation 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 aforementioned potential vendor(s), as required by Section 176 of the Texas Local Government Code.

  
\_\_\_\_\_  
Signature

01/15/2025  
\_\_\_\_\_  
Date