

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input checked="" type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> 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 Clark County Nevada Residents Employed:				300		
Corporate/Business Entity Name:		Catholic Charities of Southern Nevada				
(Include d.b.a., if applicable)		n/a				
Street Address:		1501 Las Vegas Boulevard North		Website: catholiccharities.com		
City, State and Zip Code:		Las Vegas, NV 89101		POC Name: Kate Thum		
				Email: grants@catholiccharities.com		
Telephone No:		702-215-4718		Fax No: 702-384-0677		
Nevada Local Street Address:		Same as above		Website: Same as above		
(If different from above)						
City, State and Zip Code:		Same as above		Local Fax No: Same as above		
Local Telephone No:		Same as above		Local POC Name: Same as above		
				Email: Same as above		

All entities, with the exception of publicly-traded and non-profit organizations, must list the names of individuals holding more than five percent (5%) ownership or financial interest in the business entity appearing before the Board.

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)
Sara Ramirez	President & CEO	n/a
Chandra Hinds	Senior VP & CFO	n/a
Bobby Ghisolfo	Senior VP & COO	n/a

Please see attached Board of Trustees list.

This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? ☐ Yes ☒ No

- 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 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, 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.

 _____ Signature	Sara Ramirez _____ Print Name 2/6/2025 _____ Date
President & CEO _____ Title	

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 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 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 Department Representative



Sara Ramirez
President & Chief Executive Officer
1501 Las Vegas Blvd. N, Las Vegas, NV 89101
Phone: 702-387-2269 Fax: 702-384-0677

www.catholiccharities.com

BOARD OF TRUSTEES
July 1, 2024

Executive Chairman: **Most Rev. George Leo Thomas, Ph.D.**, Archbishop, Archdiocese of Las Vegas; Term limits not applicable

Chairman: **John P. Hester**, Retired – former President, Southwest Gas; 4th Term, July 1, 2024 - June 30, 2027

Vice Chairman: **Tom McCormick**, President, Touchstone Living; 4th Term, July 1, 2022 - June 30, 2025

Secretary: **Marilyn Spiegel**, The Thomas Spiegel Family Foundation; 3rd Term, July 1, 2022 - June 30, 2025

Treasurer: **John B. Page**, Partner, PricewaterhouseCoopers LLP; 3rd Term, July 1, 2022 - June 30, 2025

William J. Bullard, CFO, Fertitta Enterprises; 3rd Term, July 1, 2022 - June 30, 2025

Julie Gilday-Shaffer, CEO, JGS Group; 1st Term, July 1, 2023 - June 30, 2026

Rev. James Michael Jankowski, Pastor, St. Elizabeth Ann Seton; Term limits not applicable

Yolanda King, Partner, King Strategies LLC; 1st Term, July 1, 2023 - June 30, 2026

Rev. Samuel Martinez, Pastor, Prince of Peace; Term limits not applicable

Patrick S. Miller, President & CEO, Rio Hotel & Casino, 2nd Term, July 1, 2024 - June 30, 2027

Pat Mulroy, Owner, Sustainable Strategies/UNLV School of Law; 2nd Term, July 1, 2022 - June 30, 2025

Julie Murray, Principal & CEO, Moonridge Group; 2nd Term, July 1, 2022 - June 30, 2025

Gia D Nguyen, Area President, DHI Engineering, LLC; 1st Term, January 1, 2023 - June 30, 2026

Mark J. Ricciardi, Regional Managing Partner, Las Vegas, Fisher & Phillips LLP; 2nd Term, July 1, 2022 - June 30, 2025

Victoria Umphress, Partner, RSM US LLP; 2nd Term, July 1, 2024 - June 30, 2027

DISCLOSURE OF OWNERSHIP/PRINCIPALS

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<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> 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 Clark County Nevada Residents Employed:				30		
Corporate/Business Entity Name:		CPLC Nevada, Inc.				
(Include d.b.a., if applicable)						
Street Address:		555 N. Maryland Pkwy.		Website: https://cplc.org/regions/nevada		
City, State and Zip Code:		Las Vegas, NV 89101		POC Name: Seneuefa Guyton		
				Email: seneuefa.guyton@cplc.org		
Telephone No:		(702) 207-1614		Fax No:		
Nevada Local Street Address:				Website:		
(If different from above)						
City, State and Zip Code:				Local Fax No:		
Local Telephone No:				Local POC Name:		
				Email:		

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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)
Andres Contreras	Board Chair	
Alicia Nunez	Vice Chair	
Nancy Lipman	Secretary	
Jesse Satterlee	Chief Financial Officer	

This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? ☐ Yes ☒ No

- 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)?
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☐ 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.

