DISCLOSURE OF OWNERSHIP/PRINCIPALS

		UI	3CEC3UN	<u> </u>	OI OAAII	LIVO	1111	TENINGIFAL	_			
Business Entity	Type (Please selec	ct one)						T-				
Sole Proprietorship	Partnership	Corr	imited Liability	Y	Corporation	Tru	st	Non-Profit Organization		Other		
Business Design	nation Group (Plea	se sele	ct all that apply)									
MBE			SBE		PBE			☐ VET		DVET	ESB	
Minority Business Enterprise Women-Owned Business Enterprise		d	Small Business Enterprise		Physically Challenged Business Enterprise			Veteran Owned Business	Disabled Veteran Owned Business		Emerging Small Business	
				_			_					
Number of C	lark County N	levad	evada Residents Employed: 1090									
Corporate/Business Entity Name:			Las Vegas Paving Corporation									
(Include d.b.a., i	f applicable)											
Street Address:		442	0 South Dec	h Decatur Blvd v			We	Website: lasvegaspaving.com				
City, State and 2	lip Code:	Las	Las Vegas, NV 89103				POC Name: Ryan Mendenhall Email: ryan.mendenhall@lvpaving.com					
Telephone No:		702	702-251-5800				Fa	x No: 702-251-48	91			
Nevada Local St	reet Address:						Website:					
(If different from	above)	\perp										
City, State and	Zip Code:	1		Local Fax No:				cal Fax No:				
I and Tolophop	No					Local POC Name:						
Local Telephone No: Email:												
close corporations	, foreign corporations Full Name	, limited	liability companies	s, p	artnerships, limi	ted partne	ership	Revised Statutes, includes, and professional co	rporati	ons. % Owns (Not required for Purporations/Non-pro	ed ublicly Traded	
Mendenhall Family Trust			Owner				100%					
									-			
Please see at	tached sheet fo	or Cor	rporate Office	ers	& Directors	3			-			
	ot required for publi	100000					corp	oration? Ye	s [✓ 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 (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 Yo (If yes, please complete the Disclosure of Relationship form on Page 2. If no, please print N/A on Page 2.)												
I certify under pen land-use approval	alty of perjury, that all s, contract approvals,	of the i	information provide ales, leases or excl	ed h	erein is current, ges without the	complete	e, and d dis	d accurate. I also unde closure form.	rstand	that the Board will	not take action on	
Signature	M/M	1			Ryan M. M	1ender	nhal					
Director					April 17, 2	025						
Title					Date							

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							
Water Reclamation District. "Consanguinity" is a relation: "To the second degree of of follows: • Spouse – Registere	Clark County, Department of ship by blood. "Affinity" is a reconsanguinity" applies to the d Domestic Partners – Childre lalf-Brothers/Half-Sisters – Gra	lationship by marriage. candidate's first and second n – Parents – In-laws (first de	degree of blood relatives as gree)				
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 Represent	ative	20.					

DISCLOSURE OF OWNERSHIP/PRINCIPALS

		יכום	SECOU	IL U	1 01111	ILITOI	111	THE TRIBUTE					
Business Entity	Type (Please selec	ct one)											
Sole Proprietorship	Partnership	Limi Compa	ited Liability ny	□ co	orporation	7 Trus	it	Non-Profit Organization		Other			
Business Desig	nation Group (Plea	se select a	all that apply)			_		_		1		
MBE WBE			SBE		□PBE		_	□ VET	DVET		□ESB		
Minority Business Enterprise Women-Owned Business Enterprise			mall Business nterprise		Physically Challenged Business Enterprise			Veteran Owned Business	wned Disabled Veteran Owned Business		Emerging Small Business		
Number of	Clark County N	levada l	Residents	Emp	oloyed:		_	0					
Corporate/Business Entity Name: Me			Mendenhall Family Trust										
(Include d.b.a.,	if applicable)							- Committee Comm			and Prince and the State of the		
Street Address		4420 S	outh Decatur	11000									
City, State and		Las Ve	Las Vegas, NV 89103				POC Name: Ryan Mendenhall Email: Ryan.Mendenhall@lvpaving.com						
T.1.26 N		702-25	702-251-5800					Fax No: 702-251-4891					
Telephone No:			, oz. 20. 0000				Website:						
	Street Address:					ì	AAG	osite.					
(If different from		-		-			Loc	cal Fax No:					
City, State and	Zip Code:	_					Local POC Name:						
Local Telephor	ne No:			Email:									
close corporation	is, foreign corporation: Full Name	s, limited lia	bility companie	es, partr	nerships, lim	ited partne Title	ership	Revised Statutes, includings, and professional corp	oratio	nis. % Owne	ed		
		_	Owner						(Not required for Publicly Traded Corporations/Non-profit organizations)				
Paula C. Mende	enhall			Jwher					1007				
1 Are any inc	not required for publ	tners owne	rs or principals	s. involv	ed in the bus	siness enti	ity, a	Clark County, Departme	_	No Aviation, Clark Cou	ınty Detention		
Center or (Clark County Water Re	eclamation ((If ves. plea	District full-time	e emplo: ountv ei	yee(s), or ap mplovee(s),	opointed/ei or appoint	ed/el	a onicial(s)? ected official(s) may not					
sister, grar		tners, owne related to a	rs or principals Clark County,	. have a	anouso fo	aistered de	nmas	stic partner, child, parent unty Detention Center o	i, in-la r Clarl	w or brother/sister k County Water Re	, half-brother/half- eclamation District		
Yes				ne Discl	osure of Rel	ationship f	form (on Page 2. If no, please	print	N/A on Page 2.)			
I certify under poland-use approv	enalty of perjury, that a als, contract approvals	all of the info s, land sales	ormation provid s, leases or exc	ded here change:	ein is curren s without the	t, complete complete	e, and	d accurate. I also unders closure form.	stand	that the Board will	not take action on		
	N M	W	1	_	yan M. Me Print Name	ndenhall							
Signature													
Director				(pril 17, 20	25							
Title					Date								

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	,						
"To the second degree of of follows: • Spouse – Registere	ship by blood. "Affinity" is a reconsanguinity" applies to the d Domestic Partners – Childre	candidate's first and second on – Parents – In-laws (first de					
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Yes No Is the County employee(s) noted above involved in any way with the business in performance of the contract?							
Notes/Comments:							
		4					
Signature							
Print Name Authorized Department Represent	ative	00					

LAS VEGAS PAVING CORPORATION

4420 S. Decatur Blvd., Las Vegas, NV 89103

Corporate Officers & Directors

As of 01/01/2024

Jay N. Smith, President/Director

Marc C. Mendenhall, Treasurer/Director

Lori Mendenhall, Secretary/Director

Ryan Mendenhall, Director

Josh Mendenhall, Director

William D. Wellman, Director

Corey Newcome, Director

Clark Webster, Director

James M. Barker, Registered Agent/General Counsel/Director