



**TABULATION**  
**CAMERON COUNTY PURCHASING DEPARTMENT**

ANNUAL QUOTES - MOWING SERVICE  
AS PER ANNUAL WRITTEN QUOTES RECEIVED ON JAN 13, 2025 AT 3:00 PM  
FROM: JAN 14, 2025 - JAN 13, 2026

VENDOR'S NAME TELEPHONE #	SOLID SERVICES PRO LLC 956-372-0133	MJS LANDCARE 956-589-6553	MCC LANDSCAPING DIVISION 956-312-8438 956-407-9885	JAC LAWN CARE SERVICE 956-466-1840
DESCRIPTION				
A. LA FERIA ANNEX	\$ 150.00	\$ 165.00	\$ 240.00	\$ 485.00
B. SANTA ROSA TECH CENTER	\$ 175.00	\$ 180.00	\$ 160.00	\$ 300.00
C. PORT ISABEL ANNEX	\$ 215.00	\$ 225.00	\$ 400.00	\$ 275.00
D. FATHER O'BRIEN CLINIC	\$ 170.00	\$ 175.00	\$ 149.00	\$ 370.00
E. ARROYO CITY VFD	\$ 130.00	\$ 140.00	\$ 300.00	\$ 245.00
<b>*RECOMMENDATION</b>	<b>\$ 840.00</b>	<b>\$ 885.00</b>	<b>\$ 1,249.00</b>	<b>\$ 1,675.00</b>

I HEREBY CERTIFY THE ABOVE TO BE THE CORRECT QUOTES RECEIVED:

  
 APPROVED BY: ROBERTO LUNA - PURCHASING DEPT.  
 PURCHASING AGENT

  
 MAINTENANCE & OPERATION - PEDRO HINOJOSA  
 DIRECTOR

**RECEIVED**  
 By LROBERTS at 3:29 pm, Jan 10, 2025



**CAMERON COUNTY PURCHASING**  
 CAMERON COUNTY, TEXAS  
 1100 E. Monroe Street  
 Brownsville, Texas 78523  
 TELEPHONE (956) 544-0871 FAX (956) 550-7219

ROBERTO LUNA, CPM, CTCO, CTCM  
 INTERIM PURCHASING AGENT

**Annual Written Quotation**

INFORMAL BIDS

REQUEST FOR WRITTEN QUOTATION - \$500 - \$14,999  
 (\$15,000 - \$24,999 WITH COMM. COURT APPROVAL ONLY)

DEPARTMENT REQUESTING QUOTE:  
 Maintenance & Operations

PERSON REQUESTING QUOTE:  
 Jaime Buentello

PHONE:  
 956-544-0823

DATE QUOTES ARE BEING FAXED OUT TO ALL BIDDERS AND PURCHASING DEPT.: 01/03/25

NOTE TO VENDOR: THIS IS NOT AN ORDER

(VENDOR MUST HAVE A PURCHASE ORDER NO. BEFORE PROCEEDING IN ANY MANNER) Pricing must be filled in by the company

DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	TOTAL NET PRICE
A. La Feria Annex - 200 Industrial Way, La Feria, TX. 78559 (See attached perimeter map)	1	EA	\$150	XXXXXXXXXXXXXXXXXXXXXXXXXXXX
B. Santa Rosa Tech Center - 118 Santa Vista Ave., Santa Rosa, TX. 78593 (See attached perimeter map)	1	EA	\$175	XXXXXXXXXXXXXXXXXXXXXXXXXXXX
C. Port Isabel Annex - 505 Hwy 100, Port Isabel, TX. 78578 (See attached perimeter map)	1	EA	\$215	XXXXXXXXXXXXXXXXXXXXXXXXXXXX
D. Father O'Brien Clinic - 142 Champion Dr., Port Isabel, TX. 78578 (See attached perimeter map)	1	EA	\$170	XXXXXXXXXXXXXXXXXXXXXXXXXXXX
E. Arroyo City VFD - 34921 FM 2925, Rio Hondo, TX. 78563 (See attached perimeter map)	1	EA	\$130	XXXXXXXXXXXXXXXXXXXXXXXXXXXX
				XXXXXXXXXXXXXXXXXXXXXXXXXXXX
				XXXXXXXXXXXXXXXXXXXXXXXXXXXX
				XXXXXXXXXXXXXXXXXXXXXXXXXXXX
<b>Co-op pricing will also be considered - Please specify contract #</b>			<b>TOTAL</b>	XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Total installation cost (if applicable) Yes No: \_\_\_\_\_  
 Warranty period on items bid: \_\_\_\_\_  
 Cost and period of extended warranty available: \_\_\_\_\_  
 Do you service the product being quoted? \_\_\_\_\_  
 If "yes", where is the closest service center? \_\_\_\_\_  
 If "no", who will service and where? \_\_\_\_\_