Andres Contreras
 Digitally signed by Andres Contreras
 Date: 2025.02.19 11:10:41 -07'00'
 Signature
 Board Chair
 Title

Andres Contreras
 Print Name
 2/18/2025
 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
N/A			

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- ☐ 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 Department Representative

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Business Entity Type (Please select one)						
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Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> 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 Clark County Nevada Residents Employed:					159	
Corporate/Business Entity Name:		HELP of Southern Nevada				
(Include d.b.a., if applicable)						
Street Address:		1640 E. Flamingo Rd #100		Website: www.helpsonv.org		
City, State and Zip Code:		Las Vegas NV 89119		POC Name: Fuilala Riley		
				Email: friley@helpsonv.org		
Telephone No:		702-369-4357 ext. 1238		Fax No: 702-369-4089		
Nevada Local Street Address:		N/A		Website: N/A		
(If different from above)						
City, State and Zip Code:		N/A		Local Fax No: N/A		
Local Telephone No:		N/A		Local POC Name: N/A		
				Email: N/A		

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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
-Please see attached-		

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☐ 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.)
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 Signature	Fuilala Riley Print Name
President & CEO Title	2/10/25 Date

DISCLOSURE OF RELATIONSHIP

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(Mark N/A, if not applicable.)

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N/A			

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- ☐ 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 Department Representative



	<p>Fuila Riley, President/CEO (702) 238-3702 friley@helpsonv.org</p>
	<p>Shelly Torres, Chief Financial Officer (702) 860-4046 storres@helpsonv.org</p>
	<p>Abby Quinn, Chief Community Relations Officer (702) 278-6916 aquinn@helpsonv.org</p>
	<p>Denise Gee, Chief Workforce Officer (702) 334-1686 dgee@helpsonv.org</p>
	<p>Thomas McClain, Chief Operations Officer (702) 445-2902 tmcclain@helpsonv.org</p>



HELP OF SOUTHERN NEVADA
BOARD OF TRUSTEES
AS OF June 6, 2024

	<p>1. Alam, John / 2022 Franchisee Ori'Zaba's Scratch Mexican Grill 6772 Sharks Bay Court Las Vegas, NV 89149 john@alamandkhan.com</p>
	<p>2. Avila, Jammie / 2019 Managing Partner/CEO Cornerstone Wealth Management 1368 Paseo Verde Parkway, #100 Henderson, NV 89012 jammie@cornerstonevegas.com</p>
	<p>3. Baker, Amber M. / 2022 CPA, CGMA, Tax Principal Clifton Larson Allen LLP 10845 Griffith Peak Drive, Suite 550 Las Vegas, NV 89135 Amber.Baker@claconnect.com</p>
	<p>4. Brazill, Stacy / 2000 Owner, Broker Brazill Team Real Estate 215 E. Warm Springs Rd., Ste. 102 Las Vegas, NV 89119 stacy@thebrazillteam.com</p>
	<p>5. Buchanan, Chet/ 2014 Radio/Television Personality 98.5 KLUC Radio 7255 South Tenaya Way, #100 Las Vegas, NV 89113 chet@chetbuchanan.com</p>



	<p>6. Clingo, Kyle / 2011 Sr. Vice President, Operations United Healthcare 2720 N. Tenaya Way Las Vegas, NV 89128 Kyle.clingo@uhc.com</p>
	<p>7. Cooper-Tippett, Lisa / 2011 <u>Immediate Past Chairperson</u> Compliance Officer Credit One Bank, N.A. 6801 S. Cimarron Rd Las Vegas, NV 89113 Lisa.cooper-tippett@creditone.com</p>
	<p>8. Hackmey, Carrie / 2024 President & Owner Scaled Design Studio 10200 Summit Canyon Drive Las Vegas, NV 89144 cstamps1@gmail.com</p>
	<p>9. Hausch, Mary / 1974 Retired (UNLV) 1139 5th Place Las Vegas, NV 89104 mhausch@outlook.com</p>
	<p>10. Keidel, Duane / 2006 Retired (Southwest Gas Corp) 5138 Shadow Valley Las Vegas, NV 89148 Keidel@cox.net</p>



