

# DISCLOSURE OF OWNERSHIP / PRINCIPALS FORM

## Business Entity Type (Please select one)

<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
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## Business Designation Group (Please select all that apply)

<input type="checkbox"/> MBE Minority Business Enterprise	<input type="checkbox"/> WBE Women-Owned Business Enterprise	<input type="checkbox"/> SBE Small Business Enterprise	<input type="checkbox"/> PBE Physically Challenged Business Enterprise	<input type="checkbox"/> VET Veteran Owned Business	<input type="checkbox"/> DVET Disabled Veteran Owned Business	<input type="checkbox"/> ESB Emerging Small Business
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**Number of Clark County Nevada Residents Employed:** 1,176

## Business Information:

Corporate/Business Entity Name: Barclays Capital Inc.		
(Include d.b.a., if applicable)		
Street Address:	745 Seventh Ave.	Website: barclays.com/ib
City, State and Zip Code:	New York, NY 10019	POC Name: Adam Aranda
Telephone No:	(415) 274-5453	POC Email: adam.aranda@barclays.com
		Fax No:
Nevada Local Street Address: (If different from above)	2280 Corporate Circle	Website:
		Local POC Name:
City, State and Zip Code:	Henderson, NV 89074	Local POC Email:
Local Telephone No:	(877) 523-0478	Local Fax No:

**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 <small>(Not required for Publicly Traded Corporations/Non-profit organizations)</small>
Nigel Higgins	Group Chairman	N/A
C.S. Venkatakrishnan	Group Chief Executive	N/A
Anna Cross	Group Finance Director	N/A

**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.

  
 \_\_\_\_\_  
 Signature  
 Director  
 Title

Adam Aranda  
 \_\_\_\_\_  
 Print Name  
 April 18, 2025  
 \_\_\_\_\_  
 Date

## DISCLOSURE OF OWNERSHIP / PRINCIPALS FORM

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
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A

\*County employee means an employee of Clark County, 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 anyway with the business in performance of the contract?

Notes/Comments:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name  
Authorized Department Representative

Revised 7/25/2014

## DISCLOSURE OF OWNERSHIP / PRINCIPALS FORM

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### Business Designation Group (Please select all that apply)

<input type="checkbox"/> MBE Minority Business Enterprise	<input type="checkbox"/> WBE Women-Owned Business Enterprise	<input type="checkbox"/> SBE Small Business Enterprise	<input type="checkbox"/> PBE Physically Challenged Business Enterprise	<input type="checkbox"/> VET Veteran Owned Business	<input type="checkbox"/> DVET Disabled Veteran Owned Business	<input type="checkbox"/> ESB Emerging Small Business
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**Number of Clark County Nevada Residents Employed:** 0

### Business Information:

Corporate/Business Entity Name:	BofA Securities, Inc.		
(Include d.b.a., if applicable)			
Street Address:	One Bryant Park	Website: <a href="http://www.bofam.com">www.bofam.com</a>	
City, State and Zip Code:	New York, NY 10036	POC Name: Matthew Jiang	
Telephone No:	800-637-7544	POC Email: <a href="mailto:matthew.jiang@bofa.com">matthew.jiang@bofa.com</a>	
		Fax No:	
Nevada Local Street Address: (If different from above)		Website:	
		Local POC Name:	
City, State and Zip Code:		Local POC Email:	
Local Telephone No:		Local Fax No:	

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Full Name	Title	% Owned <small>(Not required for Publicly Traded Corporations/Non-profit organizations)</small>
NB Holdings Corporation	Sole Shareholder	100

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

☐ Yes ☒ No

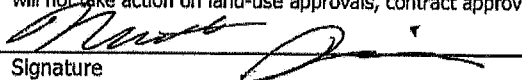
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 Signature  
 Director  
 Title

**Matthew Jiang**

Print Name

4/16/25

Date

## DISCLOSURE OF OWNERSHIP / PRINCIPALS FORM

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N/A	N/A	N/A	N/A

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☐ Yes ☐ No Is the County employee(s) noted above involved in anyway with the business in performance of the contract?

