DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)									
Sole Proprietorship	□Partnership	Limited Liability Company	☑ Corporation	☐ Trus	Non-Profit Organization	☐ Other			
Business Designation Group (Please select all that apply)									
☐ MBE	□ WBE	☐ SBE	☐ PBE		□ VET	□DVET	☐ ESB		
Minority Business Enterprise Women-Owned Business Enterprise		d Small Busines Enterprise	Physically Challenger Business Enterprise		Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business		
Number of Clark County Nevada Residents Employed:									
0			Hangar 7 Inc						
Corporate/Business Entity Name:		Hangar 7 Aviation							
(Include d.b.a., if applicable)		1420 Jet Stream Drive, Ste 110 _{Website:} www.flyhangar7.com							
Street Address: City, State and Zip Code:		Handanson NV 80052			POC Name: Email: charter@flyhangar7.com				
Telephone No:				Fax No:					
Nevada Local Street Address:					Website:				
(If different from	above)								
City, State and Zip Code:			Local Fax N		Local Fax No:	ax No:			
Local Telephone No:					Local POC Name:				
Local Felephone No.		Email:		Email:					
Entities include all business associations organized under or governed by Title 7 of the Nevada Revised Statutes, including but not li mited to private corporations, close corporations, foreign corporations, limited liability companies, partnerships, limited partnerships, and professional corporations. Full Name Title (Not required for Publicly Traded Corporations/Non-profit organizations)							d olicly Traded		
Jesse Mata			CEO			50%			
Jamie Kaminsky			COO			50%			
This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? 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)? 1. 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.)									
 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.) 									
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, leads sales, leases or exchanges without the completed disclosure form.									
Jamie kaminsky			•	Jamie Kaminsky					
Signature D5F1DC6FB3534D1			Print Name						
coo			11/30/2022						
Title			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						
* 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)									
2 Distribution of the		macimaren — Oranaparents —	m-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:	Notes/Comments:								

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