DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entit	у Туј	e Please selec	t one)		T				
Sole Sole Proprietorship		Partnership	Limited Liability Company	☐ Corporation	☐ Trust	Non-Profit Organization	Other		
Business Desi	nat	on Group (Plea	se select all that ap	ly)			Toller.	C cep	
MBE		☐ WBE	SBE	☐ PBE		□ VET	DOVET	ESB	
Minority Busines Enterprise	Minority Business Women-Owned		Small Busines Enterprise	s Physically Ch Business En	nallenged terprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business	
Number of	Cla	rk County N	levada Residen	ts Employed:	55		No.		
		St. Jude's Ranch for Children-Nevada Region Inc.							
Corporate/Business Entity Name:		***							
(Include d.b.a., if applicable)			St. Jude's Ranch for Children 200 Wilson Circle Website: www.stjudesranch.org						
Street Address	3;					OC Name: Jed Bla	ake, Quality Ass	urance Dir.	
City, State and	Zlo	Code:	Boulder City, NV 89005		- 1		udesranch.org		
-191 -1-17		of the American State of the Control	707 204 7100			Fax No: 702-294-7171			
Telephone No:	, pr. 195	Marine and a second	702-294-710	17		ax No:) g [g 13	
Nevada Local	Stree	et Address:			V	Vebsite:			
(If different fro	ın at	1000					The state of the s		
City, State and Zip Code:					Local Fax No:				
Ony, Otato and arp over				ι	Local POC Name:				
Local Telepho	ne N	o:			E	mail:			
			gipsure requirement, as	-applied to latte 400	f the Nevada	Revised Statutes, inclu	ding but not limited to pri		
			gipsure requirement, as	-applied to latte 400	f the Nevada		ding but not limited to prin	vale corporations, and publicly Traded	
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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
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		and the second opinion with the second opinion of	
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a nga wa nga nga nga nga nga nga nga nga nga ng	Annual		
Spouse – Registere	nsanguinity applies to the cal d Domestic Partners – Childro laif-Brothers/Haif-Sisters – Gr	an – Parents – In-laws (first c	
or County Use Only:			
any Disclosure of Relationship is	noted above, please complete the fo	illowing:	this particular aganda Itam?
Yes No is the County en	nployee(s) noted above involved in the	ne contracting/selection process for	ance of the contract?
	nployee(s) noted above involved in a	ily way with the business in parison.	
Notes/Comments:			
Signature	And Security And An of Conference on the		
Print Name Authorized Department Represent	lethic .		