DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity	у Тур	e (Please select	one)									
Sole Proprietorship		Partnership		Limited Liability	C	Corporation	Trus	t Non-Pr Organizati			Other	
Business Desig	nati	on Group (Pleas	e sel	ect all that apply)	1				-		
□MBE □WBE			□SBE		□PBE		□ VET	□VET □DVET □E		ESB		
Minority Business Enterprise Women-Owned Business Enterprise			Small Business Enterprise		Physically Challenged Business Enterprise		Veteran Ow Business	vned	Disabled Veteran Owned Business Emerging Small Business			
	_											
Number of Clark County No			evada Residents Employed: 103									
Corporate/Business Entity Name:			WestCare Nevada Inc									
10 220												
(Include d.b.a., if applicable) Street Address:			1711 Whitney Mesa Drive					Website: www.westcare.com				
Street Address			Henderson, NV 89014					POC Name: Shawn Jenkins				
City, State and	Zip (Code:	702-385-2090					Email: shawn.jenkins@westcare.com				
								Fax No: 702-977-5949				
Telephone No:	-		102	000 2000	-			Fax No: 102 071 00 10				
Nevada Local S	Stree	t Address:		Website:								
(If different from	n ab	ove)	-									
City, State and	Zip	Code:			-	Local Fax No:						
Local Telephor	ne No):						Local POC Name:				
200ai Tolopiloi				E				Email:				
ownership or financial interest. The disclosure requirement, Entities include all business associations organized under close corporations, foreign corporations, limited liability corr				anized under or go	governed by Title 7 of the Nevada Revised			da Revised Statu	ites, includi ssional corp	uding but not limited to private corporations,		
see attached document												
										have no ownership		
				-	-							
1. Are any inc	lividu	al members, partn County Water Red	ers, o lamat yes,	ded corporations. wners or principals ion District full-time please note that Co ts, or other contract	, inv eem	volved in the busi uployee(s), or app y employee(s), o	iness entit pointed/ele or appointe	y, a Clark County ected official(s)? ed/elected official(ent of A		
 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 th	e D	isclosure of Rela	tionship fo	orm on Page 2. If	no, please	print N	I/A on Page 2.)	
l certify under pe land-use approve	enalty als, c	of perjury, that all ontract approvals,	of the	information provid ales, leases or exc	ed I	herein is current, nges without the	complete completed	, and accurate. I a disclosure form.	also unders	stand th	nat the Board will n	ot take action on
Shawn A. Jenkins Digitally signed by Shawn A. Date: 2022.03.03 12:07:17-0				nawn A. Jenkins 07:17-08'00' Shawn Jenkins								
Signature Print Name												
COO, Western	Reai	on				3/3/22						
						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	N/A	N/A	N/A
* County employee means	Clark County. Department of	Aviation Clark County Dete	ntion Center or Clark County

"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
Print Name
Film Name

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

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

NPI# 1851574305, 1700223088, 1306022025, 1699169920, 1467858464

Board of Directors (NV Sec of State NV19811004704 – updated 4/20)

Name: John Jeppsen

Address: 10845 Griffith Peak Drive Ste 600, Las Vegas NV 89135

Name: Marilyn Moran

Address: 2500 Pinto Lane, LV NV 89109

Name: Richard Steinberg (President)

Address: PO Box 94738, LV NV 89193

Name: James Wadhams

Address: 10777 W Twain Ave, Ste 300 LV NV 89135

Name: William Ekstrom

Address: 1516 S Paloma Blanca Pl, Kingman AZ 86401

Name: Thomas Walsh II

Address: 180 28th Ave North, St Petersburg FL 33704

Name: Ramon Abadin

Address: 2333 Ponce De Leon Blvd, Coral Gables FL 33134

Name: Derrick Boazman

Address: 1860 Bond Drive, Atlanta GA 30315

Name: Mary Okada

Address: PO Box 3566, Hagatna Guam 96932 (US Terr)					
Address (Bus): PO Box 94738, LV NV 89193					
Non Board Members (Listed on NV SOS)					
Secretary					
Name: Jim Hanna					
Address: PO Box 94738, LV NV 89193					

Treasurer

Name: Kenneth Ortbals

Address: PO Box 94738, LV NV 89193