

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input checked="" type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input checked="" type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
Number of Clark County Nevada Residents Employed: 495						
Corporate/Business Entity Name: Lisa A. Durette MD PLLC						
(Include d.b.a., if applicable) Healthy Minds						
Street Address: 526 Tonopah Dr. Ste. 160			Website: www.healthymindslv.com			
City, State and Zip Code: Las Vegas, NV 89106			POC Name:			
Telephone No: 702-234-2727			Email:			
Nevada Local Street Address:			Website:			
(If different from above)			Local Fax No:			
City, State and Zip Code:			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	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Lisa Durette	Owner	100%

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)?
☐ 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, land sales, leases or exchanges without the completed disclosure form.

Signature

Psychologist

Title

Kenneth McKay

Print Name

12/7/20

Date

Scott Clark

From: Kenneth Mckay <Drkenmckay@healthymindslv.com>
Sent: Tuesday, January 19, 2021 2:59 PM
To: Scott Clark
Subject: Re: Amendment to contract 604858-18

Hello Scott,

Lisa A. Durette employs 49 total Clark county residents.

Thanks!
Ken

From: Scott Clark <Scott.Clark@ClarkCountyNV.gov>
Date: Tuesday, January 19, 2021 at 1:42 PM
To: Kenneth Mckay <Drkenmckay@healthymindslv.com>
Subject: RE: Amendment to contract 604858-18

Ok. Thank you.

From: Kenneth Mckay <Drkenmckay@healthymindslv.com>
Sent: Tuesday, January 19, 2021 1:40 PM
To: Scott Clark <Scott.Clark@ClarkCountyNV.gov>
Subject: Re: Amendment to contract 604858-18

Hello Scott,

I will have your question answered in 30 minutes. I just saw it within the last 15 minutes.

Thanks!
Ken

From: Scott Clark <Scott.Clark@ClarkCountyNV.gov>
Date: Tuesday, January 19, 2021 at 12:56 PM
To: Kenneth Mckay <Drkenmckay@healthymindslv.com>
Subject: RE: Amendment to contract 604858-18

Hi Dr. McKay,

Could you please provide me the information below today. If not received I will miss taking this to the board on February 2 and have to wait till March 2. If you have any questions please feel free to reach out to me.

Scott Clark

Purchasing & Contracts
500 S. Grand Central Parkway, 4th floor
Las Vegas, Nevada 89155

DISCLOSURE OF OWNERSHIP/PRINCIPALS

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Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
Number of Clark County Nevada Residents Employed: 16 x						
Corporate/Business Entity Name: Choices Group, LLC						
(Include d.b.a., if applicable)						
Street Address:		1785 E Sahara Ave. Ste. 160		Website: www.choiceslasvegas.com		
City, State and Zip Code:		Las Vegas, NV 89104		POC Name: Cindy Greer		
				Email: cynthia.greer@pathways.com		
Telephone No:		702-252-8342		Fax No: 540-710-6447		
Nevada Local Street Address:		N/A		Website:		
(If different from above)						
City, State and Zip Code:				Local Fax No:		
Local Telephone No:				Local POC Name:		
				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).

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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Pathways Health and Community Support, LLC		100% Direct

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)?
☐ 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, land sales, leases or exchanges without the completed disclosure form.

DocuSigned by:

Cynthia Greer
Signature

Cindy Greer
Print Name

1/5/2021

CEO/State Director

Title

Date

Scott Clark

From: Nancy Poe <Nancy.Poe@pathways.com>
Sent: Tuesday, January 19, 2021 12:43 PM
To: Scott Clark
Subject: RE: Disclosures Form

Hello,

Please update the Disclosure form for Choices Group LLC- The Number of Clark County Nevada Residents Employed should be 16.

Thank you

Nancy Poe B.A.
Contract Administrator
Pathways of Arizona
1161 N EL Dorado Pl Suite 103
Tucson, AZ 85715
Ph: (520)570-1460
www.pathwaysofaz.com



Important

This email is confidential, intended only for the named recipient(s) and may contain information that is privileged or exempt from disclosure under applicable law. If you are not the intended recipient, you are notified that dissemination, distribution or copying of this message is strictly prohibited. If you receive this message in error, or are not the named recipient, please notify the sender at the email address above and delete this email from your computer. Thank You.

From: Scott Clark [mailto:Scott.Clark@ClarkCountyNV.gov]
Sent: Tuesday, January 19, 2021 1:04 PM
To: Nancy Poe <Nancy.Poe@pathways.com>
Subject: Disclosures Form

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi Nancy,

Just left you a message, if you have a moment today can you call me. I am going through final review on a couple amendments and the person approving the amendment had a couple questions about the disclosure forms.

