## DISCLOSURE OF OWNERSHIP/PRINCIPALS

		DIOOLOGOINE	. 01 01111						
Business Entity Ty	pe (Please select	one)							
□Sole Proprietorship	Partnership	Limited Liability Company	☐ Corporation	☐ Trus	t Non-Profit Organization		☐ Other		
Business Designat	ion Group (Pleas	e select all that apply)							
☐ MBE	☐ WBE	☐ SBE	☐ PBE		□ VET		OVET	☐ ESB	
Minority Business Enterprise Women-Owned Business Enterprise		Small Business Enterprise	Physically Challenge Business Enterprise		d Veteran Owned Business	Disabled Veteran Owned Business		Emerging Small Business	
Number of Cla	wk County M	evada Residents	Employed:	15					
Number of Cla	irk County N	evada Residents	Employeu.						
Corporate/Business Entity Name:		Lime Lighter LED, LLC							
(Include d.b.a., if applicable)		Twilight Designs							
		2330 Highland Drive #120 Website: twilig			Website: twilightelectri	electric.com			
City, State and Zip Code:		Las Vegas, Nevada 89102			POC Name: David Bilik  Email: david@twilightelectric.com				
Telephone No:		702-907-5444			Fax No: N/A				
		N/A			Website:				
City, State and Zip Code:					Local Fax No:				
and amora and ask asks.					Local POC Name:				
Local Telephone No:					Email:				
Entities include all buclose corporations, for	usiness associations preign corporations, Full Name	s organized under or gove limited liability companies	erned by Title 7 of s, partnerships, lir	the Nevac mited partn Title	da Revised Statutes, includi erships, and professional o	orporat	ions. % Owner	į	
D 11 D07		Owner			(Not required for Publicly Traded Corporations/Non-profit organization 100				
David Bilik		Ow	/ner			100			
		ly-traded corporations.					No No	Detection	
Center or Clark	Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)?								
☐ Yes	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 Re	elationship	form on Page 2. If no, plea	se prin	t N/A on Page 2.)		
l certify under penalt on land-use approva	y of perjury, that all Is, contract approva	of the information provide als, land sales, leases or e	ed herein is curre exchanges withou	nt, complet it the comp	te, and accurate. I also unde eleted disclosure form.	erstand	that the Board wil	I not take action	
David Bilik									
Signature			Print Name						
Owner			1/10/2023						
Title			Date						

## **DISCLOSURE OF RELATIONSHIP**

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

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			
"To the second degree of cor  • Spouse – Registered	ship by blood. "Affinity" is a rensanguinity" applies to the cand Domestic Partners – Childre	didate's first and second degr n – Parents – In-laws (first de	
For County Use Only:			
If any Disclosure of Relationship is	noted above, please complete the fol	lowing:	
☐ Yes ☐ No Is the County em	ployee(s) noted above involved in the	e contracting/selection process for thi	s particular agenda item?
☐ Yes ☐ No Is the County em	ployee(s) noted above involved in an	y way with the business in performar	ice of the contract?
Notes/Comments:			
Signature			