Business Entity Ty	pe (Piease select	one)							
Sofe Proprietorship	Partnership	Limited Liability Company	Corporation	Trust	Non-Profit Organization	Other			
Business Designati	ion Group (Pleas	e select all that appl	y)						
MBE	□WBE	SBE	□PBE		VET	DVET	ESB		
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Physically Challenged Business Enterprise Physically Challenged Business Enterprise Physically Challenged Business Physically Challenged Business Physically Challenged Business Physically Challenged Business					Emerging Small Business		
Number of Cla	rk County No	evada Resident	s Employed:	2	ringles				
Corporate/Busines	e Entitu Nama:	Dominion Voting Sy	stems, Inc.	110 000					
(Include d.b.a., if a									
Street Address:	photolog	PO Box 343	***************************************	\	Website: www.dominior	voting.com			
City, State and Zip	Code:	Broomfield, CO 800	roomfield, CO 80038 POC Name:  Email: contracts@dominionvoting.co						
Telephone No:		1.866.654.8683		ı	ax No:				
Nevada Local Stree	et Address:			1	Vebsite:				
(if different from ab									
City, State and Zip	Code:		Local Fax No:						
				ı	ocal POC Name:				
Local Telephone N	0;				Email:				
ownership or financial	interest. The disck	osure requirement, as a s organized under or o	pplied to land-use ap overned by Title 7 o	pplications, e of the Nevada	and Directors in lieu of extends to the applicant an a Revised Statutes, includ hips, and professional cor	d the landowner(s).  Ing but not limited to priviporations.  % Own	rate corporations,		
US Dominion Inc.			w		(Not required for Publicly Traded Corporations/Non-profit organizations) 100%				
							*****		
1 Are any individu	ral members, partne County Water Rec	amation District full-time	s, involved in the buse e employee(s), or ap ounty employee(s),	siness entity, ppointed/elec or appointed	a Clark County, Departmented official(s)? /elected official(s) may no	ent of Aviation, Clark Cou			
sister, grandchi	ld, grandparent, re ree(s), or appointed	lated to a Clark County /elected official(s)?	, Department of Avia	ation, Clark (	nestic partner, child, paren County Detention Center c n on Page 2. If no, please	r Clark County Water Re	, half-brother/half- clamation District		
L certify under genelty	of periury, that all		led herein is current	t, complete, a	and accurate. I also under		not take action on		
sand-use approvals, o	Ontract approvals, I	a.10 20152, 169262 OF 6X	John Poulos		record deposit partition				
Signature	-/-		Print Name			A. S. C.			
President and CEO	~		6/4/2025						
Title			Date						

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

	NAME OF COUNTY	OF ATIONOLUD TO	COUNTY
NAME OF BUSINESS OWNER/PRINCIPAL	NAME OF COUNTY* EMPLOYEE/OFFICIAL AND JOB TITLE	RELATIONSHIP TO COUNTY* EMPLOYEE/OFFICIAL	COUNTY* EMPLOYEE'S/OFFICIAL'S DEPARTMENT
		34.50	
			7.50
* County employee means Water Reclamation District.	Clark County, Department of	Aviation, Clark County Dete	ntion Center or Clark County
"Consanguinity" is a relations	ship by blood. "Affinity" is a rel	lationship by marriage.	
"To the second degree of clows:	consanguinity" applies to the	candidate's first and second	degree of blood relatives as
Spouse – Registered	d Domestic Partners – Children	n Parents In-laws (first de	gree)
Brothers/Sisters – H	alf-Brothers/Half-Sisters Gra	ndchildren – Grandparents –	In-laws (second degree)
For County Use Only:		The state of the s	
	noted above, please complete the folk	owing:	
-	ployee(s) noted above involved in the		particular agenda item?