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
Number of Clark County Nevada Residents Employed: 0						
Corporate/Business Entity Name: Pathways Health and Community Support, LLC						
(Include d.b.a., if applicable)						
Street Address:		10304 Spotsylvania Avenue, Ste. 300		Website: www.pathways.com		
City, State and Zip Code:		Fredericksburg, VA 22408		POC Name: Cindy Greer		
				Email: cynthia.greer@pathways.com		
Telephone No:		540-710-6447		Fax No: 540-710-6447		
Nevada Local Street Address:		N/A		Website:		
(If different from above)						
City, State and Zip Code:				Local Fax No:		
Local Telephone No:				Local POC Name:		
				Email:		

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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Pyramid Health Holdings, LLC		100% Indirect

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.)

2. 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, land sales, leases or exchanges without the completed disclosure form.

DocuSigned by:

Cynthia Greer

Signature ID: 28245D9B5D4DE...

Cindy Greer

Print Name

1/5/2021

Date

CEO/State Director

Title

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
Number of Clark County Nevada Residents Employed: 0						
Corporate/Business Entity Name: Pyramid Health Holdings, LLC						
(Include d.b.a., if applicable)						
Street Address:		10304 Spotsylvania Avenue, Ste. 300		Website: none		
City, State and Zip Code:		Fredericksburg, VA 22408		POC Name: Joyce Montes		
				Email: joyce.montes@pathways.com		
Telephone No:		(540) 710-6085		Fax No: 540-710-6447		
Nevada Local Street Address:		N/A		Website:		
(If different from above)						
City, State and Zip Code:				Local Fax No:		
Local Telephone No:				Local POC Name:		
				Email:		

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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Cyrus Nikou Living Trust		68.25
Naxos Capital LLC		15
BCK Capital, Inc.		9.75
Diyamore Capital, Inc.		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.)

2. 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.)

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DocuSigned by:

Joyce Montes

Signature

Joyce Montes

Print Name

1/7/2021

Date

General Counsel

Title

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input checked="" type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
Number of Clark County Nevada Residents Employed:				0		
Corporate/Business Entity Name: Cyrus Nikou Living Trust						
(Include d.b.a., if applicable)						
Street Address:		3750 Las Vegas Blvd South		Website: none		
City, State and Zip Code:		Las Vegas, NV 89158		POC Name: Joyce Montes		
				Email: joyce.montes@pathways.com		
Telephone No:		(540) 710-6085		Fax No: 540-710-6447		
Nevada Local Street Address:		N/A		Website:		
(If different from above)						
City, State and Zip Code:				Local Fax No:		
Local Telephone No:				Local POC Name:		
				Email:		

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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Cyrus Nikou	Trustee	100

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- 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.)
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☐ Yes ☒ No (If yes, please complete the Disclosure of Relationship form on Page 2. If no, please print N/A on Page 2.)

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Discussed by: Joyce Montes Joyce Montes
 Signature 1/7/2021
 General Counsel
 Title Date

DISCLOSURE OF OWNERSHIP/PRINCIPALS

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Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
Number of Clark County Nevada Residents Employed: 0						
Corporate/Business Entity Name: Naxos Capital LLC						
(Include d.b.a., if applicable)						
Street Address:		4775 Collins Avenue, Apt. 3804		Website: none		
City, State and Zip Code:		Miami Beach, FL 33140		POC Name: Joyce Montes		
				Email: joyce.montes@pathways.com		
Telephone No:		(540) 710-6085		Fax No: 540-710-6447		
Nevada Local Street Address:		N/A		Website:		
(If different from above)						
City, State and Zip Code:				Local Fax No:		
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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Robert Lezec	Sole member	100

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.)

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☐ Yes ☒ No

(If yes, please complete the Disclosure of Relationship form on Page 2. If no, please print N/A on Page 2.)

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DocuSigned by:


Signature: 4BE55453...

Joyce Montes

Print Name

1/7/2021

General Counsel

Title

Date

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Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
Number of Clark County Nevada Residents Employed:				0		
Corporate/Business Entity Name:		BCK Capital, Inc.				
(Include d.b.a., if applicable)						
Street Address:		2285 Sherwood Rd		Website: none		
City, State and Zip Code:		San Marino, CA 91108		POC Name: Joyce Montes		
				Email: joyce.montes@pathways.com		
Telephone No:				Fax No:		
Nevada Local Street Address:		N/A		Website:		
(If different from above)						
City, State and Zip Code:				Local Fax No:		
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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Stanley Huang	Shareholder	100

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)?
☐ 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.)
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☐ Yes ☒ No (If yes, please complete the Disclosure of Relationship form on Page 2. If no, please print N/A on Page 2.)

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Discussed by:

Joyce Montes
Signature

Joyce Montes

Print Name

1/7/2021

General Counsel

Title

Date

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Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
Number of Clark County Nevada Residents Employed: 0						
Corporate/Business Entity Name: Diyamore Capital, Inc.						
(Include d.b.a., if applicable)						
Street Address:		5255 Cangas Drive		Website: none		
City, State and Zip Code:		Calabasas, CA 91301		POC Name: Joyce Montes		
Telephone No:				Email: joyce.montes@pathways.com		
Local Street Address:		N/A		Website:		
(If different from above)				Local Fax No:		
City, State and Zip Code:				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	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Vijay Mony	Shareholder	100

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.)