	<p>11. Lankowsky, Chelsea/2020</p> <p><u>Board Secretary</u> Lankowsky Management LLC 35 Tapadero Lane Las Vegas, NV 89138 <u>Brownc8@gmail.com</u></p>
	<p>12. Maruca, Kelli / 2008</p> <p>Partner / Agency 702 7120 Rafael Ridge Way Las Vegas, NV 89119 <u>kelli@agency702.com</u></p>
	<p>13. Merritt, Jerrie / 2011</p> <p><u>Board Treasurer</u> Senior Vice President Community Development Manager Bank of Nevada 2700 W. Sahara Ave. Las Vegas, NV 89102 <u>jmerritt@bankofnevada.com</u></p>
	<p>14. Ray, Robert / 2016</p> <p>Senior Vice President-Manager Fidelity National Title Group NCS Las Vegas 8363 W Sunset Rd, #100 Las Vegas, NV 89113 <u>Robert.Ray@fnf.com</u></p>
	<p>15. Van Son, Hank / 2007</p> <p><u>Board Chairperson</u> Chief Financial Officer Terrible Herbst I JETT Gaming 5195 Las Vegas Blvd South Las Vegas, NV 89119 <u>hvanson@terribleherbst.com</u></p>



	<p>16. Zamir, Talor / 2022</p> <p>Peak Performance Life LLC 1037 Salford Dr. Las Vegas, NV 89144 talorzamir@gmail.com</p>
	<p>17. Zehirev, Vesela / 2017</p> <p><u>Board Vice-Chairperson</u> Corporate Philanthropy & Community Engagement Manager MGM Resorts International 840 Grier Drive Las Vegas, NV 89119 vzehirev@mgmresorts.com</p>

DISCLOSURE OF OWNERSHIP/PRINCIPALS

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<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input checked="" type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
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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 Clark County Nevada Residents Employed:				52		
Corporate/Business Entity Name:		Hopelink of Southern Nevada				
(Include d.b.a., if applicable)						
Street Address:		178 Westminster Way		Website: WWW.Link2hope.org		
City, State and Zip Code:		Henderson, NV 89015		POC Name: Jodi Lynn Higdon		
				Email: Finance@link2hope.org		
Telephone No:		702-566-0576		Fax No: 702-566-0494		
Nevada Local Street Address:		Same as Above		Website: Same as Above		
(If different from above)						
City, State and Zip Code:				Local Fax No: Same as Above		
Local Telephone No:				Local POC Name: Same as Above		
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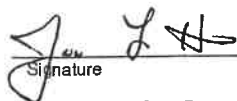
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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Aaron Sheets	Chief Executive Officer	0%
Jodi Lynn Higdon	Chief Financial Officer	0%
Kristin Aviles	Chief Operations Officer	0%
Danielle Sparks	Chief Social Services Officer	0%

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 Signature
 Chief Financial Officer
 Title

Jodi Lynn Higdon
 Print Name
 1/29/25
 Date

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(Mark N/A, if not applicable.)

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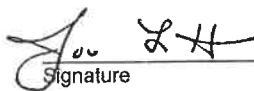
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Notes/Comments:

 1/29/25
 Signature
 Jodi Lynn Higdon
 Print Name
 Authorized Department Representative

2024-2025 Board of Directors

Scot Rutledge / CHAIR '24 -'25

Michael O'Brien

Jim Nyberg / TREASURER '23-'24

Steve Hamile

Christie McCart / SECRETARY '23-'24

Kellen Kautzman

**Thomas J. Schnitker (Immediate Past
Chair)**

Executive Team

Aaron Sheets, Since 2013
Chief Executive Officer
HopeLink of Southern Nevada
(C) 702-306-4168
(O) 702-566-0576 x314
Aaron@link2hope.org

Dani Sparks, since 2015
Chief Social Services Officer
HopeLink of Southern Nevada
(C) 725-577-3656
(O) 702-566-0576 x304
Dani.sparks@link2hope.org

Kristin Aviles, Since 2011
Chief Operating Officer
HopeLink of Southern Nevada
(C) 702-882-1355
(O) 702-566-0576 x303
Kristin@link2hope.org

Jodi Lynn Higdon, since 2019
Chief Financial Officer
HopeLink of Southern Nevada
(C) 702-561-2764
(O) 702-566-0576 ext. 317
finance@link2hope.org

Patricia Kelly, since 2017
Director of Client Services
HopeLink of Southern Nevada
(C) 702-982-9673
(O) 702-566-0576 x302
Patricia@link2hope.org

Tiffany Simmons, since 2020

Director of Housing Services
HopeLink of Southern Nevada
(C) 702-742-6991
(O) 702-566-0576 x1004
Tiffany@link2hope.org

Ryan Henson, since September 2022
Director of Administration
HopeLink of Southern Nevada
(C) 725-270-6560
(O) 702-566-0576 x1018
R.henson@link2hope.org

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input checked="" type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
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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 Clark County Nevada Residents Employed: 59						
Corporate/Business Entity Name: Jewish Family Service Agency						
(Include d.b.a., if applicable)						
Street Address:		5851 W. Charleston Blvd.		Website: www.jfsalv.org		
City, State and Zip Code:		Las Vegas, NV 89146		POC Name: Lynda R. Keeton-Cardno, CFO		
				Email: lcardno@keetoncpa.com		
Telephone No:		702-732-0304 ext. 120		Fax No: 702-914-0293		
Nevada Local Street Address:				Website:		
(If different from above)						
City, State and Zip Code:				Local Fax No:		
Local Telephone No:		702-732-0304 ext. 108		Local POC Name: Kenneth Moskowitz, CEO		
				Email: kmoskowitz@jfsalv.org		

All entities, with the exception of publicly-traded and non-profit organizations, must list the names of individuals holding more than five percent (5%) ownership or financial interest in the business entity appearing before the Board.

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)
Please see list of officer attached.		

This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? ☐ Yes ☒ No

- 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 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, 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.

Discussed by:  Signature President/CEO	Kenneth Moskowitz Print Name 3/3/2025 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
N.A			

* 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 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 Department Representative



FRANCISCO V. AGUILAR
 Secretary of State
 401 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov
www.nvsilverflume.gov

Annual or Amended List and State Business License Application

☐ ANNUAL ☒ **AMENDED** (check one)

List of Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers:

JEWISH FAMILY SERVICE AGENCY

NAME OF ENTITY

NV19771003913

Entity or Nevada Business
Identification Number (NVID)

TYPE OR PRINT ONLY - USE DARK INK ONLY - DO NOT HIGHLIGHT

IMPORTANT: Read instructions before completing and returning this form.

Please indicate the entity type (check only one):

☐ Corporation
☐ This corporation is publicly traded, the Central Index Key number is:

☒ Nonprofit Corporation (see nonprofit sections below)

☐ Limited-Liability Company

☐ Limited Partnership

☐ Limited-Liability Partnership

☐ Limited-Liability Limited Partnership

☐ Business Trust

☐ Corporation Sole

Filed in the Office of	Business Number
<i>FV Aguilar</i>	C2602-1977
Secretary of State	Filing Number
State Of Nevada	20254597897
	Filed On
	01/14/2025 18:29:06 PM
	Number of Pages
	4

Additional Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers, may be listed on a supplemental page.

CHECK ONLY IF APPLICABLE

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee.

- ☐ 001 - Governmental Entity
☐ 006 - NRS 680B.020 Insurance Co, provide license or certificate of authority number

For nonprofit entities formed under NRS chapter 80: entities without 501(c) nonprofit designation are required to maintain a state business license, the fee is \$200.00. Those claiming an exemption under 501(c) designation must indicate by checking box below.

☐ Pursuant to NRS Chapter 76, this entity is a 501(c) nonprofit entity and is exempt from the business license fee.
 Exemption Code 002

For nonprofit entities formed under NRS Chapter 81: entities which are Unit-owners' association or Religious, Charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C § 501(c) are excluded from the requirement to obtain a state business license. Please indicate below if this entity falls under one of these categories by marking the appropriate box. If the entity does not fall under either of these categories please submit \$200.00 for the state business license.

- ☐ Unit-owners' Association ☐ Religious, charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C. §501(c)

For nonprofit entities formed under NRS Chapter 82 and 80: Charitable Solicitation Information - check applicable box

Does the Organization intend to solicit charitable or tax deductible contributions?

