DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity	Type (Please select	one)										
Sole Proprietorship		tnership		Limited Liability	7	Corporation	Trus	st	Non-Profit Organization		Other		
Business Design	nation	Group (Please	sele	ect all that apply)							T	
МВЕ		WBE		SBE		☐ PBE			☐ VET	DVET		□ESB	
Minority Business Enterprise				Small Business Enterprise		Physically Challenged Business Enterprise		- 1	Veteran Owned Business			Emerging Small Business	
Number of Clark County Nevada Residents Employed: 23													
O			Benchmark Contracting Inc.										
Corporate/Business Entity Name:			Cobblestone Construction										
(Include d.b.a., if applicable)			3830 N Jones Blvd.					Website: www.cobblestoneconstructionly.com					
Street Address: City, State and Zip Code:			Las Vegas, NV 89108					POC Name: Benden Parker bparker@cobblestoneconstruction.org					
Telephone No:			702-656-8300					Fax No: 702-648-2001					
Nevada Local St	reet A	ldress:						Website:					
(If different from								Website.					
City, State and 2		,	Local Fax No:						al Fax No:				
								Local POC Name:					
Local Telephone	No:							Email:					
Entities include all business associations organized under or a close corporations, foreign corporations, limited liability compar Full Name Benden Parker			liability companies	es, partnerships, limited partners Title President			rships, and professional corpo		% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)				
This section is no	t requi	red for publicly	/-trad	ed corporations.	Ar	e you a publicly	/-traded c	corpo	pration?	V] No	TO SECURE AND THE SEC	
 This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? Yes Y No 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)? 													
Yes	7												
 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.)													
I certify under penalty of perjury, that all of the information provided herein is current, complete, and accurate. I also understand that the Board will not take action on land-use approvals, contract approvals, land sales, leases or exchanges without the completed disclosure form.													
10000						Benden Parl	ker				on a granusina company		
Signature					Print Name								
President					1/12/22								
Title						Date							

DISCLOSURE OF RELATIONSHIP

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

NAME OF BUSINESS	NAME OF COUNTY* EMPLOYEE/OFFICIAL	RELATIONSHIP TO COUNTY*	COUNTY* EMPLOYEE'S/OFFICIAL'S					
OWNER/PRINCIPAL	AND JOB TITLE	EMPLOYEE/OFFICIAL	DEPARTMENT					
N/A								
		-						
		about the second se						
* County employee means Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District.								
"Consanguinity" is a relationship by blood. "Affinity" is a relationship by marriage.								
"To the second degree of consanguinity" applies to the candidate's first and second degree of blood relatives as follows:								
Spouse – Registered Domestic Partners – Children – Parents – In-laws (first degree)								
Brothers/Sisters – Half-Brothers/Half-Sisters – Grandchildren – Grandparents – In-laws (second degree)								
For County Use Only:								
If any Disclosure of Relationship is noted above, please complete the following:								
Yes No Is the County employee(s) noted above involved in the contracting/selection process for this particular agenda item?								
Yes No Is the County employee(s) noted above involved in any way with the business in performance of the contract?								
Notes/Comments:								
Signature	and the second s							
Print Name Authorized Department Representat	ive							