¥ 10000		· · · · · · · · · · · · · · · · · · ·	- DISCLOSUF	RE OF OWN	NERSH	P/PRINCIPAL	S			
Business Entit	у Тур	e (Please selec	t one)		,					
Sole Proprietorship		Partnership	Limited Liability Company	Corporation	Trust	Non-Profit Organization				
Business Desi	gnatio	on Group (Pleas	e select all that apply	)			T	<del></del>		
<b>✓</b> MBE	_		□SBE	□PBE	□ VET		DVET	ESB		
Minority Busines	Minority Business Women-Owned		Small Business Enterprise	Physically Cl Business En		Veteran Owned Business	Disabled Veteran Owner Business	Emerging Small Business		
Number of	Clar	k County N	evada Residents	Employed:	62					
Corporate/Business Entity Name:			Bamboo Sunrise, LLC							
(include d.b.a.,	(Include d.b.a., if applicable)									
Street Address	Street Address:			98 East Lake Mead Parkway, Suite 201 Website: www.bambo						
City, State and Zip Code:			Henderson, NV 89015			POC Name: Michael Flynn  Email: michael@bamboosunrise.net				
Telephone No:	Telephone No:			Fax No:						
Nevada Local Street Address:						Website:				
(If different from above) City, State and Zip Code:						Local Fax No: 702-433-2210				
	The second secon			702-433-3038			Local POC Name:			
Local Telephor	Local Telephone No:			702			Email:			
close corporation	all bus	eign corporations,	limited liability companie	es, partnerships, lim	ited partners	a Revised Statutes, inclui hips, and professional co	rporations. % Owr (Not required for F	ed ublicly Traded		
Shirley Lim Holdeman			Owner - CEO			Corporations/Non-profit organizations) 100%		ofit organizations)		
				A CONTRACTOR OF THE PROPERTY O						
							<del></del>			
						u u	1			
			cly-traded corporations			_				
1 Are any ind Center or 0	dividua Clark (	County Water Rec	ciamation District full-time	e employee(s), or as	opointed/elec					
Yes	ł	No (II	fyes, please note that Contracts, or other contrac	ounty employee(s), ts, which are not su	or appointed bject to com	l/elected official(s) may no petitive bid.)	ot perform any work on p	rofessional service		
sister, gran	ndchild	l, grandparent, re	ers, owners or principals elated to a Clark County, d/elected official(s)?	have a spouse, re Department of Avi	gistered don ation, Clark (	nestic partner, child, pare County Detention Center	nt, in-law or brother/siste or Clark County Water R	r, half-brother/half- eclamation District		
Yes				e Disclosure of Rel	ationship for	m on Page 2 If no, pleas	se print N/A on Page 2.)			
I certify under per land-use approve	nalty o	of perjury, that all intract approvals,	of the information provid land sales, leases or ex	led herein is curren changes without the	t, complete, completed	and accurate I also unde disclosure form,	erstand that the Board wil	not take action on		
1-1	C	1/2		China i ii	alda					
Signature	C			Shirley L. H						
					7	121/22	3			
Owner - CEO							: <b>)</b>			

## 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			

<sup>\*</sup> County employee means Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District.

"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
Authorized Denartment Representative

<sup>&</sup>quot;Consanguinity" is a relationship by blood. "Affinity" is a relationship by marriage.