DISCLOSURE OF OWNERSHIP/PRINCIPALS

		PIOOLOGOIKE	- OI OVVI	LIVOIII	F/FIXINGIFAL			
Business Entity Ty	pe (Please select	one)			10			
Sole Proprietorship	Partnership	Limited Liability Company	Corporation	Trust	Non-Profit Organization	Other		
Business Designa	tion Group (Pleas	e select all that apply)			311			
■ MBE	□WBE	SBE	☐ PBE		□VET	DVET	□ESB	
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Ch Business Ent		Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business	
Number of Cla	ark County No	evada Residents E	Employed:			3		
Corporate/Business Entity Name:		Knorr Systems Int'l LLC						
(Include d.b.a., if a								
Street Address:	, in the second	2221 Standard Avenue Website: www.knor			ebsite: www.knorrsy	systems.com		
City, State and Zip Code:		Santa Ana, CA 92707			POC Name: Becky Fears, beckyf@knorrsystems.com			
Telephone No:		714-754-4044, ext. 148			Fax No: 714-754-7791			
Nevada Local Stre	ot Addrose:				Website:			
				"	ebsite.			
(If different from above)				1.4	Local Fax No:			
City, State and Zip Code:					Local POC Name: Ed Calvillo, edc@knorrsystems.com			
Local Telephone No:		702-600-7122			Email:			
	oreign corporations,	s organized under or gove limited liability companies,		ted partnersh		porations.		
Full Name		Title			% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)			
	Tom Willingham		President			20		
Skye Callentine		CEO				20		
NOTE: No on	e else owns m	ore than 5%						
Are any individe	ual members, partne County Water Recl	ly-traded corporations. A ers, owners or principals, in amation District full-time en yes, please note that Coun ntracts, or other contracts,	volved in the busi nployee(s), or app ty employee(s), o	iness entity, a pointed/electe or appointed/e	a Clark County, Department ad official(s)? elected official(s) may not	ent of Aviation, Clark Cou	•	
sister, grandchi		ers, owners or principals ha lated to a Clark County, De /elected official(s)?						
Yes	✓ No (If	yes, please complete the D	isclosure of Rela	tionship form	on Page 2. If no, please	print N/A on Page 2.)		
		of the information provided and sales, leases or excha				stand that the Board will r	not take action on	
Becky Fears		Becky Fears						
Signature		Print Name						
Sales Project Adr	ninistrator		10/5/22					
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:							
_	noted above, please complete the follo ployee(s) noted above involved in the	_	narticular agenda item?				
	ployee(s) noted above involved in any		•				
Notes/Comments:							
Signature							
Print Name Authorized Department Representat	iive						