

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 checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input checked="" 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: Aspire HR, LLC.						
(Include d.b.a., if applicable)						
Street Address:		5151 Belt Line Road, Suite 1125		Website: www.aspirehr.com		
City, State and Zip Code:		Dallas, TX 75254		POC Name: Winnie Chu		
				Email: wchu@aspirehr.com		
Telephone No:		214-880-0099		Fax No: 214-880-9914		
Nevada Local Street Address: (If different from above)		n/a		Website:		
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.

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)
Gabor Pulay	Managing Partner	5.29%	
Melissa Hillesheim	CEO, General Counsel		62.25%
Brian Collett	Managing Partner		12.17%
Winnie Chu	Managing Partner		5.29%
Randy Griffith	President		15.00%

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

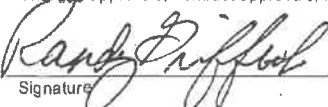
(If yes, please note that County employee(s), or appointed/elected official(s) may not perform any work on professional service contracts, or other contracts, which are not subject to competitive bid.)

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

Randy Griffith

Print Name

President

Title

Date

3/21/2023

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:

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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

DISCLOSURE OF OWNERSHIP/PRINCIPALS

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<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
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: ATAWAY US, INC						
(Include d.b.a., if applicable)						
Street Address:		201 North Illinois St. 16th Floor South Tower		Website: WWW.ATAWAY.COM		
City, State and Zip Code:		Indianapolis, IN 46204		POC Name: Dick Kelley		
				Email: dkelley@ataway.com		
Telephone No:		+1 (916) 837-8556		Fax No:		
Nevada Local Street Address: (If different from above)		391 Willow Court D1		Website:		
City, State and Zip Code:		Incline Village, NV, 89451		Local Fax No:		
Local Telephone No:		+1 (916) 837-8556		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)
Jean-Michel Isoir	CEO	100%

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.)
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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.)

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 Signature	DAMIAN JANKOWSKI Print Name
GLOBAL DIRECTOR Title	10-APR-2023 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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Notes/Comments:

Signature

Print Name
Authorized Department Representative

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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:				0		
Corporate/Business Entity Name:		Effervescent Consulting <i>LLC</i>				
(Include d.b.a., if applicable)						
Street Address:		673 Potomac Station Dr, Suite 117		Website: Effervescentconsulting.com		
City, State and Zip Code:		20176		POC Name: Pavan Singh		
				Email: pavan.singh@effervescentconsulting.com		
Telephone No:		703 987 3978		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)
April Dua	President and CFO	51%
Pavan Singh	CEO	49%

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.)

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 Signature	Pavan Singh Print Name
CEO Title	4/6/2023 Date

DISCLOSURE OF RELATIONSHIP

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

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

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Notes/Comments:

Signature

Print Name
Authorized Department Representative

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Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input checked="" 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:				2		
Corporate/Business Entity Name:		Enterprise Outcomes, Inc.				
(Include d.b.a., if applicable)						
Street Address:		9725 Gavin Stone Avenue		Website: www.enterpriseoutcomes.com		
City, State and Zip Code:		Las Vegas, NV 89145		POC Name: Wayne Biernacki		
				Email: wbiernacki@enterpriseoutcomes.com		
Telephone No:		702-945-3364		Fax No:		
Nevada Local Street Address:				Website: www.enterpriseoutcomes.com		
(If different from above)						
City, State and Zip Code:				Local Fax No:		
Local Telephone No:		702-945-3364		Local POC Name: Wayne Biernacki		
				Email: wbiernacki@enterpriseoutcomes.com		

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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Wayne Biernacki	President	100

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

☐ Yes ☒ No

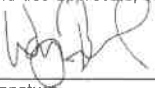
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☐ Yes ☒ No (If yes, please note that County employee(s), or appointed/elected official(s) may not perform any work on professional service contracts, or other contracts, which are not subject to competitive bid.)

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☐ Yes ☒ No (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	Wayne Biernacki _____ Print Name
President _____ Title	April 10, 2023 _____ Date

DISCLOSURE OF RELATIONSHIP

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

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N/A			

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Notes/Comments:

Signature

Print Name
Authorized Department Representative

DISCLOSURE OF OWNERSHIP/PRINCIPALS

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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: 0						
Corporate/Business Entity Name: Karma Consulting Inc						
(Include d.b.a., if applicable)						
Street Address: 33427 Pacific Highway S, Ste E10			Website: https://www.karmaconsulting.tech			
City, State and Zip Code: Federal way, WA 98003			POC Name: Gughanathan Iyer			
			Email: nathan@karmaconsulting.tech			
Telephone No: 646.963.3926			Fax No: 206.905.0386			
Nevada Local Street Address:			Website:			
(If different from above)						
City, State and Zip Code:			Local Fax No:			
Local Telephone No:			Local POC Name:			
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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Gughanathan Iyer	President & CEO	100

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☐ Yes ☒ No

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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	Gughanathan Iyer Print-Name
President & CEO	4/9/23 Date
Title	Date

DISCLOSURE OF RELATIONSHIP

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(Mark N/A, if not applicable.)

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N/A			

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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:				1		
Corporate/Business Entity Name:		Larnell Alan Enterprises, LLC				
(Include d.b.a., if applicable)						
Street Address:		9005 W Sahara Ave		Website: sourcing.larnellalan.com		
City, State and Zip Code:		Las Vegas, NV 89117		POC Name: Marcus A White		
				Email: mawhite@larnellalan.com		
Telephone No:		775-453-0450		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:		
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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Marcus A White	Founder & CEO	100

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☐ Yes ☒ No

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<u>Marcus A White</u> Signature	<u>Marcus A White</u> Print Name
<u>Founder & CEO</u> Title	<u>3.28.2023</u> Date

DISCLOSURE OF RELATIONSHIP

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(Mark N/A, if not applicable.)

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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 checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input checked="" type="checkbox"/> MBE	<input checked="" type="checkbox"/> WBE	<input checked="" 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:				83		
Corporate/Business Entity Name:		Link Tech, LLC				
(Include d.b.a., if applicable)		dba Link Technologies				
Street Address:		9505 Hillwood Drive, Suite 150		Website: www.linktechconsulting.com		
City, State and Zip Code:		Las Vegas, NV 89134		POC Name: Debbie Banko		
				Email: debbieb@linktechconsulting.com		
Telephone No:		702-233-8703		Fax No: 702-233-8053		
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.

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)
Debbie Banko	CEO	54%
Edward Harrison	Partner	48%

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

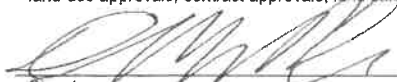
(If yes, please note that County employee(s), or appointed/elected official(s) may not perform any work on professional service contracts, or other contracts, which are not subject to competitive bid.)

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

Debbie Banko

Print Name

CEO

April 10, 2023

Title

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

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
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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: 30						
Corporate/Business Entity Name:		Rimini Street, Inc.				
(Include d.b.a., if applicable)						
Street Address:		7251 West Lake Mead Blvd., Suite 300		Website: https://www.riministreet.com/		
City, State and Zip Code:		Las Vegas, NV 89128		POC Name: Dalila Bueno Email: dbueno@riministreet.com		
Telephone No:		702-839-9671		Fax No: 702-973-7491		
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)
Seth Ravin	CEO, President & Chairman of the Board	N/A
Michael L. Perica	EVP & Chief Financial Officer	N/A
David Rowe	Chief Product Officer & EVP, Global Transformation	N/A
Nancy Lyskawa	EVP & Chief Client Officer	N/A

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

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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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☐ Yes ☐ No (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 CEO Title	Seth Ravin Print Name 4/7/2023 Date
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DISCLOSURE OF RELATIONSHIP

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(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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Notes/Comments:

Signature

Print Name
Authorized Department Representative