DISCLOSURE OF OWNERSHIP / PRINCIPALS

Business Entity Type (Please select one)										
Sole Proprietorship Partnership			☑ Limited Liability Company	Corporation		Trust	☐ Non-Profit Organization	n	☐ Other	
Business De	signation Gr	oup	(Please selec	ct all that apply)						
☐ MBE Minority Business Enterprise	MBE WBE Minority Women-Owned Business Business Enterp		SBE Small Business Enterprise	PBE Physically Challenged Business Enterprise	Vet Ow	VET eran ned siness	DVET Disabled Vetera Owned Busines		ESB Emerging Small Business	
Number of C	lark County	Neva	da Residents	Employed:	^					
Business Information:										
Corporate/Business Entity Name:		CJF Automotive LLC								
(Include d.b.a., if applicable)		Findlay Chevrolet								
Street Address:		6800 S Torrey Pines drive Website: www.findle					ww.findlayche	evy.co	m	
City, State and Zip Code:		Las Vegas, NV 89118				POC Name: Paul Brown				
Telephone No:						ail: pbrown@findlayauto.com				
Cell Number		700 000 4055				Fax No: none				
Nevada Local Street Address:					Website:					
(If different from above)					Local POC N	Local POC Name:				
City, State and Zip Code:					Local POC Email;					
Local Telephone No:		Local Fax No:			o:					
All entities, with the exception of publicly-traded and non-profit organizations, must list the names of individuals holding more than five percent (5%) ownership or financial interest in the business entity appearing before the Board.										
Publicly-traded entities and non-profit organizations shall list all Corporate Officers and Directors in lieu of disclosing the names of individuals with ownership or financial interest. The disclosure requirement, as applied to land-use applications, extends to the applicant and the landowner(s).										
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				(Not requi	o Owned ired for Publicly Traded /Non-profit organizations)	
Clifford Justin Findlay (individual owner								25%		
Nathan Edward Findlay 2016 Legacy Trust				Managing Member				25%		
Robert Justin Findlay 2016 Legacy Trust				Managing Member				25%		
Marisa Lee Findlay 2016 Legacy Trust				Managing Member				25%		
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, 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. Paul Brown										
Signature) Fleet Manager				Print Name 9-3-2025						
Title				9-3-2025 Date			(

DISCLOSURE OF OWNERSHIP / PRINCIPALS

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	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A

^{*}County employee means an employee of Clark County, Clark County Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District.

- 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	on process for this particular agenda item?
☐ Yes ☐ No Is the County employee(s) noted above involved in any way with the busin	
Notes/Comments: Signature Print Name	

[&]quot;Consanguinity" is a relationship by blood.

[&]quot;Affinity" is a relationship by marriage.

[&]quot;To the second degree of consanguinity" applies to the candidate's first and second degree of blood relatives as follows: