



NO-CONFLICT DISCLOSURE FORM

Project No.: _____

Project Name: _____ (Tru-Value Bldg)

Type of Service: Building Renovation

Evaluator's Name: Maria Hilda Salinas

Title/Position: Assistant Chief of Staff

Evaluated Firms:

1. Rike Odgen Figueroa Alex Architects, Inc.
2. Sam Garcia Architect, LLC.
3. The Warren Group Architects, Inc.

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.

H. Salinas
Signature

02/10/26
Date



NO-CONFLICT DISCLOSURE FORM

Project No.: _____

Project Name: _____

Type of Service: _____

Evaluator's Name: Isaac V. Sulemana

Title/Position: Chief of Staff

Evaluated Firms:

1. Rike Ogden Figueroa Alex Architects, Inc.
2. Sam Garcia Architect, LLC
3. The Warrent Group Architects, Inc.

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.

Isaac V. Sulemana
Signature

2/11/2026
Date