APPENDIX III

Statement of No Involvement

I, _____, as an authorized representative

of _____, certify that no member of this agency nor any person having interest in this agency has been awarded a contract by the Area Agency on Aging of Palm Beach/Treasure Coast, Inc., on a noncompetitive basis to:

(1) develop this Request for Proposal (RFP);

(2) perform a feasibility study concerning the scope of work contained in this RFP; or

(3) develop a program similar to what is contained in this RFP.

_____

Signature Date

_____

Name

_____

Title