<del>-</del>	ployee(s) noted above involved in any		
Notes/Comments:			
Signature			

Business Entity Ty									
		Limited Liability	T			Non-Profit		F-1	
Proprietorship	Partnership	Company		Corporation	Trust	Organization		Other	
Business Designati	ion Group (Pleas	se select all that appl	1			T	1		Τ=
MBE	WBE	SBE		PBE		□ VET □ DVET		College	ESB
Minority Business Enterprise	Women-Owned Business Enterprise	d Small Business Enterprise	Small Business				abled Veteran ned Business	Emerging Small Business	
Number of Cla	rk County N	evada Resident	s En	nployed:			2		
Corporate/Busines	s Entity Name:	US Dominion, Inc.							
(Include d.b.a., if a									
Street Address:	phoable	PO Box 343			NA.	lebsite:			
City, State and Zip	Code:	Broomfield, CO 800	038		Р	OC Name:	odomini	onvoting.com	
		1.866.654.8683	-			inab.	17. T. P.		
Telephone No:	-	1.000.004.0000				ax No:			
Nevada Local Stree	t Address:				W	lebsite:			
(if different from ab	ove)					353167			
City, State and Zip	Code:					ocal Fax No:			
Local Telephone No	o:	Local POC Name:  Email:							
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Entitles include all buctose corporations, for close corporations, for the close corporations, for the close corporations, for the close corporations and the close corporation is not refer to clark    This section is not refer to clark    Yes  2. Do any individual content or clark    Yes  2. Do any individual content of clark    Yes  I certify under penalty land-use approvals, content or clark    I certify under penalty land-use approvals, content or clark    I certify under penalty land-use approvals, content or clark    I certify under penalty land-use approvals, content or clark    I certify under penalty land-use approvals, content or clark    I certify under penalty land-use approvals, content or clark    I certify under penalty land-use approvals, content or clark    I certify under penalty land-use approvals, content or clark    I certify under penalty land-use approvals, content or clark    I certify under penalty land-use approvals, content or clark    I certify under penalty land-use approvals, content or clark    I certify under penalty land-use approvals    I certify under penalty land-use approva	Interest. The disclusiness association reign corporations, Full Name  ate Holdings Inc.  ada members, partn County Water Rec  I No (II  I members, partn d, grandparent, ree(s), or appointed  No (II  I No (III)	osure requirement, as a ne organized under or guinted liability companion of the line of the information provide to a Clark County dielected official(s)?	s. Are s. involves s. involves s. involves s. involves s. involves s. have s. bave ded he change	you a publicly you a publicly lyed in the busi loyee(s), or app employee(s), or app em	the Nevada ed partners  Title  V-traded cor ness entity, cointed/elect or appointed/elect or appointed/elect or to complete, a	reporation?  Provided Statutes, including and professional comparation?  Provided Statutes, including a Clark County, Department of Official(s)?  Pelected official(s) may neell tive bid.)  Pastic partner, child, pare ounty Detention Center on Page 2. If no, pleasured accurate. I also unde	(N) Corp 100%  se print N  se print N	ndowner(s).  not limited to private.  % Owner of the control of th	ate corporations,  d blicly Traded t organizations)  htty Detention fessional service half-brother/half- clamation District

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

	WANT OF COUNTY!	BELATIONEUD TO	COUNTY
NAME OF BUSINESS	NAME OF COUNTY* EMPLOYEE/OFFICIAL	RELATIONSHIP TO COUNTY*	COUNTY* EMPLOYEE'S/OFFICIAL'S
OWNER/PRINCIPAL	AND JOB TITLE	EMPLOYEE/OFFICIAL	DEPARTMENT
			100
	~~~		
		1111	
Water Reclamation District.  "Consanguinity" is a relations  "To the second degree of of follows:  • Spouse – Registered	ship by blood. "Affinity" is a rel	iationship by marriage. candidate's first and second n – Parents – In-laws (first deg	
For County Use Only:			
If any Disclosure of Relationship is	noted above, please complete the follo	owing:	
Yes No Is the County em	ployee(s) noted above involved in the	contracting/selection process for this	particular agenda item?
Yes No Is the County em	ployee(s) noted above involved in any	way with the business in performance	e of the contract?