- ☐ No - no additional form is required
☒ Yes - the "Charitable Solicitation Registration Statement" is required.
☐ The Organization claims exemption pursuant to NRS 82A 210 - the "Exemption From Charitable Solicitation Registration Statement" is required

****Failure to include the required statement form will result in rejection of the filing and could result in late fees.****



FRANCISCO V. AGUILAR
 Secretary of State
 401 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov
www.nvsilverflume.gov

Annual or Amended List and State Business License Application - Continued

Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers:

CORPORATION, INDICATE THE Director:

DOUG GOLD

USA

Name

Country

5851 W CHARLESTON BLVD

Las Vegas

NV

89146

Address

City

State Zip/Postal Code

CORPORATION, INDICATE THE President:

KENNETH MOSKOWITZ

USA

Name

Country

5851 W CHARLESTON BLVD

Las Vegas

NV

89146

Address

City

State Zip/Postal Code

CORPORATION, INDICATE THE Director:

CYNTHIA ASHER

USA

Name

Country

5851 W CHARLESTON BLVD

Las Vegas

NV

89146

Address

City

State Zip/Postal Code

CORPORATION, INDICATE THE Secretary:

SAM BERKLEY

USA

Name

Country

5851 W CHARLESTON BLVD

Las Vegas

NV

89146

Address

City

State Zip/Postal Code

CORPORATION, INDICATE THE Director:

AMY FIELDMAN (BOARD CHAIR)

USA

Name

Country

5851 W CHARLESTON BLVD

Las Vegas

NV

89146

Address

City

State Zip/Postal Code

CORPORATION, INDICATE THE Director:

BARBARA RABEN

USA

Name

Country

5851 W CHARLESTON BLVD

Las Vegas

NV

89146

Address

City

State Zip/Postal Code

None of the officers and directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X Kenneth Moskowitz

**Signature of Officer, Manager, Managing Member,
General Partner, Managing Partner, Trustee,
Subscriber, Member, Owner of Business,
Partner or Authorized Signer** *FORM WILL BE RETURNED IF*

UNSIGNED

President

Title

01/14/2025

Date

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input checked="" type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> 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 Clark County Nevada Residents Employed: 0						
Corporate/Business Entity Name: Nevada Partners, Inc.						
(Include d.b.a., if applicable)						
Street Address: 690 W. Lake Mead.			Website: www.nvpartners.org			
City, State and Zip Code: N. Las Vegas, NV 89030			POC Name: Lizette Guillen			
Telephone No:			Email: lguillen@nevadapartners.org			
Nevada Local Street Address:			Fax No: 702-844-8019			
(If different from above)			Website:			
City, State and Zip Code:			Local Fax No:			
Local Telephone No:			Local POC Name:			
			Email:			

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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)
Lizette Guillen	Acting President	
Steven Horsford	Board Chair	
Cedric Williams	Board Member	
Brooke Page	Board Member	

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 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.)

2. 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 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.

Lizette Guillen
Signature
Acting President / CEO
Title

Lizette Guillen
Print Name
11/28/25
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			

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

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- 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 Department Representative

NPI BOARD LIST Revised July 2023

Steven Horsford - 2015

R&R Partners

Caleb Dawkins - 07/2021

JP Morgan Private Bank

Cedric Williams - 07/2021

City of North Las Vegas Fire Department

Jerry Whitsett - 07/2021

M.R. Whitsett, Inc

Brooke Page 11/2021

The Corporation for Supportive Housing

Dr. Constance Brooks 03/2023

University of Nevada Las Vegas

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input checked="" type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> 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 Clark County Nevada Residents Employed:					62	
Corporate/Business Entity Name:		St. Jude's Ranch for Children				
(Include d.b.a., if applicable)						
Street Address:		200 Wilson Circle		Website: https://stjudesranch.org/		
City, State and Zip Code:		Boulder City, NV 89005		POC Name: Dr. Christina Vela, DPP-CEO		
				Email: cvela@stjudesranch.org		
Telephone No:		702-294-7100		Fax No:		
Nevada Local Street Address:				Website:		
(If different from above)						
City, State and Zip Code:				Local Fax No:		
Local Telephone No:				Local POC Name:		
				Email:		

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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)

This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? ☐ Yes ☒ No

- 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 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, 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.

Dr. Christina Vela, DPP
 Signature
 Chief Executive Officer
 Title

Dr. Christina Vela, DPP
 Print Name
 1-27-2025
 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
N/A			

* 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.

