## DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Typ	no /Please select	one)								
Flesio _	Partnership	Limited Liability		Corporation	Trust	Non-Profit Organization	Other			
Business Designati	on Group (Pleas	e select all that appl	y)							
MBE	✓WBE	□SBE		PBE		□VET		OVET	<b></b> ✓ E\$B	
Minority Business Enterprise	inority Business Women-Owned		S	Physically Challenged Business Enterprise		Veteran Owned Business			Emerging Small Business	
Number of Cla	rk County Ne	evada Resident	s E	mployed:			18			
Corporate/Business	Corporate/Business Entity Name: Logisit		ogisitcal Solutions, LLC							
(Include d.b.a., if ap	plicable)									
Street Address:		4780 W Ann Rd.,	, #5-237 Website: WWW.			Website: www.losonov	sonow.com			
City, State and Zip	City, State and Zip Code:					POC Name: Ginnie Sa Email:	Salazar - gsalazar@losonow.com			
Telephone No:		702-596-2021				Fax No: 702-974-1776				
-	Nevada Local Street Address: 2485		ar	rco St	,	Website:				
City, State and Zip	(If different from above)		89115 Local Fax No:			Local Fax No:				
513), 51415 4114 21	Oity, State and Zip Code.					Local POC Name:				
Local Telephone No	o:			Email:						
Publicly-traded entit	ies and non-prof		ard. Il list	t all Corporate	Officers a	nes of individuals holding of	disclosi	ng the names of	,	
Publicly-traded entit ownership or financial Entities include all bu	iles and non-prof interest. The disclo isiness associations eign corporations, i	it organizations shall osure requirement, as a s organized under or g	ard. II list applie	t all Corporate od to land-use ap ned by Title 7 of	Officers a plications, e the Nevada ted partners	-	disclosion disclosion disclosion disconsisted disconsiste	ng the names of ndowner(s). not limited to priva is.	individuals with	
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## **DISCLOSURE OF RELATIONSHIP**

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

Signature

Print Name Authorized Department Representative

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 Water Reclamation District.	Clark County, Department of	Aviation, Clark County Deter	ntion Center or Clark County		
"Consanguinity" is a relations	ship by blood. "Affinity" is a rel	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 – Registered	d Domestic Partners – Childrei	n – Parents – In-laws (first deg	ree)		
<ul> <li>Brothers/Sisters – H</li> </ul>	alf-Brothers/Half-Sisters – Gra	ndchildren – Grandnarents – I	n-laws (second degree)		
Diothers/olsters - 11	an-brothers/Hair-olsters — Gra		maws (second degree)		
For County Use Only:					
If any Disclosure of Relationship is	noted above, please complete the folio	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:	·				

## DISCLOSURE OF OWNERSHIP/PRINCIPALS

Bueinage Entit	y Table	o /Places sels-4	000										
Sole		e (Please select		) Limited Liability		_			Non-Profit				
Proprietorship	Li	Partnership		mpany	·	Corporation	Trust Organization			Other			
Business Designation Group (Please select all that apply)													
<b>□</b> МВЕ		□WBE		SBE		PBE		_	VET	□DVET □ ESB		ESB	
Minority Busines Enterprise	s			Small Business Enterprise		Physically Challenged Business Enterprise		3	Veteran Owned Business		abled Veteran ned Business	Emerging Small Business	
Number of Clark County Nevada Residents Employed: 34													
Number of Clark County Nev		, val	rada Residents Employed.										
Corporate/Busi	ness	Entity Name:	Patriot Environmental Services, Inc.										
(Include d.b.a.,	if ap	plicable)	N/A	N/A									
Street Address:	:		508	B East E Street,	, Sı	uite A Website: www.pat			ebsite: www.patrioter	riotenvironmental.com			
City, State and	Zip (	Code:	Wi	ilmington, C	ington, CA 30744				POC Name: Vanessa Benitez vbenitez@patriotenvironmental.com				
Telephone No:			562	2-307-7127					<sub>x No:</sub> 562-436-2688	6-2688			
00	Nevada Local Street Address: 647 Cap		47 Cape	H	lorn Dri	ive	Website: www.patriotenvironmental.con			al.com			
City, State and	United and an ADV 00044			1		Lo	cal Fax No:	Fax No:					
Local Telephon	e No	:	7	02-566	<b>i</b> –(	-6636 Local POC			al POC Name: Michael Beckingham mbeckingham@patriotenvironmental.com				
Entities include a close corporations	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.					te corporations,							
	Full Name		Title				% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)						
Kent Bartley					EEO				< 5 %				
Geoff Milbrant					FO					< 5 %			
Josh Teves				P	resident				< 5 %				
This section is n	ot re	quired for public!	y-trad	ded corporations.	Ar	e you a publicly	-traded	corp	oration? Yes	<b>V</b>	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													
sister, grand	dchild	l, grandparent, rela e(s), or appointed/ —	ated t electe	to a Clark County, I ad official(s)?	Dep	eartment of Aviati	ion, Clari	k Cou	tic partner, child, parent, unty Detention Center or on Page 2. If no, please p	Clark (	County Water Recl	alf-brother/half- amation District	
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.													
Vanessa Beni	itez	Digitally signed by Date: 2022.04.1	oy Vane 3 11:19	essa Benitez :00 -07'00'		Vanessa Bei	nitez						
Contracts Man	agei					04/07/2022							
Title						Date 1							

#### **DISCLOSURE OF RELATIONSHIP**

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

Authorized Department Representative

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			
	*	Aviation Clark County Data	

"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:
Vanessa Benitez Digitally signed by Vanessa Benitez  Date: 2022.04.13 11:19:10-07'00'
Signature
Vanessa Benitez
Print Namo

<sup>\*</sup> County employee means Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District.

<sup>&</sup>quot;Consanguinity" is a relationship by blood. "Affinity" is a relationship by marriage.