DISCLOSURE OF OWNERSHIP / PRINCIPALS FORM

Business Entity Type (Please select one)									
Sole Proprietorship	Partnership)	Limited Liability Company	Corporation	Trust	Non-Pro Organiza		Other	
Business Designation Group (Please select all that apply)									
МВЕ	WBE		✓ SBE	РВЕ	VET	DVET		ESB	
Minority Business Enterprise	The first for the contract of		Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Ve Owned Busi		merging Small usiness	
Number of Cl	ark County	Nevad		ИОО 54		1 0111100 0001	11000	don redo	
Number of Clark County Nevada Residents Employed:									
Corporate/Business		Las Ve	gas Parking, Ir	nc.					
(Include d.b.a., if a									
Street Address:		7285 S Dean Martin Dr. #180 Website: www.lvpark					ng.com		
City, State and Zip Code:		Las Ve	gas NV 89118			D F			
Telephone No:		702.697.8656				POC Email: brandan@Ivparking.com			
					2.892.8337				
Nevada Local Stree	t Address:				Website:	Website:			
(If different from above)					Local POC N	Local POC Name:			
City, State and Zip	Code:				Local POC E	Local POC Email:			
Local Telephone No:					Local Fax N	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 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	
John Reilly			N	Managing Partner			(Not required	for Publicly Traded an-profit organizations)	
Mark Malone				Managing Partner			33.33		
Mitchel Leavitt			<u>N</u>	Managing Partner			33.33		
***************************************	*****		_						
1. Are any individ	dual members, ion Center or Cla	partners, ark Count f yes, ple	owners or princip by Water Reclamat case note that Co	tions. Are you a publicated in the busing in District full-time employee(s), or appropriately, or other contracts, which	iness entity, a Clai loyee(s), or appoir ppointed/elected o	rk County, De nted/elected o official(s) may	official(s)? not perform		
half-brother/ha	alf-sister, grando Reclamation Dis	child, gra trict full-t	ndparent, related ime employee(s),	s have a spouse, registe: to a Clark County, Depa or appointed/elected offi Disclosure of Relationship	artment of Aviation icial(s)?	n, Clark Count	y Detention C	Center or Clark	
wiff not take action	alty of perjury, to land-use app	hat all of rovals, co	the information pontract approvals,	rovided herein is current land sales, leases or exci Brandan Reil	hanges without the	ccurate. I also a completed d	understand lisclosure form	that the Board n.	
Signature Print Name Vice President, Business Development 09/22/2022									
Title				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
:			

- 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

^{*}County employee means an employee of Clark County, Clark County Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District.

[&]quot;Consanguinity" is a relationship by blood.

[&]quot;Affinity" is a relationship by marriage.

[&]quot;To the second degree of consanguinity" applies to the candidate's first and second degree of blood relatives as follows: