## DISCLOSURE OF OWNERSHIP/PRINCIPALS

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Business Entit	у Тур	e (Please select	one)										
Sole Proprietorship		Partnership	Cor	Limited Liability mpany		Corporation	Trus	st	Non-Profit Organization		Other		
Business Desig	nati	on Group (Pleas	e sel	ect all that apply	, N	ot applicable							
Пмве		□WBE		SBE		□PBE			□VET		OVET	ESB	
Minority Business Enterprise		Women-Owned Business Enterprise		Small Business Enterprise	Physically Challenge Business Enterprise				Veteran Owned Business			Emerging Small Business	
Number of Clark County Nevada Residents Employed:													
Cornerato/Dusiness Entitu News			Staples Contract & Commercial LLC										
Corporate/Business Entity Name:			N/A										
(Include d.b.a., if applicable)			500 Staples Drive					Website: www.StaplesAdvantage.com					
Street Address:  City, State and Zip Code:			Framingham, MA 01702					POC Name: Teresa Mitchell, Key Account Executive					
			(004) 050 2250					Fax No: N/A					
Telephone No:	_		(801) 656-3250					Fax No: 1977					
Nevada Local Street Address:			N/A					Website: www.StaplesAdvantage.com					
City, State and	City, State and Zip Code:			N/A					Local Fax No: N/A				
Local Telephone No:			(801) 656-3250						Local POC Name: Teresa Mitchell, Key Account Executive  Email: Teresa.Mitchell@Staples.com				
Entities include all business associations organized under or governed by Title 7 of the Nevada Revised Statutes, including but not limited to private corporations, close corporations, foreign corporations, limited liability companies, partnerships, limited partnerships, and professional corporations.													
Full Name			Title			Title			(h Corp	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)			
Staples, Inc.			Parent company					100					
Sycamore Partners II, L.P.			9 W. 57th St., 31st Floor, Ne					v York, NY 10019  Sycamore Partners II. L.P. is the ultimate beneficial owner of Staples, Inc. No individual or entity owns 5' or greater interest in Sycamore Partners II, L.P.					
This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? Yes No  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)?  Yes No (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.)													
2. 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, p	lease complete the	e Di	sclosure of Rela	tionship fo	rm d	on Page 2. If no, please	print N	I/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.													
Q9-			Lovejit Edmondson										
Loggijh in imendson (Ap	or 24, 2	025 06:53 PDT)	Print Name										
Area Vice Presid	ent					24-Apr-2	025						
Title						Date							

## DISCLOSURE OF RELATIONSHIP

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

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				
<ul> <li>* County employee means Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District.</li> <li>"Consanguinity" is a relationship by blood. "Affinity" is a relationship by marriage.</li> <li>"To the second degree of consanguinity" applies to the candidate's first and second degree of blood relatives as follows:</li> <li>Spouse – Registered Domestic Partners – Children – Parents – In-laws (first degree)</li> <li>Brothers/Sisters – Half-Brothers/Half-Sisters – Grandchildren – Grandparents – In-laws (second degree)</li> </ul>							
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							
Print Name Authorized Department Representa	ative						