Did you disclose the above quote prices to any County Employee or other individual prior to submitting this quote? Yes  No

COMPANY: Solid Services Pro LLC SIGNATURE Juan Salazar DATE 1/10/2025

Above Prices are F.O.B. Destination - Inside Delivery Terms \_\_\_\_\_ (2% - 10th unless otherwise stated)

Quoted Prices good for 365 days. (Firm unless otherwise stated)

Shipment will be made from: \_\_\_\_\_ Delivery date to County \_\_\_\_\_

All property of Cameron County must remain in the United States at all times - without exception - unless prior approval has been given by Commissioners Court

PLEASE FAX COMPLETED REQUEST TO FAX NO. (956) 550-7219, or E-MAIL vendor.quote@co.cameron.tx.us  
 DELIVER OR MAIL TO CAMERON COUNTY PURCHASING DEPARTMENT 1100 E. MONROE ST., BROWNSVILLE, TEXAS 78520  
 ATTN: PURCHASING DEPARTMENT FOR QUESTIONS CALL (956) 544-0871

QUOTE DEADLINE: MUST BE RECEIVED IN THE COUNTY PURCHASING OFFICE BY: 01/10/25 AT 5:00PM  
 (MUST ALLOW AT LEAST 4 BUSINESS DAYS TO DEADLINE DATE FOR AWARD, UNLESS THE NEED IS BASED ON AN EMERGENCY)

If all (3) three quotations have not been received (as required by Commissioners Court) by the quotation deadline, the deadline may be extended to comply with 3 quotes *minimum requirement*. Vendors that have already submitted quotes prior to the deadline may requote (if they so desire) during the time of extension (revision date) period.

WRITTEN QUOTATIONS WILL BE HELD "CONFIDENTIAL" BY PURCHASING DEPARTMENT UNTIL DEADLINE, AT WHICH TIME VENDORS AND DEPARTMENT STAFF REQUESTING QUOTES ARE WELCOME TO BE PRESENT FOR READING OF PRICES.

**All quotation requirements may not be changed by verbal notification - but can only be changed in writing by issuance of a revised quotation.**





RECEIVED
By LROBERTS at 8:30 am, Jan 13, 2025

CAMERON COUNTY PURCHASING
CAMERON COUNTY, TEXAS
1100 E. Monroe Street
Brownsville, Texas 78523
TELEPHONE (956) 544-0871 FAX (956) 550-7219

ROBERTO LUNA, CPM, CTCD, CTCM
INTERIM PURCHASING AGENT

Annual Written Quotation

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Table with 5 columns: DESCRIPTION, QUANTITY, UNIT, UNIT PRICE, TOTAL NET PRICE. Rows include items like La Feria Annex, Santa Rosa Tech Center, Port Isabel Annex, Father O'Brien Clinic, and Arroyo City VFD.

Did you disclose the above quote prices to any County Employee or other individual prior to submitting this quote? Yes [ ] No [X]

COMPANY MCC Landscaping Division SIGNATURE [Signature] DATE 1/12/2025

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**RECEIVED**

By LROBERTS at 1:31 pm, Jan 13, 2025



**CAMERON COUNTY PURCHASING**

CAMERON COUNTY, TEXAS

1100 E. Monroe Street

Brownsville, Texas 78523

TELEPHONE (956) 544-0871 FAX (956) 550-7219

ROBERTO LUNA, CPM, CTCD, CTCM  
INTERIM PURCHASING AGENT

**Annual Written Quotation**

INFORMAL BIDS

REQUEST FOR WRITTEN QUOTATION - \$500 - \$14,999

(\$15,000 - \$24,999 WITH COMM. COURT APPROVAL ONLY)