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- 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 Department Representative



BOARD OF TRUSTEES

Lance Knight
(Board Chairman)
Managing Advisor
Ashton Thomas Private Wealth
Office: 702-848-2848
Lknight@AT-PW.com

Cara Steele Huey
(Secretary/Treasurer)
VP of Corporate Finance
Caesar's Entertainment
Office: 702-407-6369
Cell: 702-428-0957
cahuey@caesars.com
carajhsteele@gmail.com

Robin Greenspun
Producer/Director
Culture Dog Films
Cell: 702-580-9090
robin@culturedog.com

Ashley Burney
Founder & President
Heart to Heart, LLC
Cell: 702-756-5477
ashleyburney@gmail.com

Jessica Cunningham
Senior Vice President, Legal Counsel &
Assistant Manager
MGM Resorts International
Cell: 702-692-5662
jecunningh@mgmresorts.com
jecunningham@mgmresorts.com

Angela Biletznikoff
Founder of Biletznikoff
Foundation
CEO of Biletznikoff 25 Wines
Cell: 925-580-4878
biletznikoff25@gmail.com

Mike Fath
Retired VP & Chief Procurement Officer
Caesars Entertainment, Inc.
Cell: 216-533-2934
fath.michael@gmail.com

Christie O'Melia McCart
CRA Officer/Senior Compliance Analyst
Toyota Financial Savings Bank
Office: 702-477-2137
Cell: 702-525-5018
christie.omelia@toyota.com

Col. Cameron Dadgar
US Airforce
Cell: 702-503-0492
cameron.dadgar@gmail.com

Rebecca Haines
Associate Attorney- JEFFREY BURR
Cell: 907-382-9555
rebecca@jeffreyburr.com

Kaitlin Molina
HR Caesar's Palace
Cell: 702-964-9288
Kaitlin.j.molina@gmail.com

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input checked="" type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> 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 Clark County Nevada Residents Employed: 55						
Corporate/Business Entity Name: The Just One Project						
(Include d.b.a., if applicable)						
Street Address:			1401 N. Decatur Blvd Ste. 34		Website: www.thejustoneproject.org	
City, State and Zip Code:			Las Vegas, NV 89108		POC Name: Brooke Neubauer	
					Email: brooke@thejustoneproject.org	
Telephone No:			702-462-2253		Fax No:	
Nevada Local Street Address:					Website:	
(If different from above)						
City, State and Zip Code:					Local Fax No:	
Local Telephone No:					Local POC Name:	
					Email:	

All entities, with the exception of publicly-traded and non-profit organizations, must list the names of individuals holding more than five percent (5%) ownership or financial interest in the business entity appearing before the Board.

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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
N/A	N/A	N/A

This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? ☐ Yes ☒ No

- 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 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, 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.

 Signature	Brooke Neubauer Print Name
Founder & CEO Title	2/6/2024 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 Detention Center or Clark County Water Reclamation District.

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- Brothers/Sisters – Half-Brothers/Half-Sisters – Grandchildren – Grandparents – In-laws (second degree)

For County Use Only:

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- ☐ 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 Department Representative

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input checked="" type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> 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 Clark County Nevada Residents Employed: 115						
Corporate/Business Entity Name:		The Salvation Army, A California Corporation				
(Include d.b.a., if applicable)		The Salvation Army				
Street Address:		30840 Hawthorne Blvd		Website: www.Usw.Salvationarmy.org		
City, State and Zip Code:		Rancho Palos Verdes, CA 90275		POC Name: Michele Fischer		
				Email: Michele.Fischer@usw.salvationarmy.org		
Telephone No:				Fax No: 562 491-8875		
Nevada Local Street Address:		2900 Palomino Lane		Website: www.SalvationArmySouthernNevada.Org		
(If different from above)						
City, State and Zip Code:		Las Vegas, NV 89108		Local Fax No: 702 870-4391		
Local Telephone No:		702 870-4430		Local POC Name: Elsie L. Lewis		
				Email: Elsie.Lewis@usw.salvationarmy.org		

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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
See Attached List		

This section is not required for publicly-traded corporations. Are you a publicly-traded corporation?

☐ Yes ☒ No

- 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 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, 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.


 Signature
 GENERAL SECRETARY

MAJOR DAVID YARDLEY

Print Name

2/11/2025

Date

Title

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			

* 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 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
MAJOR DAVID YARDLEY

Print Name
 Authorized Department Representative

GENERAL SECRETARY

THE SALVATION ARMY
(a California corporation)

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ALEXANDRIA, VA 22313

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