2. 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, land sales, leases or exchanges without the completed disclosure form.

DocuSigned by:

Joyce Montes

Signature 4BE55453...

Joyce Montes

Print Name

1/7/2021

General Counsel

Title

Date

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
Number of Clark County Nevada Residents Employed: 50 ⁵⁰						
Corporate/Business Entity Name: CR Living LLC						
(Include d.b.a., if applicable) Sierra Sage Recovery Services						
Street Address: 3321 W. Buffalo Dr. #200				Website:		
City, State and Zip Code: Las Vegas, NV 89129				POC Name:		
Telephone No: 702-868-5800				Email:		
Nevada Local Street Address: Same				Fax No:		
(If different from above)				Website:		
City, State and Zip Code:				Local Fax No:		
Local Telephone No:				Local POC Name:		
				Email:		

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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Central Recovery, LLC	Owner	100%

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.)

2. 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, land sales, leases or exchanges without the completed disclosure form.

<u>Sandra Michael</u> Signature	<u>Sandra Michael</u> Print Name
<u>Clinical Finance Director</u> Title	<u>01/07/2021</u> Date

Scott Clark

From: Sandra Michael <smichael@centralrecovery.com>
Sent: Tuesday, January 19, 2021 1:46 PM
To: Scott Clark
Subject: Re: Disclosure, signed amendment needed, email of approval

We have 50 Sierra Sage employees within Clark County. Let me know if you need anything else.

Thanks,
Sandra

On Tue, Jan 19, 2021 at 1:32 PM Scott Clark <Scott.Clark@clarkcountynv.gov> wrote:

OK. Thank you!

From: Sandra Michael <smichael@centralrecovery.com>
Sent: Tuesday, January 19, 2021 1:31 PM
To: Scott Clark <Scott.Clark@ClarkCountyNV.gov>
Subject: Re: Disclosure, signed amendment needed, email of approval

I reached out to our HR department. I will get you that number as soon as I have it.

Thanks,

Sandra

On Tue, Jan 19, 2021 at 1:16 PM Scott Clark <Scott.Clark@clarkcountynv.gov> wrote:

Yes please

From: Sandra Michael <smichael@centralrecovery.com>
Sent: Tuesday, January 19, 2021 1:14 PM
To: Scott Clark <Scott.Clark@ClarkCountyNV.gov>
Subject: Re: Disclosure, signed amendment needed, email of approval

Hi Scott,

DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Other
Business Designation Group (Please select all that apply)						
<input type="checkbox"/> MBE	<input type="checkbox"/> WBE	<input type="checkbox"/> SBE	<input type="checkbox"/> PBE	<input type="checkbox"/> VET	<input type="checkbox"/> DVET	<input type="checkbox"/> ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Challenged Business Enterprise	Veteran Owned Business	Disabled Veteran Owned Business	Emerging Small Business
Number of Clark County Nevada Residents Employed: 8 ⁵⁰						
Corporate/Business Entity Name: Central Recovery, LLC						
(Include d.b.a., if applicable)						
Street Address: 3321 N. Buffalo Dr. #200						
City, State and Zip Code: Las Vegas, NV 89129				Website:		
Telephone No: 702-868-5800				POC Name:		
Nevada Local Street Address: Same				Email:		
(If different from above)				Fax No:		
City, State and Zip Code:				Website:		
Local Telephone No:				Local Fax No:		
				Local POC Name:		
				Email:		

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Full Name	Title	% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)
Stuart Smith	Owner	100%

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.)

2. 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.)

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Sandra Michael
Signature
Clinical Finance Director
Title

Sandra Michael
Print Name
01/11/2021
Date

Scott Clark

From: Sandra Michael <smichael@centralrecovery.com>
Sent: Tuesday, January 19, 2021 1:14 PM
To: Scott Clark
Subject: Re: Disclosure, signed amendment needed, email of approval

Hi Scott,

Those 8 are with Central Recovery. Do you need the total for Sierra Sage also?

Thanks,
Sandra

On Tue, Jan 19, 2021 at 11:48 AM Scott Clark <Scott.Clark@clarkcountynv.gov> wrote:

Hi Sandra,

The 8 Clark County residents are they with Central Recovery or Sierra Sage? If they are with Central Recovery, how many Clark County residents to you have employed by CR Living dba Sierra Sage.

Thank you,

Scott Clark

Purchasing & Contracts

500 S. Grand Central Parkway, 4th floor

Las Vegas, Nevada 89155

Phone: (702) 455-5807

Scott.clark@ClarkCountyNV.gov

www.ClarkCountyNV.gov