| Business Enti | ty Tw | e (Please selec | t one | 1 | | | | | | | | |
|---|--|---|-------------------|---|--------------------|---------------------------|--------------------------------|----------------------------|---|---------|------------------|--|
| Sole Proprietorship | | Partnership | | Limited Liability | |] Corporation | ☐ Trus | st | ☐ Non-Profit Organization | | ☐ Other | |
| | ignati | on Group (Pleas | se sel | ect all that apply |) | | | | | | | |
| □MBE | | □WBE | | □SBE | | □РВЕ | | | □ VET | | OVET | □ESB |
| Minority Busine Enterprise | ess | Women-Owned Business Enterprise | | | | | abled Veteran rned Business | Emerging Small Business | | | | |
| Number of Clark County Nevada Residents Employed: 0 | | | | | | | | | | | | |
| Corporate/Bus | sines | s Entity Name: | UK | G Kronos Syste | em: | s, LLC | | | | | | |
| (Include d.b.a. | , if ap | plicable) | | | | | | | | | | |
| Street Addres | | | 900 | Chelmsford S | tre | et | | We | bsite: https://www.uk | g.cor | m/industry-solut | ons/public-sector |
| City, State and | | Code: | Lov | well, MA 01851 | | | | | C Name։ Andy Dei ail։ andrew.derriç | | kg.com | |
| Telephone No | : | | 330 |)-523-6798 | | | | Fax | No: | | | |
| Nevada Local | Stree | | n/a | l | | | | We | bsite: | | | |
| (If different fro | | | | | | | | Loc | cal Fax No: | | | |
| City, State an | u zip | Coue. | | | | | | | cal POC Name: | | | |
| Local Telepho | ne N |) : | | | | | | Em | | | | |
| 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 of close corporations, foreign corporations, limited liability companies, partnerships, limited partnerships, and professional corporations. Full Name Title When the public includes all business associations organized under or governed by Title 7 of the Nevada Revised Statutes, including but not limited to private of close corporations, foreign corporations, limited liability companies, partnerships, limited partnerships, and professional corporations. Full Name Title When the public includes all discourse in the landowner(s). Title When the public is a partner in the landowner | | | | | d blicly Traded | | | | | | | |
| Kronos Acq | uioiti | OHELO | | | | | | | | | | |
| | | | | | | | | | | | | |
| Are any ir Center or Yes | Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)? | | | | | | | | | | | |
| sister, gra | indchil | d, grandparent, re ee(s), or appointed | elated d/elect | to a Clark County, ed official(s)? | Dep | oartment of Avia | ition, Clari | k Col | stic partner, child, parent unty Detention Center of on Page 2. If no, please | r Clark | County Water Re | half-brother/half- clamation District |
| I certify under p | vals, c | of perjury, that all ontract approvals, | of the land s | information provide ales, leases or excl | ed h | erein is current. | complete | , and | accurate. I also underst | | | ot take action on |
| Signature | d | Misego | ad | is | | Linda Miseg Print Name | jadis | | | | | |
| Director - Put | olic S | ector | | | | 11/20/2025 | | | | | | |
| Title | | | | | _ | Date | | - | | | | |

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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| Water Reclamation District. "Consanguinity" is a relation "To the second degree of follows: Spouse – Registere | ship by blood. "Affinity" is a re | lationship by marriage. candidate's first and second n – Parents – In-laws (first de | |
| For County Use Only: | | | |
| If any Disclosure of Relationship is | noted above, please complete the follo | owing: | |
| Yes No Is the County em | ployee(s) noted above involved in the | contracting/selection process for this | particular agenda item? |
| ☐ Yes ☐ No Is the County em | ployee(s) noted above involved in any | way with the business in performance | e of the contract? |
| Notes/Comments: | | | |
| Linda Misegad Signature Linda Misegadis Print Name Authorized Department Representa | | | |

| Business Entity | Type (Please s | olact one | · · | | | | | | | | |
|--|------------------------------------|-------------------|-------------------------|------|--|------------|---------------------------|--|----------|--|--|
| Sole Proprietorship | Partnership | 6 | Limited Liability | | Corporation | Trus | st | Non-Profit Organization | | ☐ Other | |
| Business Design | nation Group (P | lease se | lect all that apply |) | 10- | | | | ., | | |
| □мве | □wbE | | □SBE | | □PBE | | | □VET | | OVET | □ ESB |
| Minority Business Enterprise | Women-Ow Business Enterprise | ness Enterprise B | | | Physically Challenged Business Enterprise | | Veteran Owned Business | | | Emerging Small Business | |
| Number of Clark County Nevada Residents Employed: 0 | | | | | | | | | | | |
| Corporate/Business Entity Name: Kronos Acquisition LLC | | | | | | | | | | | |
| (Include d.b.a., it | | | | | | | | | | | |
| Street Address: | | 900 | Chelmsford St | tre | et | | Web | site: https://www.uk | g.con | n/industry-soluti | ons/public-sector |
| City, State and Z | ip Code: | Lov | well, MA 01851 | | | | POC | : Name: Andy Der it: andrew.derrig | rig | | |
| Telephone No: | | 330 | 0-523-6798 | | | | Fax | | | | |
| Nevada Local St | roat Addreson. | | | | | | Mah | olto | | | |
| (If different from | | n/a | ı | | | | Web | Site: | | | |
| City, State and 2 | | | | | | | Loca | al Fax No: | | | |
| only, orace and a | ip oode. | | | | | | | al POC Name: | | | |
| Local Telephone | No: | | | | Email: | | | | | | |
| | | | | | | | | vised Statutes, includin , and professional corpo | | | |
| UKG Inc | | | | _ | | | | | | ot required for Pub orations/Non-profit | |
| | | | | | | | | | | | |
| This section is no | t required for pu | blicly-trac | ded corporations. | Ar | e you a publicly- | traded co | orpor | ration? Yes | | No | |
| Center or Cla | rk County Water F | Reclamatio | on District full-time e | simp | oloyee(s), or appo | inted/elec | cted of | | | | |
| ☐ Yes | ■ No | contracts | , or other contracts | , wi | hich are not subje | ect to com | petitiv | | | • | |
| sister, grando | | related to | o a Clark County, E | | | | | partner, child, parent, ty Detention Center or | | | |
| ☐ Yes | ₩ No | (If yes, pl | lease complete the | Dis | closure of Relatio | onship for | m on l | Page 2. If no, please p | rint N/A | A on Page 2.) | |
| land-use approvals, | | | | | | mpleted d | | ccurate. I also understa sure form. | nd tha | t the Board will not | take action on |
| Signature | | , | | | Print Name | | | | | and project verse. | A MINISTRAL PROPERTY OF THE PR |
| President Title | | | | | 11/21/2025 Date | | | | | | |
| | | | | | 1 | | | | | | |

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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| * County employee means Water Reclamation District. | Clark County, Department of | Aviation, Clark County Dete | ention Center or Clark County |
| "Consanguinity" is a relation | ship by blood. "Affinity" is a re | lationship by marriage. | |
| "To the second degree of follows: | consanguinity" applies to the | candidate's first and second | degree of blood relatives as |
| Spouse – Registere | d Domestic Partners – Childre | n – Parents – In-laws (first de | gree) |
| , Brothers/Sisters – F | lalf-Brothers/Half-Sisters – Gra | ndchildren – Grandparents – | In-laws (second degree) |
| 21011010/0101010 | | , | , - |
| 3 | | | |
| For County Use Only: | t to at a fall | | |
| | noted above, please complete the folio ployee(s) noted above involved in the | | nadicular agenda item? |
| | ployee(s) noted above involved in any | | |
| Notes/Comments: | proyee(s) noted above involved in any | way with the business in perioritatio | o di alo sonador. |