Notes/Comments:			
Signature			
Print Name Authorized Department Representa	ative		

Business Entity Ty	n /Dinner enlant	onel	\								-
Floris	Partnership		Limited Liability mpany	E	Corporation	Trus	Non-Pro Organizatio	ofit on		Other	
Business Designati	on Group (Please	e sele	ect all that apply	)					_		
<b>□</b> МВЕ	□WBE		□SBE		PBE		□ VET	□VET □DVET □E		ESB	
Minority Business Enterprise	Women-Owned Business Enterprise		Small Business Enterprise		Physically Ch Business Ent		Veteran Own Business	ned		abled Veteran ned Business	Emerging Small Business
Number of Cla	rk County Ne	evac	la Residents	E	mployed:				2		
Corporate/Busines	s Entity Name:	Don	ninion Intermedia	ate	Holdings Inc.						
(Include d.b.a., if a											
Street Address:		PO	Box 343				Website:				
City, State and Zip	Code:	Bro	omfield, CO 800	38			POC Name:	tracts@d	domini	ionvoting.com	
Telephone No:		1.86	6.654.8683				Fax No:				
Nevada Local Stree	t Address:				1000 200		Website:				
(If different from ab											
City, State and Zip							Local Fax No:				
City, State and Zip	OUGE.	-	Local POC Name:								
Local Telephone N	o:	Email:									
close corporations, for	eign corporations, t	limited	d hability companie	s, p	artnersnips, ums	ted parmer Title	snips, and proiess	sional corp	ſħ	% Owne % trequired for Pu parations/Non-prof	bliciv Traded
SSC Dominion Hold	ings Inc.			_	- / - C			_ :	100%		******
										1	
This section is not re  1. Are any individu Center or Clark	equired for public! at members, partne County Water Reck	erš. Ov	vners or principals.	. inv	olved in the busi	iness entity	, a Clark County, t	Yes Departme	-	No viation, Clark Cou	nty Detention
Yes	No (If	yes, p ntract	please note that Co s, or other contract	ount ls, v	y employee(s), o /hich are not sub	or appointe oject to con	d/elected official(s) apetitive bid.)				
sister, grandchi	al members, partne id, grandparent, rel ee(s), or appointedi	lated t	to a Clark County, ed official(s)?	De	partment of Avia	tion, Clark	County Detention	Center o	r Clark	County Water Re	half-brother/half- clamation District
Yes	V No (If	yes, p	lease complete the	e Di	sclosure of Rela	tionship fo	rm on Page 2. If n	no, pléase	print N	I/A on Page 2.}	
t certify under penalty land-use approvals, o	of perjury, that all ontract approvals, l	of the and s	information provid ates, leases or exc	ed t	nerein is current, iges without the	complete, completed	and accurate. I als disclosure form.	sa unders	stand th	nat the Board will r	ot take action on
7	15	P			John Poulos						
Signature	-/-				Print Name						
President and CEO	7				6/4/2025						
President and CEO					Date						

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' DEPARTMENT		
			1000		
Water Reclamation District.  "Consanguinity" is a relation:  "To the second degree of of follows:  • Spouse – Registere	ship by blood. "Affinity" is a re	lationship by marriage. candidate's first and second n – Parents – In-laws (first de			
For County Use Only:					
	noted above, please complete the folloployee(s) noted above involved in the		s particular agenda item?		
	ployee(s) noted above involved in any				
Notes/Comments:					
Signature					

Business Entity Typ	e (Please select	one)	T	т	1	—Т			
Sole Proprietorship	Partnership	Limited Liability Company	Corporation	Trust	Non-Profit Organization		Other		
Business Designati	on Group (Pleas	e select all that apply	0		T			1	
□MBE	□WBE	SBE	PBE		□ VET □ DVET □ E			ESB	
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Small Business Physically Challenged Business Enterprise Physically Challenged Business				Disabled Veteran Emerging Small Owned Business Business		
Number of Cla	rk County Ne	evada Residents	Employed:			2			
Corporate/Business	Entity Name:	SSC Dominion Hold	lings Inc.						
