DISCLOSURE OF OWNERSHIP/PRINCIPALS

		וט	SCLOOOK		0. 0					
usiness Entity Ty			imited Liability	_	Corporation	Trust	Non-Profit Organization		Other	
roprietorship	Partnership	Con	npany	_	Corporation	_	Organization			
usiness Designat	ion Group (Pleas	e sele)	П-005		□VET	1	DVET	□ESB
MBE WBE Minority Business Women-Owned Business		i	SBE Small Business Enterprise		Physically Challenged Business Enterprise		Veteran Owne Business		Disabled Veteran Owned Business	Emerging Smal Business
Number of Cla	Enterprise	leva	da Residents	s E	mployed:					
		Tra	TransWest Express LLC							
Corporate/Business Entity Name:										
(Include d.b.a., if a	applicable)	55	555 17th Street, Suite 2400				Website: http://www.transwestexpress.net			
Street Address: City, State and Zip Code:			Denver, CO 80202				POC Name: Lisa Christian lisa.christian@tac-denver.coml Email:			
		30	32991392				Fax No:			
Telephone No:	200	30					Website:			
Nevada Local Str										
(If different from		-					Local Fax No:			
City, State and Z	ip Code:	+					Local POC Name:			
Local Telephone	No:					Email:				
Close corporations	Full Name					Title	erships, and profess		% O	Publicly Traded
									Corporations/Non-p	profit organizations)
Wyoming Renewable Resource			_C	_					100%	
					Are you a put	dicly-trade	d corporation?	☐ Yes	√ No	
	not required for pu ividual members, p lark County Water	artners	s, owners or princip	als,	involved in the	business er appointed	ntity, a Clark County relected official(s)?	, Departme	ent of Aviation, Clark	County Detention
Yes	✓ No	(If ye	es, please note tha	t Co	ounty employee(ts, which are not	s), or appoi subject to	nted/elected official(competitive bid.)			n professional service
 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.) 										
Yes	✓ No									will not take action o
I certify under per land use approve	enalty of perjury, that als, contract approv	at all of	r the information pr nd sales, leases of	r exc	onangee mane		0.			
Signature C	Proside	nn L	<u>`</u>	-	Print Nar	ne F 2	6, 2021	1		
Vice	Progide	w		-17	Date	cr. L	le, dol			
1100			<u> </u>			1				REVISED 7/2

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		
Wyoming Renewable Resources LLC	N/A	N/A	N/A		
		E A			
	-, \(\bar{\bar{\bar{\bar{\bar{\bar{\bar{	4,			

Water Reclamation District.

- Spouse Registered Domestic Partners Children Parents In-laws (first degree)
- Brothers/Sisters Half-Brothers/Half-Sisters Grandchildren Grandparents In-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/se	election process for this particular agenda item?
Yes No Is the County employee(s) noted above involved in any way with the t	business in performance of the contract?
Notes/Comments:	
Lisa Christian Digitally signed by Lisa Christian Date: 2021.10.26 14:15:08 -06'00'	
Signature	
Lisa Christian	

[&]quot;Consanguinity" is a relationship by blood. "Affinity" is a relationship by marriage.

[&]quot;To the second degree of consanguinity" applies to the candidate's first and second degree of blood relatives as follows: