EXHIBIT VII - DISCLOSURE OF OWNERSHIP/PRINCIPALS FORM SOLICITATION NO.: ITB-260003

Business Fn	titu Tu	pe (Please selec	t and	<u>.</u>						~~~	77 s two t-	
Sole	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	ne (Liteage paye)							D 11.			
Proprietorship		Partnership	Co	Limited Llability mpany	L	Corporation	☐ Trus	L] Nor Organi	z-Profit zation	☐ Other		
Business De	signat	on Group (Plea	se se	lect all that apply	y)				.,,,	Ç	A = ~ too designed and the second	
☐ MBE		☐ WBE		SBE		☐ PBE		□ VET	I	DVET	∐ £SB	
Minority Busine Enterprise	ess	Women-Owned Business Enterp	orise	Small Business Enterprise		Physically Chi Business Ente		Veteran Busines		Disabled Veteran Owned Business	Emerging Small Business	
Number of Cl	ark Cou	inty Nevada Res	idents	Employed: N/A	7		~~~~~					
Corporate/Bu	siness	Entity Name:	Air	gas USA, LLC							***	
(Include d.b.a., if applicable)												
Street Address;			373	3737 Worsham Ave				Website: www.airgas.com				
City, State and Zip Code:		Lor	Long Beach, CA 90808				POC Name: Jennifer Flores Email: Jennifer.Flores@airgas.com					
Telephone No:			2	213-549-7052				Fax No:				
Nevada Local		Address'										
(If different fro							Website:					
City, State an							Local Fax No:					
	Ony, outle and Elp obder			· · · · · · · · · · · · · · · · · · ·			Local POC Name;					
Local Telepho	ne No:							Email;				
All entities, w	th the c	xception of public	ly-trad	led and non-profit on ng before the Boar	orga	inizations, must			luais holding m	ore than five percent (5°	%) ownership or	
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			% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)		olicly Traded		
Airgas, Inc.	American Air Liquide Holdings, Inc.							100%				
American Air Elgolde Holdings, Inc.							100%					
		Name to the second seco	24 00500		2013	Parti Albert Andrews						
				ded corporations.				•		⊠ 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	Yes 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.)											
 Do any Individual members, partners, owners or principals have a spouse, registered dornestic 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. Samil												
Signature VP By La Congress Samil Jussina Print Name 8/8/2025												
					-	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						
NA									
* 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 of follows:	consanguinity" applies to the	candidate's first and second	degree of blood relatives as						
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:									
Hotes/comments.									
Signature									
J									
Print Name Authorized Department Represental	tive								