Signature

Elizabeth McCarron

| Business Designation Group (Please select all that apply) MBE SBE PBE VET DVET ESB | | | DIOOEGGG | | | | | | |
|--|--|---|---|---|----------------------------|---|----------------|--------------------------------------|---|
| Description Permenting Companies C | Business Entity Ty | pe (Please select | one) | | | | | | |
| Memory Business Number of Clark County Nevada Residents Employed: O | Sole Proprietorship |]Partnership | | Corporation | Trust | | | ☐ Other | |
| Mumber of Clark County Nevada Residents Employed: | Business Designat | tion Group (Pleas | e select all that apply |) | | | | | |
| Number of Clark County Nevada Residents Employed: Our CorporateRusiness Entity Name: UKG Inc. UkG Inc. Our CorporateRusiness Entity Name: UCG Inc. Our CorporateRusiness Entity Name: UKG Inc. Our C | ☐ MBE | □WBE | □SBE | □ PBE | | □VET | | OVET | □ESB |
| Number of Clark County Nevada Residents Employed: CorporateRusiness Entity Name: UKG Inc. | , | Business | | | | | | | Emerging Small Business |
| Street Address: 250 N. Commerce Parkway Website: https://www.ukg.com/industry-solutions/public-sect. 250 N. Commerce Parkway Poc Name: Andy Derrig | Number of Cla | rk County Ne | evada Residents | Employed: | 0 | | | | |
| Street Addross: 2250 N. Commerce Parkway Weston, FL 33326 Weston, FL 33326 PO Name: Andy Derrig Email: andrew.derrig@ukg.com Telephone No: 330-523-6798 Pax No: Novada Local Street Address: (If different from above) City, State and Zip Code: Local Telephone No: Local Fax No: Local PoC Name: Email: All entities, with the exception of publicly-traded and non-ordit organizations, must list the names of individuals helding more than five percent (3%) ownership or instance of individuals with ownership or financial interest. The disclosure recurrence, as applied to limit-use applications, actionates to the applicant and the innovance (3%) ownership or instance organizations, and professional corporations, dose corporations, foreign corporations, sented labelity companies, partnerships, limited partnerships, and professional corporations. Full Name Full Name Title Unite Intermediate Corp. This section is not required for publicly-traded corporations. Are you a publicly-traded corporations or publicly for other publicly for publi | Corporate/Busines | s Entity Name: | UKG Inc. | | | | | | |
| City, State and Zip Code: Weston, FL 33326 POC Name: Andy Derrig Email: andrew.derrig@ukg.com Telephone No: 330-523-6798 Fax No: Novada Local Street Address: (In/a) Website: (In/a) Website: Local Telephone 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%) connection or manable interest in the business entity appearing before the Ecand. Publicly-traded entities and non-profit organizations shall list all Corporate Officers and Directors in lieu or disposing the names of individuals with connection or programment in a spelled to discusare requirement in as spelled to individual percent (5%) connections, connections, foreign corporations, foreign corporations, Initiated liability companies, partnerships, limited partnerships, and professional corporations, foreign corporations, Initiated liability companies, partnerships, limited partnerships, and professional corporations. Full Name Title This section is not required for publicly-traded corporations. Are vary individual members, partners, conners or principals, involved in the business entry, a Cark County. Department of Avistion, Clark County Detention Center or Clark County Water Reclamation District full-line employee(s), or appointedelected discality may not perform any work on professional service contracts, vinich are not subject to competitive bits.) Are any individual members, partners, owners or principals have a spouse, registered domestic partner, child, parent, in-law or brothershieter, hell-brothershieter, fall-brothershieter, related to a Clark County, Department of Avistion, Clark County Obtention Center or Clark County Water Realmand on District full-line employee(s), or appointedelected difficuality in a partner, child, parent, in-law or brothershieter, hell-brothershieter, fall-b | (Include d.b.a., if a | pplicable) | | | | | | | |
| POC Name: Andly Derrig Email: andrew. derrig@ukg.com Telephone No: 330-523-6798 Fax No: Novada Local Street Address: n/a Website: (Irigidiferent from above) City, State and Zip Code: Local Fax No: Local Telephone No: Local Telephone No: Local Fox No: All entities, with the exception of publicly-traded and non-profit organizations, must list the names of individuals moding more than five percent (5%) ownership or financial interiors 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 disclosious 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 (Not required for publicly-traded corporations). This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? (Not required for Public Organizations) 100% This section is not required for publicly-traded corporations. Are any individual members, partners, owners or principals, involved in the business entry, 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) may not perform any work on professional sentice ontracts, which are not subject to competitive bid.) Limited in the members partners, owners or principals have a spouse, registered domestic partner, child, parent, in-law or brother/sister, half-brother/sister, half-brother/sister, signatchild, grandparent clark County Veter Realization District full-time employee(s), or appointed elected official(s)? | | | 2250 N. Commerc | e Parkway | v | Vebsite: https://www.u | kg.cor | n/industry-solut | ions/public-secto |