DEPARTMENT REQUESTING QUOTE:  
Maintenance & Operations

PERSON REQUESTING QUOTE:  
Jaime Buentello

PHONE:  
956-544-0823

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B. Santa Rosa Tech Center - 116 Santa Vista Ave, Santa Rosa, TX. 78593 (See attached perimeter map)	1	EA	\$300.	XXXXXXXXXXXXXXXXXXXXXXXXXXXX
C. Port Isabel Annex - 505 Hwy 100, Port Isabel, TX. 78578 (See attached perimeter map)	1	EA	\$275.	XXXXXXXXXXXXXXXXXXXXXXXXXXXX
D. Father O'Brien Clinic - 142 Champion Dr., Port Isabel, TX. 78578 (See attached perimeter map)	1	EA	\$370.	XXXXXXXXXXXXXXXXXXXXXXXXXXXX
E. Arroyo City VFD - 34921 FM 2925, Rio Hondo, TX. 78583 (See attached perimeter map)	1	EA	\$245.	XXXXXXXXXXXXXXXXXXXXXXXXXXXX
				XXXXXXXXXXXXXXXXXXXXXXXXXXXX
				XXXXXXXXXXXXXXXXXXXXXXXXXXXX
				XXXXXXXXXXXXXXXXXXXXXXXXXXXX
<b>Co-op pricing will also be considered - Please specify contract #</b>			<b>TOTAL</b>	XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Total installation cost (if applicable) Yes No: \_\_\_\_\_  
Warranty period on items bid: \_\_\_\_\_  
Cost and period of extended warranty available: \_\_\_\_\_  
Do you service the product being quoted? \_\_\_\_\_  
If "yes", where is the closest service center? \_\_\_\_\_  
If "no", who will service and where? \_\_\_\_\_

Did you disclose the above quote prices to any County Employee or other individual prior to submitting this quote? Yes  No

COMPANY JAC Lawn Care Service SIGNATURE Jaime Buentello DATE 1/13/25

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DELIVER OR MAIL TO CAMERON COUNTY PURCHASING DEPARTMENT 1100 E. MONROE ST., BROWNSVILLE, TEXAS 78520  
ATTN: PURCHASING DEPARTMENT FOR QUESTIONS CALL (956) 544-0871

DATE \_\_\_\_\_ TIME \_\_\_\_\_  
QUOTE DEADLINE: MUST BE RECEIVED IN THE COUNTY PURCHASING OFFICE BY: 10/10/25 AT 5:00PM  
(MUST ALLOW AT LEAST 4 BUSINESS DAYS TO DEADLINE DATE FOR AWARD, UNLESS THE NEED IS BASED ON AN EMERGENCY)

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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
01/24/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Next First Insurance Agency, Inc. PO Box 60787 Palo Alto, CA 94306	<b>CONTACT NAME:</b> PHONE (A/C No, Ext): (855) 222-5919      FAX (A/C No): E-MAIL ADDRESS: support@nextinsurance.com	
	<b>INSURER(S) AFFORDING COVERAGE</b> <b>NAIC #</b> INSURER A : State National Insurance Company, Inc.      12831 INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :	
<b>INSURED</b> Solid Services Pro LLC 3155 E 28th St Brownsville, TX 78521		

**COVERAGES**      **CERTIFICATE NUMBER:** 637681044      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		NXTFPYQH XV-00-GL	01/24/2025	01/24/2026	EACH OCCURRENCE \$1,000,000.00
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000.00						
							MED EXP (Any one person) \$10,000.00
							PERSONAL & ADV INJURY \$1,000,000.00
							GENERAL AGGREGATE \$1,000,000.00
							PRODUCTS - COMP/OP AGG \$1,000,000.00
							\$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$
							AGGREGATE \$
							\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N	N/A			PER STATUTE    OTH-ER
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$
A	Contractors Errors and Omissions	X		NXTFPYQH XV-00-GL	01/24/2025	01/24/2026	Each Occurrence: \$10,000.00 Aggregate: \$20,000.00

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
The Certificate Holder is Cameron County. This Certificate Holder is an Additional Insured on the General Liability policy per the Additional Insured Automatic Status Endorsement. All Certificate Holder privileges apply only if required by written agreement between the Certificate Holder and the insured, and are subject to policy terms and conditions.

