DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Ty	pe (Please select	one)							
Sole Proprietorship]Partnership	Limited Liability Company	☐ Corporation	☐ Trust	Organization	on-Profit	☐ Öther		
Business Designation Group (Please select all that apply)									
☐ MBE ☐ WBE		X⊠ SBE	☐ PBE		☐ VET	□VET □DVET □ESB		□ESB	
Minority Business Enterprise Women-Owned Business Enterprise		Small Busines Enterprise	Physically Business Ent	Challenged terprise	d Veteran Own Business	-	Disabled Veteran Emerging Small Owned Business Business		
Number of Clark County Nevada Residents Employed: 90									
Corporate/Business Entity Name:		NLS Grounds Management LLC							
(Include d.b.a., if a	oplicable)								
Street Address:			8630 Cameron Street			Website: nlsgrounds.com			
					POC Name: Ruben Damian				
City, State and Zip	Code:	Las Vegas, NV 89139			Email: rd@nlsgrounds.com				
Telephone No:		702.259.6408			Fax No: 702.629.6141				
The state of the s	4 8 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4				Website:				
Nevada Local Stree		Same as above			Wensite.				
(if different from above)		Garrie as assis			Local Fax No:				
City, State and Zip Code:					Local POC Name:				
Local Telephone No:				1	Email:				
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			c		% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)		
James Neville		Managing Member			100%				
		y-traded corporations.						Detention	
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 (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.									
James Neville									
Signature			Print Name	200	_				
CEO, Managing Member 8 78 - 7025									
Title			Date	- M					

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			
			e.
'To the second degree of • Spouse – Registe	ered Domestic Partners – Ch		
For County Use Only:			
	is noted above, please complete to		
		in the contracting/selection process for	
Yes No Is the County	employee(s) noted above involved	in any way with the business in perfo	rmance of the contract?
Notes/Comments:			
Signature			
g			
Print Name Authorized Department Represe	entative		