## DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Typ	e (Please select					, Non-Profit	-3			
Sole Proprietorship	Partnership	Limited Liab Company	ility E	/ Corporation	Trus	organization		Other		
Business Designation Group (Please select all that apply)										
MBE	□WBE	SBE		PBE		VET		DVET	ESB	
Minority Business Enterprise	Women-Owned Business Enterprise	Small Busi Enterprise		Physically Ch Business Ente		Veteran Owned Business		sabled Veteran vned Business	Emerging Small Business	
Number of Clark County Nevada Residents Employed: 19										
Corporate/Business Entity Name:		Intermountain Lock & Security Supply								
(Include d.b.a., if ap	plicable)									
Street Address:		3106 South	Street		Website: www.iml	<sub>ebsite:</sub> www.imlss.com				
City, State and Zip Code:		Salt Lake City, UT 84115				POC Name: Russ Perkins Email: Russ.Perkins@imlss.com				
Telephone No:		(801)486-0079 Fax No: (801					01)983-1094			
Nevada Local Street Address:		3910 Graphic Center Dr.			Website: www.imlss.com					
(If different from above)		Las Vegas, NV 89118				Local Fax No: (702)939-5626				
City, State and Zip Code:		(702)939-5625			25	Local POC Name: John Miers				
Local Telephone No	,.	(102)333 332 Email: 30				onn.iviie	is@imss.com			
Publicly-traded entities and non-profit organizations stownership or financial interest. The disclosure requirement, as Entities include all business associations organized under or close corporations, foreign corporations, limited liability comparations. Full Name  Neal Hickenlooper			as applie	ed to land-use ap ned by Title 7 of partnerships, limit	the Neva	extends to the applicant and the landowner(s).  a Revised Statutes, including but not limited to private corporations,			ate corporations, d blicity Traded	
This section is not required for publicly-traded corporations. Are you a publicly-traded corporation?  Yes V 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 V 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.)										
<ol> <li>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)?</li> </ol>										
Yes Vo (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.										
John Miers Discretion and the street of the										
Branch Manager 08/02/2023										
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			
follows:  • Spouse – Registere	consanguinity" applies to the d Domestic Partners – Childre lalf-Brothers/Half-Sisters – Gra	n – Parents – In-laws (first de	gree)
For County Use Only:	noted should placed complete the full	owing:	
	noted above, please complete the foll aployee(s) noted above involved in the		s particular agenda item?
	nployee(s) noted above involved in any		
Notes/Comments:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	
Signature			
Print Name Authorized Department Represent	ative		