### CERTIFICATE HOLDER

Cameron County  
1100 E Monroe St  
Brownsville, TX 78520

### LIVE CERTIFICATE



Click or scan to view

### CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Figure: 28 TAC §1.601(a)(2)(B)

## **Have a complaint or need help?**

If you have a problem with a claim or your premium, call your insurance company or HMO first. If you can't work out the issue, the Texas Department of Insurance may be able to help.

Even if you file a complaint with the Texas Department of Insurance, you should also file a complaint or appeal through your insurance company or HMO. If you don't, you may lose your right to appeal.

### **State National Insurance Company, Inc.**

To get information or file a complaint with your insurance company or HMO:

**Call: Next First Insurance Agency, Inc.**

**Toll-free: 1-855-222-5919**

Email: [support@nextinsurance.com](mailto:support@nextinsurance.com)

Mail: P.O. Box 60787

Palo Alto, CA 94306

### **The Texas Department of Insurance**

To get help with an insurance question or file a complaint with the state:

Call with a question: 1-800-252-3439

File a complaint: [www.tdi.texas.gov](http://www.tdi.texas.gov)

Email: [ConsumerProtection@tdi.texas.gov](mailto:ConsumerProtection@tdi.texas.gov)

Mail: MC 111-1A, P.O. Box 149091, Austin, TX 78714-9091

## **¿Tiene una queja o necesita ayuda?**

Si tiene un problema con una reclamación o con su prima de seguro, llame primero a su compañía de seguros o HMO. Si no puede resolver el problema, es posible que el Departamento de Seguros de Texas (Texas Department of Insurance, por su nombre en inglés) pueda ayudar.

Aun si usted presenta una queja ante el Departamento de Seguros de Texas, también debe presentar una queja a través del proceso de quejas o de apelaciones de su compañía de seguros o HMO. Si no lo hace, podría perder su derecho para apelar.

LIVE CERTIFICATE



[Click or scan to view](#)

**State National Insurance Company, Inc.**

Para obtener información o para presentar una queja ante su compañía de seguros o HMO:

**Llame a: Next First Insurance Agency, Inc.**

**Teléfono gratuito: 1-855-222-5919**

Correo electrónico: [support@nextinsurance.com](mailto:support@nextinsurance.com)

Dirección postal: P.O. Box 60787  
Palo Alto, CA 94306

**El Departamento de Seguros de Texas**

Para obtener ayuda con una pregunta relacionada con los seguros o para presentar una queja ante el estado:

Llame con sus preguntas al: 1-800-252-3439

Presente una queja en: [www.tdi.texas.gov](http://www.tdi.texas.gov)

Correo electrónico: [ConsumerProtection@tdi.texas.gov](mailto:ConsumerProtection@tdi.texas.gov)

Dirección postal: MC 111-1A, P.O. Box 149091, Austin, TX 78714-9091

LIVE CERTIFICATE



[Click or scan to view](#)



## Leticia Roberts

---

**From:** Irene Guerra  
**Sent:** Tuesday, January 28, 2025 2:49 PM  
**To:** Jaime A. Buentello  
**Cc:** Leticia Roberts  
**Subject:** FW: Request for COI - Cameron County  
**Attachments:** DOC-20250124-WA0009..pdf  
  
**Importance:** High

Approved as per Dylbia.

State National Ins. Co. Inc., A rating, licensed in TX

Respectfully,

*Irene Guerra Jaramillo*

Cameron County Courthouse  
Civil Legal Division

---

**From:** Jaime A. Buentello <jabuentello@co.cameron.tx.us>  
**Sent:** Tuesday, January 28, 2025 2:43 PM  
**To:** Trista Lorraine Valdez <TLValdez@co.cameron.tx.us>; Irene Guerra <iguerra1@co.cameron.tx.us>  
**Cc:** Leticia Roberts <LRoberts@co.cameron.tx.us>  
**Subject:** FW: Request for COI - Cameron County  
**Importance:** High

Good afternoon,

Attached please find the COI for Solid Services to provide lawn care services for La Feria Annex, Santa Rosa Tech Center, Arroyo City VFD, Port Isabel Annex and Father O'Brien Clinic under an Annual Quotation. Please advise.

Thank you,



**Jaime Buentello**

M&O Manager  
1135 E. Van Buren St.  
Brownsville, TX 78520  
O: 956-544-0823  
D: 956-982-5431  
M: 956-640-6876