DISCLOSURE OF OWNERSHIP/PRINCIPALS Business Entity Type (Please select one) Sole Proprietorship Limited Liability Company Non-Profit Partnership Corporation Trust Other ganization Business Designation Group (Please select all that apply) MBE ☐ WBE SBE □ PBE □ VET DOVET ☐ESB Minority Business Women-Owned Small Business Physically Challenged Veteran Owned Disabled Veteran Enterprise **Emerging Small** Business Enterprise **Business Enterprise** Business Owned Business Business Enterprise Number of Clark County Nevada Residents Employed: 6 Corporate/Business Entity Name: (Include d.b.a., if applicable) Street Address: Website: City, State and Zip Code: 15 Veg 15, WV8910 Telephone No: Nevada Local Street Address: Website: (If different from above) City, State and Zip Code: Local Fax No: Local POC Name: Local Telephone No: Email: 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 % Owned (Not required for Publicly Traded Corporations/Non-profit organizations) none Muse This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? Yes No 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)? D No Yes (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.) 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)? Yes No (If yes, please complete the Disclosure of Relationship form on Page 2. If no, please print N/A on Page 2.) and-use approvals, contract approvals, land sales, leases or exchanges without the complete disclosure form.

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
X/A			
	***************************************	PRESIDENCE GENERAL ACCEPT	
g St. State Marie, Bulgarous, 1. JA State St. Avy 40			
"To the second degree of follows: • Spouse – Registere	ship by blood. "Affinity" is a reconsanguinity" applies to the document of the	candidate's first and second n – Parents – In-laws (first de	
For County Use Only:			
If any Disclosure of Relationship is noted above, please complete the following:			
	nployee(s) noted above involved in the		
Yes No Is the County en	nployee(s) noted above involved in an	y way with the business in performan	ce of the contract?
Notes/Comments:			
Signature			
Print Name Authorized Department Represent	ative		