| Novada Local Stroet Address: n/a | | Code: | Weston, FL 33326 | ì | | | | kg.com | |
| City, State and Zip Code: Local Foc Name: Local Foc Nam | Telephone No: | | 330-523-6798 | | | | | | |
| City, State and Zip Code: Local Fax No: Local Fox No: | Nevada Local Stre | et Address: | n/a | | V | Vebsite: | | | |
| Local Telephone No: Local POC Name: Email: | (If different from al | oove) | 17.0 | | | | | | |
| 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 Tille 7 of the Nevada Revised Statues, including but not limited to private corporations, close corporations, foreign corporations, limited liability companies, partnerships, limited partnerships, and professional corporations. Full Name Title Tritie Tritie any individual members, partners, owners or principals, involved in the business entity, a Clark County. Department of Aviation, 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, which are not subject to competitive bid.) Dearly individual members, partners, owners or principals have a spouse, registered domestic partner, child, parent, in-law or brother/sister, half-brother/half-sister, grandchald, 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 or note that County employee(s), or appointed/elected official(s) and professional service contracts, which are not subject to competitive bid.) Dearly 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, | City, State and Zip | Code: | | | | ocal 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 islandowner(s). Entities include all business associations organized under or governed by Tille 7 of the Nevada Revised Statutes, including but not limited to private corporations, close corporations, foreign corporations, immited liability companies, partnerships, limited partnerships, and professional corporations. Full Name Title Title Title Title Title Title Title This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? The 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 (Isl-time employee(s), or appointed/elected official(s)? Yes This of the policy of the provided in the public organization organizations, and professional service contracts, or other contracts, which are not subject to competitive biod. 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.) Linda Misegadis First Name Linda Misegadis First Name | | | | | L | ocal POC Name: | | | |
| 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 Title Title Title This section is not required for publicity-traded corporations. Are you a publicity-traded corporation? This section is not required for publicity-traded corporations. Are you a publicity-traded corporation? The any individual members, partners, owners or principals, involved in the business entity, a Clark County. Department of Aviation, Clark County Detartion 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)? On any individual members, partners, owners or principals have a spouse, registered domestic partner, child, parent, in-law or brother/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)? Certain under penalty of perjury, that all of the information provided harein 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. Linda Misegadis Print Name Director - Public Sector Title Director - Public Sector Title Director - Public Sector | Local Telephone N | 10: | | | E | mail: | | | |
| Unite Intermediate Corp. This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? Yes No No No No No No No No No N | close corporations, fo | oreign corporations, | limited liability companies | s, partnerships, limit | ted partnersi | nips, and professional cor | poration (1 | is. % Owne Not required for Pu | d ublicly Traded |
| 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 | Unite Intermedi | ate Corp. | | | | _ | | , | fit organizations) |
| 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 | | | | | | | | | |
| 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. Linda Misegadis Print Name Director - Public Sector 11/21/2025 Date | | | | | | | _ | • | |
| 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 | Are any individual Center or Clark | . County Water Recl | amation District full-time | employee(s), or app | pointed/elect | ed official(s)? | | | |
| sister, grandchild, grandparent, related to a Clark County, Department of Aviation, Clark County Detention Center of Clark County Water Redaination District full-time employee(s), or appointed/elected official(s)? Yes No | - | co | ntracts, or other contracts | s, which are not sub | ject to comp | etitive bid.) | | | |
| 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. Linda Misegadis | sister, grandch | ild, grandparent, re yee(s), or appointed. | lated to a Clark County, /elected official(s)? | Department of Avia | ition, Clark (| County Detention Center | ог Сіагк | County Water Re | , half-brother/half- eclamation District |
| Linda Misegadis Signature Linda Sector Public Sector Title Linda Misegadis Print Name Linda Misegadis Print Name 11/21/2025 Date | Yes | ■ No (If | yes, please complete the | Disclosure of Rela | tionship forn | on Page 2. If no, please | e print N | /A on Page 2.) | |
| Director - Public Sector 11/21/2025 Title Date | certify under penalty land-use approvals, o | y of perjury, that all contract approvals, l | of the information provide and sales, leases or excl | ed herein is current, nanges without the o | complete, a completed d | nd accurate. I also under sclosure form. | stand th | at the Board will n | ot take action on |
| Director - Public Sector 11/21/2025 Title Date | Linda 7 Signature | Misegadi | is | - | adis | | | | |
| Title | | Sector | | | | | | | |
| | Title | | | | | | | | |

