DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Ty	pe (Please select	one								
Flour	Partnership	M	Limited Liability mpany		Corporation	Trus	t Non-Profit Organization		Other	
Business Designati	on Group (Pleas	e sel	ect all that apply	()						
МВЕ	BE □WBE		□sBE		□PBE		□ VET		DVET	ESB
Minority Business Enterprise Women-Owned Business Enterprise			Small Business Enterprise	ss Physically Challenge Business Enterprise			Veteran Owned Business		sabled Veteran wned Business	Emerging Small Business
Number of Clark County Nevada Residents Employed: 77										
		Communication Electronic Systems LLC								
Corporate/Business Entity Name:		John Market Control of Street								
(Include d.b.a., if applicable)		4080 E Lake Mead #A					Websits: www.cesvegas.com			
Street Address: City, State and Zip Code:		Las Vegas, NV 89115				POC Name: Joe Lynn Email: jlynn@cesvegas.com				
Тејерноле No:		702-643-7566					Fax No: 702-643-9248			
Nevada Local Street	Address:					Website:				
(If different from abo	10									
City, State and Zip	City, State and Zip Code:			Local Fax No		Local Fax No:				
					Local POC Name:					
Local Telephone No	ı.						Email:			
Entities include all business associations organized under or close corporations, foreign corporations, limited liability compa				nies, partnerships, limited partnerships, Title						
David Ellis			M	Managing Member			40			
Brian Thomas			M	Managing Member				40		
Josh Claunch	Josh Claunch			Managing Member				20		
				_						
This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? 1. Are any individual members, partners, owners or principals, involved in the business entity, a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)? 1. Yes 1. No 1. (If yes, please note that County employee(s), or appointed/elected official(s) may not perform any work on professional service contracts, or other contracts, which are not subject to competitive bid.)										
Do any individual members, partners, owners or principals have a spouse, registered domestic partner, child, parent, in-law or brother/sister, half-brother/half-sister, grandchild, grandparent, related to a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)? Yes No (If yes, please complete the Disclosure of Relationship form on Page 2. If no, please print N/A on Page 2.)										
^	of perjury, that all of ntract approvals, la	the in	nformation provide	d he	erein is current, c	omplete, a	and accurate. I also unde			t take action on
Managing Member				7/17/23						
Title				15	Date					
					1					

DISCLOSURE OF RELATIONSHIP

List any disclosures below: (Mark N/A, if not applicable.)

NAME OF BUSINESS OWNER/PRINCIPAL	NAME OF COUNTY* EMPLOYEE/OFFICIAL AND JOB TITLE	RELATIONSHIP TO COUNTY* EMPLOYEE/OFFICIAL	COUNTY* EMPLOYEE'S/OFFICIAL'S DEPARTMENT
N/A	li li		
Water Reclamation District. "Consanguinity" is a relations "To the second degree of confollows: • Spouse – Registered	Clark County, Department of ship by blood. "Affinity" is a release onsanguinity" applies to the of Domestic Partners - Children	ationship by marriage. candidate's first and second n – Parents – In-laws (first deg	degree of blood relatives as
For County Use Only:			
•	oted above, please complete the follo		
_ =	ployee(s) noted above involved in the ployee(s) noted above involved in any		
Notes/Comments:	,		
Signature			
Print Name Authorized Department Representat	ive		