(Include d.b.a., if ap	plicable)								
Street Address:		PO Box 343		ν	Vebsite:				
City, State and Zip	Code:	Broomfield, CO 800	Broomfield, CO 80038 POC Name: Email: contra						
Telephone No:		1.866.654.8683		F	ax No:			*****	
			THE RESERVE		Vebsite:				
Nevada Local Stree				"	repsite.				
(If different from ab					ocal Fax No:	-		- SHETISTO	
City, State and Zip	Code:								
Local Telephone No	ocal Telephone No:    Local POC Name:								
Entities include all buclose corporations, for	siness association eign corporations, Full Name	s organized under or go limited liability companie	overned by Title 7 o es, partnerships, lin	of the Nevada lited partners! Title	n Revised Statutes, includ hips, and professional cor	porations.	% Owne	d	
State Street Capital							t required for Pul rations/Non-profi		
State Street Capital						15.5%			
John Poulos						12.4%			
lan MacVicar		-				5.6%			
1 Are any individu	al members narine	ly-traded corporations ers, owners or principals amation District full-time	. involved in the bu	siness entity.	a Clark County, Departme		No etion, Clark Cour	nty Detention	
Yes Yes	☑ No (If		ounty employee(s),	or appointed/	elected official(s) may no	t perform	any work on prot	fessional service	
sister, grandchil	d, grandparent, re	ers, owners or principals lated to a Clark County, /elected official(s)?	have a spouse, re Department of Avi	gistered dom ation, Clark C	estic partner, child, paren County Detention Center c	t, in-law o or Clark C	or brother/sister, ounty Water Rec	half-brother/half- lamation District	
Yes	✓ No (If	yes, please complete th	e Disclosure of Re	ationship form	n on Page 2. If no, please	print N/A	on Page 2.)		
I certify under penalty land-use approvals, c	of perjury, that all ontract approvals, I	of the information provid and sales, leases or exc	led herein is curren changes without the	t, complete, a completed d	and accurate. I also under isclosure form.	stand that	t the Board will n	ot take action on	
Signatura	12	3	John Poulos	5	101 2 7 1				
Signature	1								
President and CEO			6/4/2025 Date					-	
Title			Date						

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				
324							
3.44							
Water Reclamation District.  "Consanguinity" is a relations  "To the second degree of of follows:  • Spouse – Registered	Clark County, Department of ship by blood. "Affinity" is a rel consanguinity" applies to the d Domestic Partners – Children alf-Brothers/Half-Sisters – Gra	lationship by marriage. candidate's first and second n – Parents – In-laws (first deg	degree of blood relatives as				
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 Represente							

Business Entity	Туг	e (Please select	one)				,		7			
Sole Proprietorship	7	Partnership	Cor	Limited Liability	Е	Corporation	Tru	st	Non-Profit Organization		Other	
Business Desig	nati	on Group (Pleas	sel	ect all that apply	)			-				
MBE		□WBE		□SBE		☐ PBE		4	□ VET		OVET	□ESB
Minority Busines Enterprise	\$	Women-Owned Business Enterprise	Small Business Physically Challenged Business Enterprise Physically Challenged Business					abled Veteran ned Business	Emerging Small Business			
Number of	Cla	rk County Ne	evac	la Residents	E	mployed:				0	1/20	
G		Full Name	Stat	e Street Capital	11. E	LP					<del></del>	
Corporate/Busi			-									
(Include d.b.a., Street Address		phicable	129	0 Avenue of the	Am	nericas, 10th FI	oor	We	heite:			
City, State and		Code:	-	New York, NY 10104 POC Name:  Email:				C Name:	<del></del>			
Telephone No:			212	-613-3100				Fax	c.No:			
Nevada Local S	tree	t Address:			24.1			We	bsite:			
(If different from												
City, State and	Zip	Code:						Loc	cal Fax No:			
				Local POC Name:								
Local Telephon	e No	):		Email:								
ownership or fina	ncia!	interest. The disclo	sure	requirement, as ap anized under or go	plie ven	ed to land-use app ned by Tille 7 of	plications the Neva	, exte ida R	Directors in lieu of ands to the applicant an tevised Statutes, includies, and professional corp	d the ta ing but	ndowner(s). not limited to priva	
State Street Cap	ital !	Fuil Name					Title			% Owned (Not required for Publicly Traded Corporations/Non-profit organizations) 100%		
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ferres			_							,	1.,.	
