DISCLOSURE OF OWNERSHIP/PRINCIPALS

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Business Entity Ty	oe (Please select on	e)			1						
Sole Proprietorship	Partnership C	Limited Liabilit ompany	ty [Corporation	Trus		Non-Profit ganization		Other		
Business Designation Group (Please select all that apply)											
MBE	□WBE	SBE		□PBE			/ET		DVET	ESB	
Minority Business Enterprise					Physically Challenged Business Enterprise		eran Owned iness		Disabled Veteran Owned Business Emerging Sm Business		
Number of Clark County Nevada Residents Employed: ♥											
Corporate/Business Entity Name:		National Council for Community Development, Inc.									
(Include d.b.a., if applicable)		National Development Council									
Street Address:	11	623 Belicena F	23 Belicena Rd			Website: www.ndconline.org					
City, State and Zip Code:		1111 Superior Ave East, Suite 1114 San Antonio, Tx 78253				POC Name: Daniel Marsh III, President & CEO Email: dmarsh@ndconline.org					
Telephone No:	80	0-501-7489				Fax No:					
Nevada Local Stree	t Address:				i	Website:					
(If different from ab							•				
City, State and Zip				1			ax No:				
Ony, otate and zip	ooue.	509-860-4599				Local POC Name: Melissa LaFayette, Field Director					
Local Telephone No): 50					Email: mlafayette@ndconline.org					
Entities include all business associations organized under or g close corporations, foreign corporations, limited liability compani			goverr inies, p	overned by Title 7 of the Nevada Revies, partnerships, limited partnerships, Title			s, and professional corporations. % Ow		% Owned to required for Pub	d blicly Traded	
Daniel Marsh III			President & CEO								
Adam Ennis			Chie	Chief Financial Officer							
Gertrude Scriven				Human Resources Director							
Raquel Favela			Sr. E	Sr. Executive VP, Training & Technical Advisor			al Advisor	y Services			
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 1. No 1. Are any individual members, partners, owners or principals, involved in the business entity, a Clark County, Department of Aviation, Clark County, Department of Aviation, 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 1. No 1. Are 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)? 1. Yes 1. No 1. (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. Downland Downland											
President & CEO Title				9/26/2022 Date							
				- Julio							

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								
"Consanguinity" is a relations "To the second degree of of follows:	Clark County, Department of ship by blood. "Affinity" is a release consanguinity" applies to the of Domestic Partners – Children	ationship by marriage. candidate's first and second	degree of blood relatives as					
		·	,					
Brothers/Sisters – H	alf-Brothers/Half-Sisters – Grai	ndchildren – Grandparents – I	n-laws (second degree)					
For County Use Only:								
If any Disclosure of Relationship is r	noted above, please complete the follo	wing:						
	ployee(s) noted above involved in the	•	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:								