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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| Water Reclamation District. "Consanguinity" is a relation "To the second degree of follows: Spouse – Registere | Clark County, Department of ship by blood. "Affinity" is a reconsanguinity" applies to the d Domestic Partners – Childre Half-Brothers/Half-Sisters – Gra | lationship by marriage. candidate's first and second n – Parents – In-laws (first de | degree of blood relatives as gree) |
| For County Use Only: | | | |
| If any Disclosure of Relationship is | noted above, please complete the follo | owing: | |
| | nployee(s) noted above involved in the | | |
| Yes No Is the County en | nployee(s) noted above involved in any | way with the business in performand | e of the contract? |
| Notes/Comments: | | | |
| Linda Misegaa Signature Linda Misegadis | lis | | |

| Buck | noce Entitl | . Tue | on (Diagon color | at one | Y. | | | | | | | | | |
|-------------------------------|---|----------------|--|--|--|------------------|---------------------------------------|------------------------|---|--|---|--|---|--|
| □ Sc | | | pe (Please selet Partnership | To | Limited Liability | [編] | Corporation | ☐ Tru | ıst | ☐ Non-Profit Organization | | ☐ Other | | |
| | | ınati | on Group (Plea | | ect all that apply | /) | | | | | | | | |
| ПМ | | | □WBE | | □SBE | | □PBE | | | □ VET | To | DVET | □ESB | |
| Minor | ority Business Women-Owned Small Business Enterprise Enterprise | | | Physically Challenged Business Enterprise | | | Veteran Owned Business | | Disabled Veteran Owned Business Emerging Sm Business | | | | | |
| | | | -14 | | | | | | | | | | | |
| Number of Clark County Nevada | | | | | da Residents | En En | nployed: (| 0 | | | | | | |
| Corpe | Corporate/Business Entity Name: Unite Intermediate Corp. | | | | | rp. | | | | | | | | |
| | ide d.b.a. | | | | | | | | | | | | | |
| | t Address: | | | 225 | 50 N. Commerc | e Pa | arkway | | Wei | osite: https://www.u | kg.cor | n/industry-solut | ions/public-sector | |
| | State and 2 | | Code: | We | ston, FL 33326 | 5 | | | PO | Name: Andy De | rrig | | | |
| Telep | hone No: | | | 330 | 0-523-6798 | | | | Fax | No: | | | | |
| Nova | da Local S | tron | Address: | - | | | | | Wol | osite: | | | | |
| | ferent fron | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | n/a | I | | | | Wei | Jaile. | | | | |
| | State and | 1 | | 1 | | | | | Loc | al Fax No: | | | | |
| Oity, | Otate and | Z.IP | Joue. | | | | | | | al POC Name: | | | | |
| Local | Telephon | e No | ¢ . | | | | | | | Email: | | | | |
| owner Entitie | ship or finar es include a | ncial II bu | interest. The discl siness association | osure ns orga | requirement, as app anized under or gov | plied : verne | to land-use app d by Title 7 of t | dications, the Neva | , exter da Re | Directors in lieu of nds to the applicant and evised Statutes, includi s, and professional corp | d the la | ndowner(s). not limited to priva | | |
| Unite | Parent | Cor | Full Name | | | | Title | | | | % Owned (Not required for Publicly Traded Corporations/Non-profit organizations) 100% | | | |
| | | | | | ************************************** | | | | | | | | . WINDOWS (1997) | |
| | | | | | ded corporations. | | | | | | _ | No | | |
| | | | | | mers or principals, i on District full-time e | | | | | lark County, Departme official(s)? | nt of Av | viation, Clark Court | ty Detention | |
| (| ☐ Yes | | | | lease note that Cou , or other contracts | | | | | eted official(s) may not ive bid.) | perform | n any work on profe | essional service | |
| S | sister, grand | child | members, partne , grandparent, re e(s), or appointed | lated t | o a Clark County, [| have Depai | a spouse, regis rtment of Aviation | stered do on, Clark | mesti c Cour | ic partner, child, pareni nty Detention Center o | :, in-law r Clark | r or brother/sister, County Water Red | half-brother/half- damation District | |
| [| Yes | | ■ No (If | yes, p | ease complete the | Discl | osure of Relation | onship fo | rm on | Page 2. If no, please | print N/ | A on Page 2.) | | |
| | | | | | nformation provided les, leases or excha | | | | | accurate, I also underst osure form. | and tha | it the Board will no | t take action on | |
| Signate | | U | Gin | | | | Elizabeth Mo Print Name | Carron | 1 | | | | | |
| | | | | | | | | | | | | | | |
| Vice F | President | | | | | _ | 1/21/2025 Date | | | | | | | |

