DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Enti	ty Ty	e (Please select	one										
Sole Proprietorship		Partnership		Limited Liability mpany	7	Corporation	Trus	st	Non-Profit Organization		Other		
Business Des	ignati	on Group (Pleas	e sel	ect all that apply)					_		Tr.—s.	
□мве		□WBE		□SBE		PBE		4	VET		OVET	□ESB	
Minority Business Enterprise Women-Owned Business Enterprise			Small Business Enterprise		Physically Challenged Business Enterprise			Veteran Owned Business	Disabled Veteran Owned Business Emerging Small Business				
Number of	Cla	rk County Ne	evad	da Residents	E	mployed:				1			
Corporate/Business Entity Name:			Western Extrication Specialists, Inc.										
(Include d.b.a., if applicable)													
Street Address:			4350 Adam Rd. Websi					We	bsite: www.holmatro-westx.com				
Oli oct / tadi oc	<u>. </u>		Simi Valley, CA 93063					POC Name: Dane Jackson					
City, State and	d Zip	Code:	,					Email: djackson@holmatro-westx.com					
Telephone No	:		805-624-7475					Fax No: 805-624-7475					
		4 8 4 4 4 4 4 4 4 4	Transition of the second										
	Nevada Local Street Address:			Website:									
(If different from above)			\vdash	Local Fax No:					cal Fax No:				
City, State and Zip Code:			Local POC Name:										
Local Telepho	ne N	:	Email:										
ownership or financial interest. The disclosure requirement, as a Entities include all business associations organized under or g close corporations, foreign corporations, limited liability compani				anized under or go	overned by Title 7 of the Nevada R			Revised Statutes, including but not limited to private ps, and professional corporations. % Owned (Not required for Public Corporations/Non-profit or		d olicly Traded			
Dane Jackson				Owner/President				100					
-													
This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? ☐ Yes ✓ 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		√ No (If	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		✓ No (If	yes, p	please complete the	e Dis	sclosure of Relat	ionship for	rm o	n Page 2. If no, please	print N	I/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.													
Dane Jackson Date: 2025.11.12 08:55:19 -08'00'						Dane Jackson							
Signature					Print Name								
Owner/Preside	ent					November 12	, 2025						
Title						Date							

DISCLOSURE OF RELATIONSHIP

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

		DEL ATIONS UP 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						
N/A									
	1								
* 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	d Domestic Partners – Childrei	n – Parents – In-laws (first deg	gree)						
Brothers/Sisters – Half-Brothers/Half-Sisters – Grandchildren – Grandparents – In-laws (second degree)									
y									
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									
2									
Print Name Authorized Department Representa	tive								



To whom it may concern:

Since August of 2019, Western Extrication Specialists (WES) has been the sole source dealer of Holmatro Rescue tools for the Clark County Fire Department as well as several other fire departments in Nevada. From that time and presently, WES has offered a minimum 5% discount from list price on all Holmatro Rescue tools sold to the Clark County Fire Department. I have also offered free shipping on all said tools as well.

It is my continued intention to offer the same discount and free shipping on all future rescue tool orders and at my discretion, apply an additional 2% on all single orders placed over \$250,000 for the entire time that I am the owner/president of WES.

If you have any questions or concerns regarding this matter, feel free to contact me.

Dane Jackson, Owner/President
Western Extrication Specialists, Inc.
djackson@holmatro-westx.com