Notes/Comments:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name  
Authorized Department Representative

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**Number of Clark County Nevada Residents Employed:** 497

employed by JPMorgan Chase & Co.

### Business Information:

Corporate/Business Entity Name:	J.P. Morgan Securities LLC	
(Include d.b.a., if applicable)		
Street Address:	383 Madison Avenue	Website: <a href="https://www.jpmorgan.com/">https://www.jpmorgan.com/</a>
City, State and Zip Code:	New York, NY 10179	POC Name: Matthew Couch
Telephone No:	(212) 270-6000	POC Email: <a href="mailto:matthew.d.couch@jpmorgan.com">matthew.d.couch@jpmorgan.com</a>
		Fax No:
Nevada Local Street Address: (If different from above)		Website:
		Local POC Name:
City, State and Zip Code:		Local POC Email:
Local Telephone No:		Local Fax No:

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Full Name	Title	% Owned <small>(Not required for Publicly Traded Corporations/Non-profit organizations)</small>
JPMorgan Chase & Co.	Parent Company	100%

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

☒ Yes \* ☐ No


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\_\_\_\_\_  
Signature  
Executive Director  
\_\_\_\_\_  
Title

Matthew Couch

\_\_\_\_\_  
Print Name  
04/18/2025  
\_\_\_\_\_  
Date



## DISCLOSURE OF OWNERSHIP / PRINCIPALS FORM

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N/A	N/A	N/A	N/A

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Notes/Comments:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name  
Authorized Department Representative

# DISCLOSURE OF OWNERSHIP / PRINCIPALS FORM

## Business Entity Type (Please select one)

<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
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## Business Designation Group (Please select all that apply)

<input checked="" type="checkbox"/> MBE Minority Business Enterprise	<input type="checkbox"/> WBE Women-Owned Business Enterprise	<input type="checkbox"/> SBE Small Business Enterprise	<input type="checkbox"/> PBE Physically Challenged Business Enterprise	<input type="checkbox"/> VET Veteran Owned Business	<input type="checkbox"/> DVET Disabled Veteran Owned Business	<input type="checkbox"/> ESB Emerging Small Business
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Number of Clark County Nevada Residents Employed: 0

## Business Information:

Corporate/Business Entity Name: Samuel A. Ramirez & Co., Inc.		
(Include d.b.a., if applicable)		
Street Address:	61 Broadway, 29th Floor	Website: www.ramirezco.com
City, State and Zip Code:	New York, NY 10006	POC Name: Vincent A. Mazzaro
Telephone No:	(212) 248-0525	POC Email: vincent.mazzaro@ramirezco.com
		Fax No:
Nevada Local Street Address: (If different from above)	N/A	Website: N/A
		Local POC Name: N/A
City, State and Zip Code:	N/A	Local POC Email: N/A
Local Telephone No:	N/A	Local Fax No: N/A

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Full Name	Title	% Owned <small>(Not required for Publicly Traded Corporations/Non-profit organizations)</small>
Samuel A. Ramirez	President and CEO	63.8%
Samuel A. Ramirez, Jr.	Senior Managing Director	31.4%

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☐ Yes ☒ No

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☐ Yes ☒ No

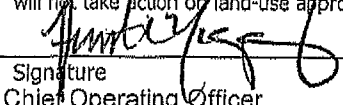
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(If yes, please complete the Disclosure of Relationship form on Page 2. If no, please print N/A on Page 2.)

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 Signature  
 Chief Operating Officer  
 Title

Vincent A. Mazzaro

Print Name  
 4/15/2025  
 Date

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N/A	N/A	N/A	N/A

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Notes/Comments:

Signature \_\_\_\_\_

Print Name \_\_\_\_\_  
Authorized Department Representative

Revised 7/25/2014



## DISCLOSURE OF OWNERSHIP / PRINCIPALS FORM

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**Number of Clark County Nevada Residents Employed:** 9

### Business Information:

Corporate/Business Entity Name:	RBC Capital Markets, LLC	
(Include d.b.a., if applicable)	RBC Wealth Management	
Street Address:	Three World Financial Center, 200 Vesey St	Website: www.rbccm.com
City, State and Zip Code:	New York, NY 10281	POC Name: Tom A. Yang
Telephone No:	(415) 445-8206	POC Email: tom.a.yang@rbccm.com
		Fax No: (415) 445-8679
Nevada Local Street Address:	10801 W Charleston Blvd	Website: www.rbcwealthmanagement.com
(If different from above)		Local POC Name: Michael Merback
City, State and Zip Code:	Las Vegas, NV 89135	Local POC Email: Michael.Merback@rbc.com
Local Telephone No:	702-893-8700	Local Fax No:

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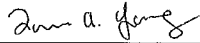
Full Name	Title	% Owned <small>(Not required for Publicly Traded Corporations/Non-profit organizations)</small>
RBC USA Holdco Corporation		100%

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 Signature  
 Managing Director  
 Title

Tom A. Yang  
 Print Name  
 April 17, 2025  
 Date

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name  
Authorized Department Representative

Revised 7/25/2014

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**Number of Clark County Nevada Residents Employed:** 982

### Business Information:

Corporate/Business Entity Name:	Wells Fargo Bank, National Association		
(Include d.b.a., if applicable)			
Street Address:	30 Hudson Yards, 15th Floor	Website:	
City, State and Zip Code:	New York, NY 10001	POC Name:	Kevin Carney
Telephone No:	(212) 214-2829	POC Email:	kevin.g.carney@wellsfargo.com
		Fax No:	
Nevada Local Street Address: (If different from above)		Website:	
		Local POC Name:	
City, State and Zip Code:		Local POC Email:	
Local Telephone No:		Local Fax No:	

**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 <small>(Not required for Publicly Traded Corporations/Non-profit organizations)</small>
Please See attached DEO Form		

**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

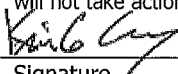
(If yes, please note that County employee(s), or appointed/elected official(s) may not perform any work on professional service contracts, or other contracts, which are not subject to competitive bid.)

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.

  
 Signature  
 Managing Director  
 Title

Kevin Carney

Print Name  
 April 10, 2024  
 Date

## DISCLOSURE OF OWNERSHIP / PRINCIPALS FORM

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 an employee of Clark County, 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 anyway with the business in performance of the contract?

Notes/Comments:

Signature \_\_\_\_\_

Print Name \_\_\_\_\_  
Authorized Department Representative

## WELLS FARGO BANK, NATIONAL ASSOCIATION

### Directors and Regulation O Executive Officers (Effective as of January 30, 2025<sup>1</sup>)

#### Directors

Mark A. Chancy  
Theodore F. Craver Jr.  
Richard K. Davis - Chair  
CeCelia G. Morken  
Maria R. Morris  
Charles W. Scharf\*

*\*Executive Director*

#### Regulation O Executive Officers

Charles W. Scharf	Chief Executive Officer and President
Muneera S. Carr	Executive Vice President, Chief Accounting Officer, and Controller
Bridget E. Engle	Senior Executive Vice President and Head of Technology
Kristy W. Fercho	Senior Executive Vice President and Head of Diverse Segments, Representation & Inclusion
Derek A. Flowers	Senior Executive Vice President and Chief Risk Officer
Kyle G. Hranicky	Senior Executive Vice President and CEO of Commercial Banking
Bei Ling	Senior Executive Vice President and Head of Human Resources
Ellen R. Patterson	Senior Executive Vice President and General Counsel
Scott E. Powell	Senior Executive Vice President and Chief Operating Officer
Fernando S Rivas	Senior Executive Vice President and CEO of Corporate & Investment Banking
Jason M. Rosenberg	Senior Executive Vice President and Head of Public Affairs
Michael P. Santomassimo	Senior Executive Vice President and Chief Financial Officer
Kleber R. Santos	Senior Executive Vice President and CEO of Consumer Lending
Barry Sommers	Senior Executive Vice President and CEO of Wealth & Investment Management
Saul Van Beurden	Senior Executive Vice President and CEO of Consumer, Small & Business Banking
Ather Williams III	Senior Executive Vice President and Head of Strategy, Digital Platform, and Innovation

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<sup>1</sup> Subject to Board approval on February 25, 2025.