1 Are any ind	ividra	al members, partne County Water Red	rs, ov amati	on District full-time	inv em	volved in the busi uployee(s), or app	ness enti ointed/el	ty, a s	Clark County, Department official(s)?	ent of A		
Yes		COI	otract	s, or other contract	s, w	vhich are not sub	ject to co	mpet				
sister, gran	dchile	d, grandparent, rei se(s), or appointed	ated elect	to a Clark County, ed official(s)?	Dep	partment of Aviat	lion, Clarl	k Cou	tic partner, child, parent anty Detention Center o	r Clark	County Water Red	half-brother/half- clamation District
Yes	_		-				7115	-0	on Page 2. If no, please	100		
I certify under per land-use approva	nalty Is, co	of perjury, that all on tract approvals, l	of the and s	information provide ales, leases or excl	ed h han	nerein is current, ages without the o	complete completed	e, and d disc	i accurate. I also unders dosure form.	stand th	at the Board will n	ot take action on
7		/=	7			John Poulos						
Signature		1				Print Name						
President and	PO					6/4/2025						
Title					_	Date		_				

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
OWNERS MINOS AL	7,11,2 30,3 11,1,2		
	1000	1000	
100		White the state of	
		- (C. II) (U.S. II)	
		1100000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000 11000	
* County employee means Water Reclamation District.	Clark County, Department of	Aviation, Clark County Dete	ntion Center or Clark County
"Consanguinity" is a relations	ship by blood. "Affinity" is a rel	ationship by marriage.	
"To the second degree of of follows:	consanguinity" applies to the o	candidate's first and second	degree of blood relatives as
Spouse – Registered	d Domestic Partners – Childrer	n – Parents – In-laws (first deg	gree)
<ul> <li>Brothers/Sisters – H</li> </ul>	alf-Brothers/Half-Sisters Gra	ndchildren – Grandparents –	in-laws (second degree)
For County Use Only:			
	noted above, please complete the follo		
	ployee(s) noted above involved in the		
Yes No Is the County em	ployee(s) noted above involved in any	way with the business in performant	e of the contract?
Notes/Comments.			
Signature			
Print Name Authorized Department Representa	itive		

		W		_						<del>// 110</del>	
Business Entity Ty	e (Please select			_							·
Sale Proprietorship	Partnership	Comp	mited Liability pany		Corporation	Tru	st	Non-Profit Organization		Other	
Business Designati	on Group (Please	e selec	t all that apply)				-		T		
MBE	□wae	[	SBE	_	PBE		4	VET	DVET ESE		ESB
Minority Business Enterprise	Women-Owned Business Enterprise		Small Business Physically Challenged Business Enterprise			Veteran Owned Business		abled Veteran ned Business	Emerging Small Business		
Number of Cla	rk County Ne	vada	Residents	Er	nployed:				0	77.70	
Corporate/Business	Entity Name:	State	Street Capital I	II-A,	LP						
(Include d.b.a., if ap											
Street Address:	photoloj	1290	Avenue of the	Ame	ericas, 10th Fl	oor	Web	osite:			
City, State and Zip	Code:	-	York, NY 10104	_	- VENEZA		POC	Name:		2.400	
			10.0100	_		-	Ema			100	
Telephone No:		212-6	13-3100	-	-		Fax	No:		and section 1	grand and the second second
Nevada Local Stree							Web	osite:			
							Loc	al Fax No:		A	
City, State and Zip	Cone:										
Local Telephone No	ohone No:  Local POC Name:  Email:										
close corporations, for	Full Name	iimiilea ii	авлиу сетрапів:	s, pa	ntrersinps, inni	Title	изпра	s, and professional corp	(1)	% Owner Not required for Pul Porations/Non-profi	olicly Traded
State Street Capital	II, GP LP			_					100%		
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Yes	COI	ntracts,	or other contract	s, wi	nich are not sub	ject to co	mpeti	•			
sister, grandchil	d, grandparent, rel ee(s), or appointed.	lated to /elected	a Clark County, official(s)?	Depa	artment of Avial	tion, Clarl	k Cou	ic partner, child, parent nty Detention Center o	r Clark	County Water Rec	half-brother/half- lamation District
Yes	THE STATE OF THE S	_						n Page 2. If no, please			
I certify under penalty land-use approvals, c	of perjury, that all ontract approvals, b	of the in and sale	formation provide es, leases or excl	ed he hang	erein is current, jes without the o	complete completer	e, and d discl	accurate. I also unders losure form.	stand th	nat the Board will n	ot take action on
$\triangleleft$	13	₹)			John Poulos						
Signaliste	- 6			65	Print Name		10.000	100			Detail (Fig. 1)
President and EO					6/4/2025 Date						

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
		WAS 10010 MONTH	
	454		
WHEN SHIPM			
* County employee means Water Reclamation District.	Clark County, Department of	Aviation, Clark County Dete	ntion Center or Clark County
"Consanguinity" is a relations	ship by blood. "Affinity" is a rel	ationship by marriage.	
"To the second degree of of follows:	consanguinity" applies to the	candidate's first and second	degree of blood relatives as
Spouse – Registered	d Domestic Partners – Childrer	n – Parents – In-laws (first deg	gree)
<ul> <li>Brothers/Sisters – H</li> </ul>	alf-Brothers/Half-Sisters Gra	ndchildren – Grandparents –	in-laws (second degree)
For County Use Only:			
•	noted above, please complete the folio	owing:	
Yes No Is the County em	ployee(s) noted above involved in the	contracting/selection process for this	particular agenda item?
N-1	ployee(s) noted above involved in any	way with the business in performance	e of the contract?
Notes/Comments:			
Signature	December 1		

Business Entity Ty	pe (Please select	one)		-				
Sole Proprietorship	Partnership	Limited Liability Company	Corporat	ion Tru	Non-Profit Organization		Other	
Business Designat	ion Group (Pleas	e select all that apply	0			1		
MBE	□WBE	SBE	☐ PBE		□ VET		VET	ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise		ly Challenged Enterprise	Veteran Owned Business		abled Veteran ned Business	Emerging Small Business
Number of Cla	rk County Ne	evada Residents	s Employe	d:		0		
		State Street Capital II, GP LP						
Corporate/Business Entity Name:			.,					109-1111
(Include d.b.a., if a	oplicable)	1290 Avenue of the	Americas 10	ith Floor	Website:			
Street Address:		1290 Avenue of the Americas, 10th Floor						
City, State and Zip	Code:	New York, NY 10104			POC Name:			
					Email:		••••	
Telephone No:	the state of	212-613-3100			Fax No:		tte. Au deswi	0.750 - 10
Nevada Local Street Address:				Website:				
(if different from at					L - I P - M -		7011-270	114
City, State and Zip Code:					Local Fax No:			
Local Telephone No:			Local POC Name:					
financial interest in the Publicly-traded enti- ownership or financia	e business entity ap ties and non-prof I interest. The disclo	pearing before the Boar it organizations shall some requirement, as an someopized under or or	rd.  I list all Corpo  pplied to land-u  overned by Title	orate Officers se applications	ames of individuals holding and Directors in lieu of , extends to the applicant and da Revised Statutes, includerships, and professional co	disclosin nd the lar	ng the names of ndowner(s). not limited to privi	individuals with
financial interest in the Publicly-traded enti- ownership or financia	e business entity ap ties and non-prof I interest. The disclo	pearing before the Boar it organizations shall some requirement, as an someopized under or or	rd.  I list all Corpo  pplied to land-u  overned by Title	orate Officers se applications	and Directors in lieu of extends to the applicant an	disclosing the lar	ng the names of ndowner(s). not limited to privi	individuals with ate corporations,
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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				
		7.404					
			1000				
* 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							