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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| * County employee means Water Reclamation District. | Clark County, Department of | Aviation, Clark County Dete | ention Center or Clark County |
| "Consanguinity" is a relation: | ship by blood. "Affinity" is a re | lationship by marriage. | |
| "To the second degree of of follows: | consanguinity" applies to the | candidate's first and second | degree of blood relatives as |
| Spouse – Registere | d Domestic Partners – Childre | n – Parents – In-laws (first de | gree) |
| · Brothers/Sisters – H | lalf-Brothers/Half-Sisters – Gra | andchildren – Grandparents – | In-laws (second degree) |
| | | | |
| For County Use Only: | | | |
| If any Disclosure of Relationship is I | noted above, please complete the follo | owing: | |
| ☐ Yes ☐ No Is the County em | ployee(s) noted above involved in the | contracting/selection process for this | particular agenda item? |
| ☐ Yes ☐ No Is the County em | ployee(s) noted above involved in any | way with the business in performanc | e of the contract? |
| Notes/Comments: | | | |

Signature

Elizabeth McCarron

| Business Entity Ty | na (Plazea ealar | | | | | | | | | |
|---|--|--|---|--|--|--|---|--|--|--|
| | pe p lease solee | t one) | - | | | - | | | | |
| Sole Proprietorship |]Partnership | Limited Liability | [1] | Corporation | ☐Trust | ☐ Non-Profit Organization | | Other | | |
| Business Designat | tion Group (Pleas | se select all that appl | y) | | | | | | | |
| □мве | □WBE | □SBE | | □ PBE | | □ VET | | □DVET □ ESB | | |
| Minority Business Enterprise Women-Owned Business Enterprise | | Small Busines Enterprise | s | Physically Challenged Business Enterprise | | Veteran Owned Business | | Disabled Veteran Emerging Sn Owned Business Business | | |
| | | | | | | | | | | |
| Number of Cla | rk County N | evada Resident | s Eı | mployed: (|) | | | | | |
| Corporate/Busines | Unite Parent Cor | Jnite Parent Corp. | | | | | | | | |
| (Include d.b.a., if a | | | | | | | | | | |
| Street Address: | ppicabicy | 2250 N. Commer | rce F | Parkwav | | /ebsite: https://www.u | ka.com | n/industry-soluti | ions/public-sector | |
| City, State and Zip | Code: | Weston, FL 3332 | | | Р | oc Name: Andy De | errig | | | |
| | | 000 500 0700 | - | | | | 19(0)(1) | 19,00111 | | |
| Telephone No: | | 330-523-6798 | - | | F | ax No: | - | | | |
| Nevada Local Stree | | n/a | | | ٧ | /ebsite: | | | | |
| (If different from at | | - | _ | | | | | | | |
| City, State and Zip | Code: | | | | | ocal Fax No: | | | | |
| Local Telephone N | o: | | | | | Local POC Name: Email: | | | | |
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List any disclosures below: (Mark N/A, if not applicable.)

| | NAME OF COUNTY* | RELATIONSHIP TO | COUNTY* |
|---|---|---|---------------------------------------|
| NAME OF BUSINESS OWNER/PRINCIPAL | EMPLOYEE/OFFICIAL AND JOB TITLE | COUNTY* EMPLOYEE/OFFICIAL | EMPLOYEE'S/OFFICIAL'S DEPARTMENT |
| N/A | 7,113 | | |
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| Water Reclamation District. "Consanguinity" is a relation "To the second degree of follows: Spouse – Registere | Clark County, Department of ship by blood. "Affinity" is a reconsanguinity" applies to the domestic Partners – Childre Half-Brothers/Half-Sisters – Grand | elationship by marriage. candidate's first and second n – Parents – In-laws (first de | degree of blood relatives as gree) |
| For County Use Only: | | | |
| | noted above, please complete the following the | | nadicular anenda item? |
| | nployee(s) noted above involved in the nployee(s) noted above involved in any | | |
| | npioyee(s) noted above involved in any | way with the business in performance | C of the contract. |
| Notes/Comments: | | | |

Elizabeth McCarron