### DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)												
□ Cala												
Proprietorship	Partnership	Company Corporation Trust Non-Profit Organization Other				1						
Business Designati	on Group (Please	e sele	ect all that apply	)								
MBE	WBE	□SBE □PBE □VET		VET		DVET	□ESB					
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise Physically Challenged Business Enterprise Physically Challenged Business Physical Phys						Emerging Small Business				
Number of Clark County Nevada Resident				E	mployed:				0			
Corporate/Business	Entity Name:	Blue	e Diamond Cro	rossing II LLC, a Delaware limited liability company								
(Include d.b.a., if ap	plicable)											
Street Address:		837	5 W Flamingo	Rd	. #200		We	bsite: www.julietcor	npani	ies.com		
City, State and Zip	Code:	Las	s Vegas, N				C Name: John Stew	art	panies.com			
Telephone No:		702	-368-5800				Fax	No:				
Nevada Local Stree		S	ame as	s above Website:			bsite:					
(If different from ab												
City, State and Zip	Code:	Local Fox				cal Fax No:						
Local Telephone No	<b>)</b> :			Email:								
Entities include all bu	siness associations	orga	nized under or gov	vern	ed by Title 7 of	the Neva	da R	ends to the applicant and evised Statutes, includi s, and professional corp	ng but	not limited to priva	te corporations,	
	Full Name	Title % Owned (Not required for Publicly Traded Corporations/Non-profit organizations)						olicly Traded				
Fred Ahlstrom			M	ana	ager					ned is greater	,	
Jacob Bingham			M	ana	ager				% Ov	ned is greater	than 5%	
Susan M. Graves			M	Manager				% Owned is greater than 5%				
James E. Betz			M	lanager				% Owned is greater than 5%				
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.)												
<ol> <li>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)?</li> </ol>												
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.												
John Stewart	Digitally signed b				John Stewart	t						
Signature	Date: 2022.10.04	10.47.3	37.00	-	Print Name							
Manager					10/4/22							
Title				7.5	Date							

#### DISCLOSURE OF RELATIONSHIP

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

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		
	EMPLOYEE/OFFICIAL AND JOB TITLE	EMPLOYEE/OFFICIAL COUNTY* AND JOB TITLE EMPLOYEE/OFFICIAL		

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

"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

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

#### DISCLOSURE OF OWNERSHIP/PRINCIPALS

			TTLOUGINE	- 01 0111	LICOII	IF/FRINGIFAL					
Business Entity Ty	pe (Please selec	t one)									
			Limited Liability Corporation			ust Non-Profit Organization Other					
Business Designati	on Group (Pleas	e sele	ct all that apply)								
MBE	□WBE	. SBE		□PBE		VET		DVET	□ESB		
Minority Business Enterprise  Women-Owned Business Enterprise  Enterprise  Small Business Enterprise			Physically Challenged Business Enterprise		Veteran Owned Business		sabled Veteran rned Business	Emerging Small Business			
Number of Clark County Nevada Residents Employed:											
Corporate/Business	Entity Name:	Grocery Outlet Inc.									
(Include d.b.a., if ap	plicable)										
Street Address:		5650	Hollis Street		Tv	Vebsite: GroceryOutle	t.com				
City, State and Zip (	Code:		ryville, CA 94608		POC Name: N/A Email:						
Telephone No:		510-	845-1999		F	ax No: N/A					
Nevada Local Street		3890	Blue Diamond R								
(If different from abo		l ac l	Vegas, NV 89139	1			_				
City, State and Zip		Pend			-	Local Fax No: N/A Local POC Name: N/A					
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											
				Please s	ee attac	hed		ot required for Pub orations/Non-profit			
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.)											
<ol> <li>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)?</li> </ol>											
Yes	No (If )	es, ple	ase complete the Dis	sclosure of Relation	onship 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 2				Print Name	ompson						
SVP, General Counsel, Secretary    10-18-22   Date											
				Date							

## 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	N/A	N/A	N/A						
	i'								
Water Reclamation District.	,		ntion Center or Clark County						
"Consanguinity" is a relations	ship by blood. "Affinity" is a rel	ationship by marriage.							
"To the second degree of c follows:	"To the second degree of consanguinity" applies to the candidate's first and second degree of blood relatives as follows:								
Spouse – Registered	<ul> <li>Spouse – Registered Domestic Partners – Children – Parents – In-laws (first degree)</li> </ul>								
Brothers/Sisters – Ha	Brothers/Sisters – Half-Brothers/Half-Sisters – Grandchildren – Grandparents – In-laws (second degree)								
		- Clanaparonio	iano (occona degree)						
For County Use Only:									
If any Disclosure of Relationship is r	noted above, please complete the follo	owing:							
Yes No Is the County emp	ployee(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:									

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# **GOI Officers & Directors**

Name	Title
Eric J. Lindberg, Jr	Chief Executive Officer, Director
Robert Joseph Sheedy, Jr	President, Director
Charles C. Bracher	Chief Financial Officer, Director
Andrea Renee Bortner	Chief Human Resources Officer
Pamela B. Burke	Chief Stores Officer
Brian T. McAndrews	SVP, Chief Store Dev Ofcr
Steven K. Wilson	Chief Purchasing Officer
Luke D. Thompson	SVP, General Counsel, Secretary
Timothy Robert Scott	SVP, Chief Supply Chain Officer
Harrison Allen Anle "aka" Harrison Lewis	SVP, Chief Information Officer
Lindsay E. Gray	VP, Corporate Controller
Layla M. Kasha	SVP, Chief New Store Growth Officer