

February 8, 2024

Salt Lake County Council Salt Lake County Department of Human Services 2001 S State Street, Suite N3-200 Salt Lake City, UT 84190-1000

Dear Salt Lake County Council:

The following Division of Youth Services employees have signed Disclosure of Private Business Interests statements:

Merit & Time Limited employees:

- Alexia Francis, Canyons School District
- Anahit Nazaryan, Decker Lake Youth Center
- Anne Brantley, United States Department of Interior
- Ben Ukoh-Eke, State of Utah JJYS
- Bianca Gonzalez, Disability Law Center
- Brendon Porter, Decker Lake Youth Center
- Brielle Reichert, This Is The Place Heritage Park
- Carolyn Hansen, Optavia
- Carolyn Hansen, Raise the Future
- Carolyn Hansen, Shelter Kids, Inc.
- Carolyn Hansen, Utah Board of Juvenile Justice
- Carolyn Hansen, Valley Behavioral Health
- Charles Eubanks, Christ United Methodist Church
- Christine Antoccia, AFSCME
- Christopher Bereshnyi, Humane Society of Utah
- Christopher Bereshnyi, Ruff Haven
- Corylyn Ybarra, Highland Springs Specialty Clinic
- Danielle Latta, Magna United Communities the Care Coalition
- Danielle Latta, My Kearns Community Coalition
- Darla Scott, Granite School District
- Dayttn Bartschi, Rocky Mountain (Hospice) Care
- Dayttn Bartschi, University of Utah Office of Undergraduate Research
- Dennis Sellis, Integrated Psychotherapy Services
- Desiree Steadman-Gallegos, MEHR Therapeutic Counseling Services
- Diana Johnson, Magna United Coalition
- Diana Johnson, Midvale Coalition
- Eli Curry, Salt Lake Climbers Alliance

- German Ochoa, Utah State University Extension
- German Ochoa, Weber Human Services
- James Hamell, Magna United Communities that Care
- James Hamell, Pivotal Content, LLC
- James Weir, Valley Behavioral Health
- JD Green, Insight Counseling Services (ICS)
- Julianna Potter, Healthy West Valley City
- Julianna Potter, Magna United
- Julianna Potter, My Kearns Coalition
- Julianna Potter, Royal Family Kids Club
- Julianna Potter, Utah Nonprofit Association
- Kameron Leoncini, Make A Wish Utah
- Karen Dohle, Northrop Grumman
- Kelly Paluso, University of Utah Hospitals
- Kevin Rushforth, Youth Action Board
- Kira Coelho, Door Dash
- · Kira Coelho, Kiki Shiree Nails
- Kira Coelho, Kingdom Hall of Jehovah's Witnesses
- Kira Coelho, Salt Lake Afterschool Regional Network (SLARN)
- Kone Tevaga, Huntsman Mental Health Institute
- Kristen Faerber, West Kearns Elementary School
- Margaret DeSpain, Magna United CTC
- Maria Viviana Dominguez, Centro Dihemec
- Maria Viviana Dominguez, Mi Preferida Radio Station 104.7 FM
- Marita Vi, AFSCME
- Mary Smith, Central 9th Youth Coalition
- Mary Smith, Magna United Youth Prevention Coalition
- Mary Smith, The Point Church
- Mary Smith, Utah Black Student Union Alliance
- Minamaria Koplin, DCFS Welfare Improvement Council
- Penlope Corpus-Garcia, The Essential Dentist
- Sharami Martinez, The Phoenix Recovery Center
- Taulia Van der beek, Delta Airlines
- Timothy (Andrew) Andrew Aragon, Salt Lake City School District
- Uinise Tu'avao, Volunteers of America Utah

Temporary employees:

- Alexus Averett, Maverick Center
- Amber Elliott, Fox Hills Elementary
- Amy Staley, Granite School District
- Bailynn McKay, Magna United CTC
- Bailynn McKay, USU Extension Salt Lake County
- Brandi Brothers, Granite School District

- Brandon Kerby, Granite School District
- Brian Uribe-Bate, Granite School District
- Candace Collins, Copper Hills Elementary
- Cassie Fish, Granite School District / Public School
- Christopher Brothers, Granite School District
- Clair Reichert, This Is The Place Heritage Park
- Deborah DuPaix, Granite School District
- Elisapeta So'oalo, Granite School District
- Elysia Nikki Adams, Utah State University
- Emmalee Neibaur, Granite School District
- Emmalee Neibaur, The Church of Latter Day Saints
- Heidi Sartori, Granite School District
- Jaimie Haydock, Copper Hills Elementary
- Jaimie Haydock, WGU
- Jennianne Matuatia Vaai, Pleasant Green Elementary
- Jillian Newman, University of Utah
- Jodi Deer, Matheson Jr High
- Julie Reichert, Granite School District
- Julie Robertson, Granite School District
- Karen Hunt, Copper Hills Elementary
- Kelly Price, Bikers Against Child Abuse
- Kelly Price, Pleasant Green Elementary
- Kennedy Sartori, Granite School District
- Kristina Martinez, Freelance Film
- Kylee Gordon, Granite School District
- Kyndra Burnett, Murray City School District
- Makenzie Rowe, Let Me Shine Christian Playschool
- Melissa Howard, Copper Hills Elementary
- Miranda LaVallee, Magna Coalition
- Samantha Bollard, Granite School District
- Siu Ha Lee, Copper Hills Elementary
- Tiffany Adams, Pleasant Green Elementary
- Veronica Morales Mora, Granite School District
- Vicki Lewellyn, Granite School District
- Wendy Timothy, Copper Hills Elementary
- Yixiao Burke, University of Utah Internal Medicine Office of Education

| Sincerely, | |
|---|-------------------------|
| Carolyn Hansan ACSW | |
| Carolyn Hansen, SCSW Director, Division of Youth Services | |
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| Department Director | Mayor's Office Designee |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Alexia Francis | Youth Services | 385-468-4500 |
|------|--|---|--|
| 2 1. | Covered Person | Position, or County Division for which you are employed or volun | teering County/Volunteer's Phone |
| | 177 W Price Ave | South Salt Lake, UT 84115 | |
| | Covered Person's County | Address/Volunteer's Address | |
| В. | | Carryons School 1 | Strict |
| | | , private business or person in which the Covered Person has a pers | onal or business interest for which disclosure |
| | is required in the above se | Substitute teach | ler |
| | Covered person's status, i | relationship or commitment to the institution, entity, business or per | son named above |
| | | 9631 S 300E Sandy u | 11 84010 |
| | Address and phone numb | er of the institution, entity, business or person named above | |
| C. | Select the category that | applies to yourself and the outside institution, entity, business or per | rson identified in subsection (B) above: |
| | I receive or have ag | reed to receive compensation for assisting a person or business entity | y in a transaction involving Salt Lake County. |
| | I am an officer, dire | ector, agent, employee or the owner of a substantial interest in a bus | iness entity that is subject to the regulation of Salt |
| | | ector, agent, employee or owner of a substantial interest in a business | entity that does or anticipates doing business with |
| | | nt or other financial interest that creates a potential or actual conflict | |
| | None of the above of | terest that creates a potential or actual conflict with my public dutie categories apply. | s. |
| D. | | | the nature of the relationship of each business |
| υ. | D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>) | | |
| | No conflicts | | |
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| Ιc | leclare under criminal pena | alty under the law of Utah that the foregoing is true and correct. | |
| | 1953 | January , 2024 , | |
| 51 | Date Date | Month 'Year', | |
| | SLC, Utah | | |
| at | City or other location, and | d state or county | |
| Al | exia Francis | | |
| Pr | inted Name | | |
| ΔΙαν | is Francis (Jan 21, 2024 17-53 MST) | | |
| C: | cmoture | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

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| Anahit Nazaryan | Youth Services | 385-468-4500 |
|---|--|--|
| | ounty Division for which you are employed or volunteering | County/Volunteer's Phone |
| 177 W Price Ave South Sal | t Lake, UT 84115 | |
| Covered Person's County Address/Volume | nteer's Address | |
| b search | DeckerL | alle Vouth Center |
| | ess or person in which the Covered Person has a personal or but | siness interest for which disclosure |
| Lead Youth Development S | Specialist | |
| Covered person's status, relationship or | commitment to the institution, entity, business or person name | d above |
| (801) 954-9200 | | |
| Address and phone number of the institu | tion, entity, business or person named above | |
| . Select the category that applies to your | self and the outside institution, entity, business or person identi | ified in subsection (B) above: |
| | compensation for assisting a person or business entity in a trans | - TO 9 May |
| I am an officer, director, agent, em | ployee or the owner of a substantial interest in a business entity | y that is subject to the regulation of S |
| Lake County. | | |
| Salt Lake County. | ployee or owner of a substantial interest in a business entity tha | it does or anticipates doing business w |
| I hold an investment or other finan | ncial interest that creates a potential or actual conflict with my p | public duties. |
| | tes a potential or actual conflict with my public duties. | |
| None of the above categories apply | y. | |
| | or potential conflicts of interest identified above, i.e., the natur more sheets if necessary. (<i>This disclosure statement will not be</i> | |
| My job with the state requires me to | interact with juveniles who have been sentenced to ser | ve time. I work with the same |
| population and age group as I do h | ere with the county. | |
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| | | |
| declare under criminal penalty under the la | aw of Utah that the foregoing is true and correct. | |
| 28 January | 2024 | |
| igned on the Date day of Month | Year ' | |
| Salt Lake City, Utah | | |
| City or other location, and state or coun | ntv | |
| | -9 | |
| nahit Nazaryan | | |
| rinted Name Anahit Nazaruan | | |
| Anant Nazaryan hahit Nazaryan (Jan 28, 2024 07:25 MST) | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| Anne Brantley | Υ | outh Services | 385-468-4500 |
|--|---------------------------------------|--|---|
| | Position, or County Division for | which you are employed or volunteering | County/Volunteer's Phone |
| 177 W Price Ave | South Salt Lake, UT 8 | 4115 | |
| Covered Person's County | Address/Volunteer's Address | | <u>-,</u> |
| . United States Dep | partment of Interior | | |
| | private business or person in whetion | ich the Covered Person has a personal or bus | iness interest for which disclosure |
| Employee - Progra | am Manager for Interp | retation, Education, and Volun | teerism |
| Covered person's status, re | elationship or commitment to the | institution, entity, business or person named | above |
| 1849 C Street NW | /, Washington, DC 202 | 240 Phone: 202-208-3100. Loc | cal:801-756-5239 |
| Address and phone number | r of the institution, entity, busine | ss or person named above | |
| C. Select the category that a | onlies to yourself and the outside | institution, entity, business or person identif | ied in subsection (R) above: |
| | | ssisting a person or business entity in a transa | |
| | - | er of a substantial interest in a business entity | • |
| Lake County. | | - | |
| I am an officer, direc Salt Lake County. | tor, agent, employee or owner of | a substantial interest in a business entity that | does or anticipates doing business with |
| | or other financial interest that cr | eates a potential or actual conflict with my po | ublic duties. |
| J | - | tual conflict with my public duties. | |
| None of the above ca | ntegories apply. | | |
| | | cts of interest identified above, i.e., the nature ssary. (This disclosure statement will not be | |
| | Salt Lake County and the Na | ational Park service which is a Bureau of | the Department of Interior. |
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| I declare under criminal penal | ty under the law of Utah that the | foregoing is true and correct. | |
| 20 | lenuemu 2024 | | |
| Signed on the Date day o | Month , Year | | |
| Salt Lake City, Utah | | | |
| City or other location, and | state or county | | |
| Annie Brantley | | | |
| Printed Name | | | |
| anne Brantley | | | |
| Signature | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Ben Ukoh-Eke | Youth | Services | 385-468-4500 |
|------|--|--|---|--|
| | Covered Person | Position, or County Division for which | you are employed or volunteering | County/Volunteer's Phone |
| | 177 W Price Ave | South Salt Lake, UT 84118 | 5 | |
| | Covered Person's County | Address/Volunteer's Address | | |
| В. | State of Utah, JJ | YS | | |
| | is required in the above s | y, private business or person in which the ection | Covered Person has a personal or bus | ness interest for which disclosure |
| | Employee | | | |
| | Table 10 Control Contr | relationship or commitment to the institu | | |
| | 3450 South 900 | West #5, Salt Lake Valley \ | outh Center, South Lake, | Utah 84119; 801-269-{ |
| | Address and phone numb | per of the institution, entity, business or p | person named above | |
| C. | Select the category that | applies to yourself and the outside instit | ution, entity, business or person identif | ied in subsection (B) above: |
| | I receive or have ag | reed to receive compensation for assistir | g a person or business entity in a transa | ction involving Salt Lake County. |
| | | ector, agent, employee or the owner of a | substantial interest in a business entity | that is subject to the regulation of Salt |
| | Lake County. I am an officer, dire Salt Lake County. | ector, agent, employee or owner of a sub- | stantial interest in a business entity that | does or anticipates doing business with |
| | I hold an investmen | nt or other financial interest that creates | | ablic duties. |
| | | terest that creates a potential or actual co | onflict with my public duties. | |
| | X None of the above | categories apply. | | |
| D. | Give a detailed description entity or person with the is completed.) | on of the actual or potential conflicts of a county. Use more sheets if necessary. | nterest identified above, i.e., the nature (This disclosure statement will not be | of the relationship of each business accepted as valid unless this section |
| | There is no potential | for conflict. | | |
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| Ιd | leclare under criminal pen | alty under the law of Utah that the forego | oing is true and correct. | |
| c: | gned on the 27 day | January , 2024 | | |
| SI | Date Date | Month 'Year' | | |
| | South lake, Utah | | | |
| at . | City or other location, an | d state or county | | |
| Ве | en Ukoh-Eke | | | |
| Pri | inted Name | | | |
| 2 | Sen Ukoh-Eke | _ | | |
| Sig | gnature | - | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

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Signature

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| Δ | Brendon Porter | | Youth Services | 385-468-4500 |
|-----|--|---|--|---|
| | Covered Person 177 W Price Ave | Position, or County Division for South Salt Lake, UT | or which you are employed or volunteering 84115 | County/Volunteer's Phone |
| | Covered Person's County | Address/Volunteer's Address | | |
| В. | Outside institution, entity, is required in the above se | | which the Covered Person has a personal or bu | e Jouth Center siness interest for which disclosure |
| | | Ya | uth Worker | |
| | Covered person's status, r | | he institution, entity, business or person name | d above |
| | | 2798 W | Denali Dr. Taylo | weville. UT |
| | Address and phone number | er of the institution, entity, busi | | |
| C. | - | 200 E | de institution, entity, business or person identi | |
| | | | rner of a substantial interest in a business entity | |
| | Lake County. | | of a substantial interest in a business entity tha | |
| | I hold an investmen I hold a personal int | terest that creates a potential or | creates a potential or actual conflict with my pactual conflict with my public duties. | public duties. |
| 泥 | None of the above o | categories apply. | | |
| D. | D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>) | | | |
| | Youth worker at Deck | er Lake Youth Center | | |
| | 106 W/S | tate require | s to interact while to serve time. T | this is the |
| | have bee | an sentence | a to serve time. | 13 1000 |
| | Same | population i | and age group | as the |
| | youth | at the cou | and age group nty. | |
| 14 | colors under oriminal nano | Ity under the law of I Italy that the | ne foregoing is true and correct. | |
| | | (5) | ie foregoing is true and correct. | |
| Sig | gned on the Date day | of $\frac{\text{January}}{\text{Month}}$, $\frac{2024}{\text{Year}}$, | | |
| at_ | Salt Lake City Utah | | <u>-</u> | |
| | City or other location, and | d state or county | | |
| Br | endon Porter | | | |
| | nted Name | | _ | |
| | Brendon Porter Idon Porter (Jan 27, 2024 22:00 MST) | _ | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| Brielle Reichert | | Sale Lake County Youth Service | (385) 468-4500 |
|---|---------------------------------------|---|---------------------------------------|
| Covered Person | Position, or County Division for | or which you are employed or volunteering | County/Volunteer's Phone |
| 177 W Price Ave | , Salt Lake City, UT 8 | 4115 | |
| Covered Person's County | Address/Volunteer's Address | | |
| This Is The Place | e Heritage Park | | |
| Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section | | | |
| Employee | | | |
| Covered person's status, 1 | relationship or commitment to t | he institution, entity, business or person named abo | ove |
| 2601 Sunnyside | Ave S, Salt Lake City | , UT 84108 (801) 582-1847 | |
| Address and phone numb | er of the institution, entity, busi | ness or person named above | |
| Select the category that | annlies to vourself and the outsi | de institution, entity, business or person identified | in subsection (D) shows |
| | | r assisting a person or business of person identified | |
| | : : : : : : : : : : : : : : : : : : : | (20) 3 | |
| Lake County. | ector, agent, employee or the ow | vner of a substantial interest in a business entity that | it is subject to the regulation of Sa |
| I am an officer, dire Salt Lake County. | 50 (CE) 50 F 50 0 | of a substantial interest in a business entity that do | |
| | | creates a potential or actual conflict with my publicactual conflict with my public duties. | ic duties. |
| None of the above of | - | actual conflict with my public duties. | |
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| | | flicts of interest identified above, i.e., the nature of eccessary. (This disclosure statement will not be acc | |
| Work weekends as a | historical printer. | | |
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| declare under criminal pena | alty under the law of Utah that th | ne foregoing is true and correct. | |
| <u> </u> | of February , 20 | | |
| Signed on the Date day | Month , Year | | |
| Salt Lake City, Utah | | | |
| City or other location, an | d state or county | | |
| Brielle Reichert | | | |
| Printed Name | | | |
| ielle Reichert (Feb 2, 2024 16:20 MST) | | | |
| Signature | | _ | |



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| A. | Carolyn Hansen | | Youth Services | 385-468-4500 |
|--|---|------------------------------------|--|---|
| 11. | Covered Person | Position, or County Division | for which you are employed or volunteering | County/Volunteer's Phone |
| | 177 W Price Ave | South Salt Lake, U | Г 84115 | |
| | Covered Person's County | Address/Volunteer's Addres | S | |
| В. | Optavia | | | |
| Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for w is required in the above section | | | | iness interest for which disclosure |
| | Health Coach | | | |
| | Covered person's status, | relationship or commitment to | the institution, entity, business or person named | above |
| | 100 International | Drive Baltimore, MD | 21202 | |
| | Address and phone numb | per of the institution, entity, bu | siness or person named above | |
| C. | Select the category that | applies to yourself and the ou | tside institution, entity, business or person identif | fied in subsection (B) above: |
| О. | - | | for assisting a person or business entity in a transa | |
| | | | owner of a substantial interest in a business entity | |
| | Lake County. | setor, agent, employee of the c | owner of a substantial interest in a business entry | that is subject to the regulation of Salt |
| | | ector, agent, employee or own | er of a substantial interest in a business entity that | does or anticipates doing business with |
| | Salt Lake County. I hold an investment | nt or other financial interest th | at creates a potential or actual conflict with my p | ublic duties. |
| U | | | or actual conflict with my public duties. | |
| SI | None of the above | categories apply. | | |
| D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of eac entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless to is completed.</i>) | | | | |
| | I provide health coac | hing to persons looking to l | ose weight or create a healthier lifestyle. | 1 |
| | does | not provide | services to County & | ruployees |
| | 64 | the like. | C 1\(\) | |
| | 1.4.3 | () () | Cit | |
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| I | leclare under criminal nens | alty under the law of Utah that | the foregoing is true and correct. | |
| | 001 | 0004 | the foregoing is the and correct. | |
| Si | gned on the Date day | Month , Year | | |
| at | Salt Lake City, UT | | | |
| | City or other location, an | d state or county | | |
| С | arolyn Hansen | | | |
| Pr | inted Name | | | |
| Ca | erolyn Hansen | | | |
| Si | gnature | | | |



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| A. | Carolyn Hansen | | Youth Services | 385-468 - 4500 |
|------|--|------------------------|---|--|
| • •• | Covered Person | Position, or Cou | nty Division for which you are employed or volunteer | ing County/Volunteer's Phone |
| | 177 W Price Ave | South Salt I | _ake, UT 84115 | |
| | Covered Person's Count | y Address/Volunte | er's Address | |
| В. | Raise The Future | e | | |
| | Outside institution, entity is required in the above s | | or person in which the Covered Person has a personal | or business interest for which disclosure |
| | Board Member | | | |
| | Covered person's status, | relationship or co | nmitment to the institution, entity, business or person | named above |
| | 7414 S State St | Midvale, UT | 84047 | |
| | Address and phone number | per of the institution | n, entity, business or person named above | · · · |
| C. | Select the category that | applies to yoursel | f and the outside institution, entity, business or person | identified in subsection (B) above: |
| | | | npensation for assisting a person or business entity in | • • |
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| | | ector, agent, emplo | yee or owner of a substantial interest in a business ent | ity that does or anticipates doing business with |
| | I hold an investme | | I interest that creates a potential or actual conflict wit a potential or actual conflict with my public duties. | h my public duties. |
| | None of the above | | a potential of actual control with my puone datios. | |
| D. | | | potential conflicts of interest identified above, i.e., the re sheets if necessary. (This disclosure statement will | |
| | | | nformation on Raise the Future updates, fundrais | sing activities, and services for |
| | | | | |
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| ТA | eclare under criminal pen | alty under the law | of Utah that the foregoing is true and correct. | |
| | | | 2024 | |
| Si | gned on the Date day | y of January Month | Year, | |
| | Salt Lake City, UT | 1101111 | | |
| at. | City or other location, ar | nd state or county | | |
| Ca | arolyn Hansen | · | | |
| | nted Name | | | |
| Ca | rolyn Hansen | | | |
| | gnature | | | |
| • | | | | |



Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Carolyn Hansen Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Shelter Kids, Inc. Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section **Board Member** Covered person's status, relationship or commitment to the institution, entity, business or person named above 177 W Price Ave SLC, UT 84115 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. X None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) Shelter Kids is Youth Services' non-profit partner that provides fundraising and support for youth served at our agency. I attend board meetings throughout the year to address needs of youth in shelter, After School and Milestone programs. Update members on current services or organizational changes. Meet yearly to make provide program requests. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the 23rd _ day of <mark>January</mark> Month Salt Lake City, UT City or other location, and state or county Carolyn Hansen Printed Name Carolyn Hansen



(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| А | Carolyn Hansen | Υ | outh Services | 385-468-4500 | | |
|---|--|---|--|---|--|--|
| | Covered Person | Position, or County Division for | which you are employed or volunteering | County/Volunteer's Phone | | |
| | 177 W Price Ave | South Salt Lake, UT 8 | 4115 | | | |
| Covered Person's County Address/Volunteer's Address | | | | | | |
| В. | Utah Board of Ju | venile Justice | | | | |
| _, | Outside institution, entity, is required in the above se | | rich the Covered Person has a personal or bus | siness interest for which disclosure | | |
| | Committee memb | per | | | | |
| | Covered person's status, r | elationship or commitment to the | e institution, entity, business or person named | l above | | |
| | Senate Office Bu | ilding, Suite E330 PO | Box 14230 SLC, UT 84114 | | | |
| | Address and phone number | er of the institution, entity, busine | ess or person named above | | | |
| C. | Select the category that a | applies to yourself and the outsid- | e institution, entity, business or person identi | fied in subsection (B) above: | | |
| | | | assisting a person or business entity in a trans | | | |
| | I am an officer, dire | ctor, agent, employee or the own | er of a substantial interest in a business entity | that is subject to the regulation of Salt | | |
| | I am an officer, direct Salt Lake County. | | f a substantial interest in a business entity that | | | |
| | | | reates a potential or actual conflict with my p ctual conflict with my public duties. | rublic duties. | | |
| | None of the above of | categories apply. | | | | |
| D. | | | icts of interest identified above, i.e., the naturessary. (This disclosure statement will not be | | | |
| | | ppointed by the governor as a outh in the juvenile justice sys | government partner. Discuss juvenile ju tems. | stice matters, policies, | | |
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| Ιc | leclare under criminal pena | lty under the law of Utah that the | foregoing is true and correct. | | | |
| | _ | - | | | | |
| Sı | gned on the Date day | of January , 2024 , Year , | | | | |
| at | Salt Lake City | | | | | |
| ш | City or other location, and | d state or county | | | | |
| C | arolyn Hansen | | | | | |
| | inted Name | | | | | |
| Ca | nolyn Hansen | | | | | |
| | gnature | | | | | |



(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A. | Carolyn Hansen | Youth Service | es | 385-468-4500 |
|-----|---|---|---|--|
| | Covered Person | osition, or County Division for which you are en | nployed or volunteering | County/Volunteer's Phone |
| | 177 W Price Ave S | South Salt Lake, UT 84115 | | |
| | Covered Person's County | ddress/Volunteer's Address | , | |
| В. | Valley Behavioral | -lealth | | |
| | Outside institution, entity, j is required in the above sec | rivate business or person in which the Covered ion | Person has a personal or busi | ness interest for which disclosure |
| | Stakeholder Board | Member | | |
| | Covered person's status, re | ationship or commitment to the institution, entit | y, business or person named | above |
| | 3737 W 4100 S S | iite 100 WVC, UT | | |
| | Address and phone number | of the institution, entity, business or person name | ed above | |
| C. | Select the category that ap | plies to yourself and the outside institution, entit | y, business or person identifi | ed in subsection (B) above: |
| | I receive or have agre | ed to receive compensation for assisting a person | or business entity in a transa- | ction involving Salt Lake County. |
| | <u> </u> | or, agent, employee or the owner of a substantia | | |
| | | or, agent, employee or owner of a substantial into | rest in a business entity that | does or anticipates doing business with |
| | I hold an investment | or other financial interest that creates a potential est that creates a potential or actual conflict with | | blic duties. |
| | None of the above ca | | • • | |
| D. | Give a detailed description entity or person with the (is completed.) | of the actual or potential conflicts of interest ide county. Use more sheets if necessary. (This disc | ntified above, i.e., the nature losure statement will not be a | of the relationship of each business accepted as valid unless this section |
| | | cuss child related mental health treatment a | ınd updates on VBH servi | ces and processes. |
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| Ιd | - | under the law of Utah that the foregoing is true | and correct. | |
| Si | gned on the 23rd day o | January 2024 | | |
| | Date | Month 'Year' | | |
| at. | Salt Lake City, UT | | | |
| | City or other location, and | state or county | | |
| Ca | arolyn Hansen | | | |
| Pri | inted Name | | | |
| Ca | nolyn Hansen | | | |
| | gnature | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| Λ. Ch | narles Eubanks | Youth Services | 385-468-4500 | | | |
|------------|---|--|------------------------------------|--|--|--|
| | ered Person Position, or Cou | anty Division for which you are employed or volunteering | County/Volunteer's Phone | | | |
| 17 | 7 W Price Ave South Salt | Lake, UT 84115 | | | | |
| Cov | rered Person's County Address/Volunt | eer's Address | | | | |
| . Ch | nrist United Methodist Chu | rch | | | | |
| Outs | side institution, entity, private business equired in the above section | s or person in which the Covered Person has a personal or busin | ness interest for which disclosure | | | |
| em | nployee | | | | | |
| Cov | ered person's status, relationship or co | ommitment to the institution, entity, business or person named a | ibove | | | |
| 23 | 75 E 3300 S, Salt Lake Ci | ty, UT 84109 (801) 486-5473 | | | | |
| Add | lress and phone number of the institution | on, entity, business or person named above | | | | |
| C. Sel | lect the category that applies to yourse | If and the outside institution, entity, business or person identific | ed in subsection (B) above: | | | |
| | | ompensation for assisting a person or business entity in a transac | | | | |
| | I am an officer, director, agent, empl | loyee or the owner of a substantial interest in a business entity t | | | | |
| | Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with | | | | | |
| | Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. | | | | | |
| | | s a potential or actual conflict with my public duties. | | | | |
| X | | | | | | |
| ent | | r potential conflicts of interest identified above, i.e., the nature ore sheets if necessary. (This disclosure statement will not be a | | | | |
| | direct a youth handbell choir at Chri | st United Methodist Church | | | | |
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| declar | re under criminal penalty under the law | of Utah that the foregoing is true and correct. | | | | |
| | | 2024 | | | | |
| Signed | on the Tate day of Month | - ' Year' ' | | | | |
| Salt | Lake City, Utah | | | | | |
| ıt. | or other location, and state or county | | | | | |
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| | es Eubanks | | | | | |
| Printed | Name Vle (Euhank (| | | | | |
| harles Eut | banks (Jan 17, 2024 12:03 MST) | | | | | |
| Signatu | 110 | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Youth Services Christine Antoccia 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address AFSCME local Umon 1004 B. Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section cheward Covered person's status, relationship or commitment to the institution, entity, business or person named above Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I am currently a steward for the local union. This is an unpaid position and voluntary. This does not require me to sit on any board. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. 2024 Signed on the Salt Lake city City or other location, and state or county Christine Antoccia Printed Name Christine Antoccio

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. Chris Bereshnyi | Youth Services | 385-468-4500 | | | | |
|--|---|--|--|--|--|--|
| | osition, or County Division for which you are employed or volunteering | County/Volunteer's Phone | | | | |
| 177 W Price Ave S | South Salt Lake, UT 84115 | | | | | |
| Covered Person's County A | ddress/Volunteer's Address | | | | | |
| B. Humane Society of | f Utah | | | | | |
| Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which d is required in the above section | | | | | | |
| Volunteer | | | | | | |
| Covered person's status, rela | ationship or commitment to the institution, entity, business or person nar | med above | | | | |
| 4242 S 300 W | | | | | | |
| Address and phone number | of the institution, entity, business or person named above | | | | | |
| C. Select the category that app | plies to yourself and the outside institution, entity, business or person ide | entified in subsection (B) above: | | | | |
| | ed to receive compensation for assisting a person or business entity in a tra | | | | | |
| | or, agent, employee or the owner of a substantial interest in a business en | | | | | |
| | or, agent, employee or owner of a substantial interest in a business entity | that does or anticipates doing business with | | | | |
| I hold an investment of | or other financial interest that creates a potential or actual conflict with meest that creates a potential or actual conflict with my public duties. | 1y public duties. | | | | |
| None of the above cat | egories apply. | | | | | |
| | of the actual or potential conflicts of interest identified above, i.e., the national county. Use more sheets if necessary. (<i>This disclosure statement will not</i> | | | | | |
| Walk dogs, train new vo | lunteers | | | | | |
| ***** | | | | | | |
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| I declare under criminal penalty | y under the law of Utah that the foregoing is true and correct. | <u>-</u> | | | | |
| 875 | February 2024 | | | | | |
| Signed on the $\frac{1}{\text{Date}}$ day of | Month , Year , | | | | | |
| Salt Lake City, Utah | | | | | | |
| City or other location, and s | state or county | | | | | |
| Chris Bereshnyi | | | | | | |
| Printed Name | | | | | | |
| Chris Bereshnyi (Feb 7, 2024 16:04 MST) | | | | | | |
| Signature | | | | | | |

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DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. Chris Bereshnyi Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Ruff Haven Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section volunteer Covered person's status, relationship or commitment to the institution, entity, business or person named above 300 W Address and phone number of the institution, entity, business or person named above Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) Clean kennels, provide enrichment for cats, train new volunteers

I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Signed on the 7 Date day of February Month, Year,

Salt Lake City, Utah

City or other location, and state or county

Chris Bereshnyi

Printed Name

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Cory Ybarra | | Youth Services | 385-468-4500 | | | | |
|------|--|--|---|--|--|--|--|--|
| | Covered Person | Position, or Cou | nty Division for which you are employed or volunteering | County/Volunteer's Phone | | | | |
| | 177 W Price Ave | e South Salt | Lake, UT 84115 | | | | | |
| | Covered Person's Coun | Covered Person's County Address/Volunteer's Address | | | | | | |
| В. | Highland Spring | s Speciality (| Clinic | | | | | |
| υ. | Outside institution, entire is required in the above | | or person in which the Covered Person has a personal or busing | ness interest for which disclosure | | | | |
| | Contract Clinicia | an | | | | | | |
| | Covered person's status | , relationship or co | mmitment to the institution, entity, business or person named | above | | | | |
| | 4460 S Highland | d Drive SLC, | Utah 84124 800-403-0295 | | | | | |
| | Address and phone num | ber of the institution | on, entity, business or person named above | | | | | |
| C. | Select the category tha | it applies to voursel | f and the outside institution, entity, business or person identifi | ad in substaction (D) shoves | | | | |
| Ç, | | | mpensation for assisting a person or business entity in a transaction | | | | | |
| | - constant | | oyee or the owner of a substantial interest in a business entity | • | | | | |
| | Lake County. | nector, agent, empi | oyee of the owner of a substantial interest in a business entity | mat is subject to the regulation of Sa | | | | |
| | Salt Lake County | I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business wi Salt Lake County. | | | | | | |
| | | | al interest that creates a potential or actual conflict with my pu a potential or actual conflict with my public duties. | blic duties. | | | | |
| | | None of the above categories apply. | | | | | | |
| _ | and the same of th | unani, | | | | | | |
| D. | | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | | | |
| | | | ent's at DYS are medicaid and all client's at HSSC are p | rivate insurance. I do not see | | | | |
| | medicaid funded clie | ent's outside of D | YS. | | | | | |
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| Ιd | leclare under criminal per | nalty under the law | of Utah that the foregoing is true and correct. | | | | | |
| | | | 2024 | | | | | |
| 51 | gned on the da Date | ny of January Month | Year, | | | | | |
| | Salt Lake City Utah | | | | | | | |
| at. | City or other location, a | and state or county | <u> </u> | | | | | |
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| | orylyn Ybarra inted Name | | | | | | | |
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| | rylyn Gbarra gnature | | | | | | | |
| 1.71 | PALITAL BLA | | | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Danielle Latta Utah 8014402332 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 West Price Ave Covered Person's County Address/Volunteer's Address Magna United Communities the Care Coalition Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section **Board Member** Covered person's status, relationship or commitment to the institution, entity, business or person named above 8952 W Magna Main St, Magna, UT 84044 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) As a representative of SLCO Youth Services I hold voting rights on the Magna United CTC Board. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the 17 ___ day of _____ Month Salt Lake City, UT City or other location, and state or county Danielle Latta Printed Name Danielle Latta Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| t Damelle Latta | | Olan | 8014402332 | | | |
|--|--|---|---|--|--|--|
| Covered Person | Position, or County Division | for which you are employed or volunteering | County/Volunteer's Phone | | | |
| 177 West Pric | e Ave | | | | | |
| Covered Person's Co | ounty Address/Volunteer's Address | | | | | |
| _{3.} My Kearns Co | ommunity Coalition | | | | | |
| Outside institution, e is required in the abo | | which the Covered Person has a personal or bu | siness interest for which disclosure | | | |
| member | | | | | | |
| _ | " | the institution, entity, business or person name | d above | | | |
| 5658 South C | | | | | | |
| Address and phone r | number of the institution, entity, bus | iness or person named above | | | | |
| C. Select the category | that applies to yourself and the outs | side institution, entity, business or person identi | fied in subsection (B) above: | | | |
| I receive or ha | ve agreed to receive compensation fo | or assisting a person or business entity in a trans | action involving Salt Lake County. | | | |
| I am an officer Lake County. | , director, agent, employee or the ov | wner of a substantial interest in a business entity | y that is subject to the regulation of Sa | | | |
| I am an officer Salt Lake Cou | | of a substantial interest in a business entity tha | t does or anticipates doing business w | | | |
| I hold an inves | I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. | | | | | |
| None of the ab | ove categories apply. | | | | | |
| Give a detailed descentity or person with is completed.) | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | | |
| | ve of SLCO Youth Services I am | a member of the MyKearns Coalition. | | | | |
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| declare under criminal | penalty under the law of Utah that t | the foregoing is true and correct. | | | | |
| Signed on the Date | day of January , 2024 , Month , Year , | | | | | |
| Salt Lake City, UT | | | | | | |
| t City or other location | n, and state or county | | | | | |
| Danielle Latta | | | | | | |
| Printed Name | | _ | | | | |
| Danielle Latta | | | | | | |
| Signature | | <u> </u> | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Darla Scott | | Youth Services | 385-468-4500 |
|------|--|--|--|---|
| Λ. | | osition, or County Division for South Salt Lake, UT | or which you are employed or volunteering | County/Volunteer's Phone |
| | Covered Person's County A | | 04110 | |
| В. | Granite School Dis | | | |
| Б. | is required in the above sect | ion | hich the Covered Person has a personal or bu | siness interest for which disclosure |
| | - Lv | unchroom q | inties | |
| | Covered person's status, rel | ationship or commitment to the | ne institution, entity, business or person name | d above |
| | 2500 S. State Stre | et Salt Lak City, Ut | ah 84115 #385-646-5000 | |
| | Address and phone number | of the institution, entity, busing | ness or person named above | |
| C. | Select the category that ap | plies to yourself and the outsi | de institution, entity, business or person identi | fied in subsection (B) above: |
| | I receive or have agree | ed to receive compensation for | assisting a person or business entity in a trans | action involving Salt Lake County. |
| | I am an officer, direct | or, agent, employee or the ow | ner of a substantial interest in a business entity | y that is subject to the regulation of Salt |
| | | or, agent, employee or owner | of a substantial interest in a business entity tha | t does or anticipates doing business with |
| | I hold an investment of | | creates a potential or actual conflict with my p | public duties. |
| - | 1 | 原料 | actual conflict with my public duties. | |
| 9 | None of the above cat | egories apply. | | |
| D. | Give a detailed description entity or person with the C is completed.) | of the actual or potential conf County. Use more sheets if ne | licts of interest identified above, i.e., the nature cessary. (This disclosure statement will not be | re of the relationship of each business re accepted as valid unless this section |
| | | School District and Salt Lak | e County. There is no conflict of interest | |
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| | | | | |
| Ιd | leclare under criminal penalty | v under the law of Utah that th | ne foregoing is true and correct. | |
| | | | is to ogoing is the and correct. | |
| Sig | gned on the $\frac{21}{\text{Date}}$ day of | Month , Year | | |
| at . | Salt Lake City, Utah | | | |
| | City or other location, and s | state or county | - | |
| Da | arla Scott | | | |
| Pri | inted Name | | - | |
| 2 | Darla Scott | | | |
| Sig | a Scott (Jan 21, 2024 09:49 MST) gnature | | - | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A Dayttn Bartschi | Youth Services | 385-468-4500 | | | | |
|---|--|--|--|--|--|--|
| Covered Person Position, o | r County Division for which you are employed or volunteering | County/Volunteer's Phone | | | | |
| 177 W Price Ave South S | Salt Lake, UT 84115 | | | | | |
| Covered Person's County Address/V | olunteer's Address | | | | | |
| B. Rocky Mountain (Hospice | e) Care | | | | | |
| | siness or person in which the Covered Person has a personal or busi | ness interest for which disclosure | | | | |
| Volunteer | | | | | | |
| Covered person's status, relationship | or commitment to the institution, entity, business or person named | above | | | | |
| 576 West 900 South, Sui | te 250 Woods Cross, UT 84010 801-397-4 | .000 | | | | |
| Address and phone number of the ins | stitution, entity, business or person named above | | | | | |
| C. Calantilla anti-ameliant and in the | 16 data | '. 1' . 1' | | | | |
| CAR SEASON FRANKLING SA | ourself and the outside institution, entity, business or person identified | 11 04 050 04000 000 | | | | |
| | ive compensation for assisting a person or business entity in a transa- | Th. 100 100 100 100 100 100 100 100 100 10 | | | | |
| I am an officer, director, agent, Lake County. | employee or the owner of a substantial interest in a business entity | that is subject to the regulation of Sal | | | | |
| | employee or owner of a substantial interest in a business entity that | does or anticipates doing business wi | | | | |
| | nancial interest that creates a potential or actual conflict with my pureates a potential or actual conflict with my public duties. | ıblic duties. | | | | |
| None of the above categories a | | | | | | |
| | rual or potential conflicts of interest identified above, i.e., the nature | of the relationship of each business | | | | |
| | entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section | | | | | |
| | patient to provide comfort and companionship during their en | nd-of-life care. Only | | | | |
| relationship to county is that the | patient resides within the county. | | | | | |
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| | | | | | | |
| I declare under criminal penalty under th | e law of Utah that the foregoing is true and correct. | | | | | |
| | , | | | | | |
| Signed on the 27 day of Month | , Year , Year | | | | | |
| Salt Lake City, Utah, United States | s of America | | | | | |
| City or other location, and state or co | ounty | | | | | |
| Dayttn Bartschi | | | | | | |
| Printed Name | | | | | | |
| Daytta Bartachi | | | | | | |
| Signature | | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Dayttn Bartschi | Youth Services | 385-468-4500 |
|-----|---|--|--|
| 11. | Covered Person | Position, or County Division for which you are employed or volunteering | County/Volunteer's Phone |
| | 177 W Price Ave | South Salt Lake, UT 84115 | |
| | Covered Person's County | Address/Volunteer's Address | |
| В. | University of Utal | h Office of Undergradute Research | |
| | Outside institution, entity is required in the above se | y, private business or person in which the Covered Person has a personal or lection | business interest for which disclosure |
| | Part-time underg | raduate researcher | |
| | | relationship or commitment to the institution, entity, business or person nan | ned above |
| | SILL CENTER S | ALT LAKE CITY, UT 84112 801-581-8070 | |
| | Address and phone numb | per of the institution, entity, business or person named above | |
| C. | Select the category that | applies to yourself and the outside institution, entity, business or person ide | ntified in subsection (B) above: |
| | I receive or have ag | reed to receive compensation for assisting a person or business entity in a tra | unsaction involving Salt Lake County. |
| | I am an officer, dire | ector, agent, employee or the owner of a substantial interest in a business en | tity that is subject to the regulation of Salt |
| | Lake County. | | had done on anti-dropped district to the state of the sta |
| | Salt Lake County. | ector, agent, employee or owner of a substantial interest in a business entity t | that does of anticipates doing business with |
| | | nt or other financial interest that creates a potential or actual conflict with m | y public duties. |
| | | terest that creates a potential or actual conflict with my public duties. | |
| | None of the above of | | |
| D. | | on of the actual or potential conflicts of interest identified above, i.e., the nate County. Use more sheets if necessary. (<i>This disclosure statement will not</i> | |
| | understand interventi | arch Opportunity Program recipient conducting a thematic analysis o ons to the stigma and discrimination of persons experiencing homele s. No other county relationship. | |
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| T | | Lead of the CITAL device Control of the Control of the Cital of the Ci | |
| | | alty under the law of Utah that the foregoing is true and correct. | |
| Si | gned on the $\frac{27}{\text{Date}}$ day | $\frac{1}{1} = \frac{1}{1} = \frac{1}$ | |
| at | Salt Lake City, Utah, Ur | nited States of America | |
| • | City or other location, an | d state or county | |
| D | ayttn Bartschi | | |
| Pr | inted Name | | |
| | Dayttn Bartschi | _ | |
| Si | ttn Bartschi (Jan 27, 2024 01:43 MST) gnature | | |

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Dennis Sellis Youth Services 385-468-4500 Position, or County Division for which you are employed or volunteering Covered Person County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Integrated Psychotherapy Services Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Part time therapist Covered person's status, relationship or commitment to the institution, entity, business or person named above 4885 S. 900 E. Suite 207, Salt Lake City, UT 84117 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) Working for Integrated Psychotherapy Services every Friday at 1:30-5:30 PM. The clients I serve there are adults ranging from 25-50 years old. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the 25 West Jordan Youth Services City or other location, and state or county Dennis Sellis Printed Name

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Desiree Steadman-Gallegos | Youth Services | 385-468-4500 | | | | |
|-----|---|--|---|--|--|--|--|
| 11. | Covered Person Position, or Cour | nty Division for which you are employed or volunteering | County/Volunteer's Phone | | | | |
| | 177 W Price Ave South Salt I | 177 W Price Ave South Salt Lake, UT 84115 | | | | | |
| | Covered Person's County Address/Volunte | The state of the s | | | | | |
| В. | - | mEHR Therapeu | tic Counseling Service | | | | |
| | | or person in which the Covered Person has a personal or | business interest for which disclosure | | | | |
| | is required in the above section | Private Prac | tice | | | | |
| | Covered person's status, relationship or con | nmitment to the institution, entity, business or person nar | | | | | |
| | 26 | ZE 3900 S milleree | K, 4T 84107 | | | | |
| | Address and phone number of the institution | | | | | | |
| C. | Select the category that applies to yoursel | f and the outside institution, entity, business or person ide | entified in subsection (B) above: | | | | |
| | I receive or have agreed to receive con | mpensation for assisting a person or business entity in a tra | ansaction involving Salt Lake County. | | | | |
| | I am an officer, director, agent, emplo | byee or the owner of a substantial interest in a business en | atity that is subject to the regulation of Salt | | | | |
| | Lake County. | byee or owner of a substantial interest in a business entity | that does or antiginates doing husiness wif | | | | |
| | Salt Lake County. | | • • • • • • • • • • • • • • • • • • • | | | | |
| | | al interest that creates a potential or actual conflict with material or actual conflict with my public duties. | y public duties. | | | | |
| | None of the above categories apply. | a potential of actual confinct with my public duties. | | | | | |
| D | 4 | notantial conflicts of interest identified shows is the no | tura aftha mlaticushin af and luning | | | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>) | | | | | | |
| | I have a Private Practise that I work 4 | -5 hours per week, involving seeing adults or couple | es for therapy sessions. | | | | |
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| Ιd | ÷ 5/ | of Utah that the foregoing is true and correct. | | | | | |
| Si | gned on the day of February | , | | | | | |
| | Date Month | Year | | | | | |
| at. | Millcreek, Utah | | | | | | |
| | City or other location, and state or county | | | | | | |
| D | esiree Steadman-Gallegos | | | | | | |
| Pr | inted Name | | | | | | |
| Le | | | | | | | |
| Si | gnature | | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Diana Johnson | | Youth Services | 385-468-4500 | | | |
|-------------|--|--|---|---|--|--|--|
| <i>i</i> 1. | Covered Person | Position, or County Division f | or which you are employed or volunteering | County/Volunteer's Phone | | | |
| | 177 W Price Ave | e South Salt Lake, UT | 84115 | 2 [T] | | | |
| | Covered Person's Count | ty Address/Volunteer's Address | Cly | it ca | | | |
| В. | | we li | · Magna Ce | Paletion | | | |
| | | • | which the Covered Person has a personal or busi | ness interest for which disclosure | | | |
| | is required in the above | section | ember | | | | |
| | Covered person's status | | he institution, entity, business or person named | above | | | |
| | | 8950 Sindia | aHILS Pr. Sande | 1 | | | |
| | Address and phone num | ber of the institution, entity, bus | ness or person named above | 0 | | | |
| C. | Select the category tha | at applies to yourself and the outs | ide institution, entity, business or person identifi | ied in subsection (B) above: | | | |
| | I receive or have a | agreed to receive compensation fo | or assisting a person or business entity in a transaction | ction involving Salt Lake County. | | | |
| | I am an officer, di Lake County. | rector, agent, employee or the ov | vner of a substantial interest in a business entity | that is subject to the regulation of Salt | | | |
| | I am an officer, di | | of a substantial interest in a business entity that | does or anticipates doing business with | | | |
| | Salt Lake County. | | creates a potential or actual conflict with my pu | ublic duties. | | | |
| | | | actual conflict with my public duties. | tone datas. | | | |
| | None of the above | e categories apply. | | | | | |
| D. | Give a detailed descrip | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business | | | | | |
| | entity or person with the is completed.) | he County. Use more sheets if no | ecessary. (This disclosure statement will not be a | accepted as valid unless this section | | | |
| | | ne Magna United Coalition and | I we offer prevention workshops in the Magi | na area. | | | |
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| Ιd | leclare under criminal per | nalty under the law of Utah that t | he foregoing is true and correct. | | | | |
| o: | gned on the 23 da | ay of, 2024 | | | | | |
| 31 | Date Date | Month , Year, | | | | | |
| at. | Salt Lake City, Utah | | | | | | |
| | City or other location, a | and state or county | _ | | | | |
| Di | ana M. Johnson | | | | | | |
| Pr | inted Name | | _ | | | | |
| Du | ana M. Johnson | | | | | | |
| Si | gnature | | _ | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned,

under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Diana Johnson 3854431224 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W. Price A've SLC 11284118 Covered Person's County Address/Volunteer's Address Midvale Coalition (not yet named) Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section member of coalition Covered person's status, relationship or commitment to the institution, entity, business or person named above 7505 S. Holden Street Midvale, UT 84047 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above; I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County, I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I am a member of the soon-to-be coalition and Salt Lake County Youth services provides prevention workshops in the area and possibly for the coalition. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{23}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$ Salt Lake City, UT City or other location, and state or county Diana M. Johnson Printed Name Diana M. Johnson

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

Youth Services

385-468-4500

| A. | Eli Curry | | routin Services | 365-468-4500 | | |
|------|--|------------------------|--|---|--|--|
| | Covered Person | Position, or Cou | anty Division for which you are employed or volunteering | County/Volunteer's Phone | | |
| | 177 W Price Ave | e South Salt | Lake, UT 84115 | | | |
| | Covered Person's Coun | ty Address/Volunt | eer's Address | | | |
| В. | Salt Lake Climb | ers Alliance | | | | |
| | is required in the above | section | s or person in which the Covered Person has a personal or | business interest for which disclosure | | |
| | Volunteer Memb | per of SLCA | Events Crew | | | |
| | = | • | emmitment to the institution, entity, business or person na | med above | | |
| | P.O. Box 9157 | SLC, UT 841 | 09 | | | |
| | Address and phone num | ber of the institution | on, entity, business or person named above | | | |
| C. | Select the category tha | t applies to yourse | If and the outside institution, entity, business or person ide | entified in subsection (B) above: | | |
| | I receive or have a | igreed to receive co | empensation for assisting a person or business entity in a tr | ansaction involving Salt Lake County. | | |
| | Lake County. | | loyee or the owner of a substantial interest in a business en | | | |
| | I am an officer, di Salt Lake County. | | oyee or owner of a substantial interest in a business entity | that does or anticipates doing business wit | | |
| | I hold an investme | ent or other financi | al interest that creates a potential or actual conflict with n a potential or actual conflict with my public duties. | ny public duties. | | |
| | None of the above | | | | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | | |
| | The SLCA works to | maintain trails ar | nd access in the Wasatch Front / Salt Lake County. | | | |
| | I work as a voluntee | r member at cert | ain events throughout the year to help facilitate knov | vledge about climbing and access. | | |
| I de | eclare under criminal per | nalty under the law | of Utah that the foregoing is true and correct. | | | |
| Sic | gned on the da | y of | 2024 | | | |
| DIE | Date | Month | Year, | | | |
| at_ | South Salt Lake | | | | | |
| | City or other location, a | nd state or county | | | | |
| Eli | Curry | | | | | |
| | nted Name | | | | | |
| Œ | :Cury | | | | | |
| | nature | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Youth Services German Ochoa 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Utah State University Extension Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Group Facilitaor Covered person's status, relationship or commitment to the institution, entity, business or person named above 2001 S State Street Ste S1-300 Salt Lake City UT 84190 385-468-4820 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I work as a group facilitator teaching parenting classes once a week. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the 23 South Salt Lake City UT City or other location, and state or county German Ochoa Printed Name

This statement is a public document. It must be filed with the covered person's immediate supervisor, volunteer or community liaison, division director, department director or elected official, and the County Council. It must be filed when the potential conflict arises and re-

filed every January, as long as the potential conflict exists.

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| _{a.} German Ochoa | 1 | Youth Services | 385-468 - 4500 | | | |
|--|--|---|---|--|--|--|
| Covered Person | Position, or County | Division for which you are employed or volunteering | County/Volunteer's Phone | | | |
| 177 W Price Av | e South Salt La | ake, UT 84115 | | | | |
| Covered Person's Cou | nty Address/Volunteer | 's Address | | | | |
| 3. Weber Human | Services | | | | | |
| | | person in which the Covered Person has a personal or bus | iness interest for which disclosure | | | |
| Group Facilitate | or | | | | | |
| Covered person's statu | s, relationship or comn | nitment to the institution, entity, business or person named | above | | | |
| 237 26th St, Og | gden UT 84041 | | | | | |
| Address and phone nur | mber of the institution, | entity, business or person named above | | | | |
| C. Select the category th | at applies to yourself a | nd the outside institution, entity, business or person identif | ied in subsection (B) above: | | | |
| t-manus. | | pensation for assisting a person or business entity in a transa | • • | | | |
| I am an officer, o | _ | ee or the owner of a substantial interest in a business entity | , | | | |
| Lake County. I am an officer, d Salt Lake County | | ee or owner of a substantial interest in a business entity that | does or anticipates doing business with | | | |
| I hold an investn | nent or other financial i | interest that creates a potential or actual conflict with my p | ublic duties. | | | |
| | | potential or actual conflict with my public duties. | | | | |
| None of the above | e categories apply. | | | | | |
| | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed</i>) | | | | | |
| | acilitator teaching pa | arenting class once a year. | | | | |
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| I declare under criminal n | enalty under the law of | Utah that the foregoing is true and correct. | | | | |
| - | - | 2024 | | | | |
| Signed on the Date | ay or | Year , | | | | |
| South Salt Lake UT | Monu | 1000 | | | | |
| City or other location, | and state or county | | | | | |
| German Ochoa | | | | | | |
| Printed Name | | | | | | |
| Sarayan Debag Han 22, 2024 DE 62 HETT | | | | | | |
| German Ochoa (Jan 23, 2024 06:53 MST) Signature | | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A. | James Hamell | | Youth Services | 385-468-4500 | | | |
|------|------------------------------------|---|--|---|--|--|--|
| 11, | Covered Person | Position, or County Division | n for which you are employed or volunteering | County/Volunteer's Phone | | | |
| | 177 W Price Ave | e South Salt Lake, U | Г 84115 | | | | |
| | Covered Person's Coun | ty Address/Volunteer's Addres | s | | | | |
| В. | Magna United C | Communities that Car | e | | | | |
| | Outside institution, enti | | n which the Covered Person has a personal or busi | ness interest for which disclosure | | | |
| | Community Boa | ard Member | | | | | |
| | Covered person's status | s, relationship or commitment t | o the institution, entity, business or person named | above | | | |
| | 8952 West Mag | na Main Street Magn | a, Utah 84044 | | | | |
| | Address and phone num | nber of the institution, entity, be | isiness or person named above | | | | |
| C. | Select the category that | at applies to yourself and the ou | tside institution, entity, business or person identifi | ied in subsection (B) above: | | | |
| | I receive or have a | agreed to receive compensation | for assisting a person or business entity in a transa- | ction involving Salt Lake County. | | | |
| | I am an officer, di | irector, agent, employee or the | owner of a substantial interest in a business entity | that is subject to the regulation of Salt | | | |
| | | I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with | | | | | |
| | I hold an investm | I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. | | | | | |
| | | e categories apply. | · - | | | | |
| D. | | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section | | | | | |
| | | duties, I also participate with | the Magna United Communities that Care Co | palition. | | | |
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| Ιd | eclare under criminal ne | nalty under the law of Utah tha | t the foregoing is true and correct. | | | | |
| | 02 | Fobruary 2024 | | | | | |
| Si | gned on the Date | ay of Month, Year, | | | | | |
| | Magna, UT - Salt Lake | e County | | | | | |
| at. | City or other location, a | | · | | | | |
| Ja | mes Hamell | · | | | | | |
| | inted Name | | | | | | |
| | -720K/ | | | | | | |
| Tgu. | cs Hadrell (Feb 2, 2024 13:25 MST) | | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. James Hamell Youth Services 385-468-4500 Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Pivotal Content, LLC Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Managing Partner Covered person's status, relationship or commitment to the institution, entity, business or person named above 715 E 3900 South, Salt Lake City, UT 84107 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) Managing Partner of a Media Consultancy Agency does not work for the county in this capacity or the coke. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{02}{Date}$ day of $\frac{February}{Month}$, $\frac{2024}{Year}$, Magna, UT - Salt Lake County City or other location, and state or county James Hamell Printed Name

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| James Weir | Youth Services | 385-468-4500 |
|--|--|---|
| | County Division for which you are employed or volunteering | County/Volunteer's Phone |
| 177 W Price Ave South S | alt Lake, UT 84115 | |
| Covered Person's County Address/Vo | lunteer's Address | |
| | ness or person in which the Covered Person has a personal or bus | |
| Outside institution, entity, private busi | ness or person in which the Covered Person has a personal or bus | iness interest for which disclosure |
| is required in the above section | 46000 M | |
| Covered person's status, relationship of | responsible to the institution, entity, business or person named | aharra |
| Covered person 8 status, relationship t | | above |
| Address and phone number of the inst | itution, entity, business or person named above | |
| Address and phone lighter of the first | nation, entry, business of person named above | |
| | urself and the outside institution, entity, business or person identif | ` ' |
| | ve compensation for assisting a person or business entity in a transa | _ |
| I am an officer, director, agent, a Lake County. | employee or the owner of a substantial interest in a business entity | that is subject to the regulation of Sa |
| | mployee or owner of a substantial interest in a business entity that | does or anticipates doing business w |
| I hold an investment or other fin | ancial interest that creates a potential or actual conflict with my pr | ublic duties. |
| | eates a potential or actual conflict with my public duties. | |
| None of the above categories ap | | |
| | al or potential conflicts of interest identified above, i.e., the nature se more sheets if necessary. (This disclosure statement will not be | |
| | Behavioral Health for an outpatient and a residential unit. | |
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| declare under criminal penalty under the | law of Utah that the foregoing is true and correct. | |
| igned on the day of | 2024 | |
| Date Month | Year 'Year | |
| Salt Lake city, Utah | | |
| City or other location, and state or co | unty | |
| ames Weir | | |
| rinted Name | | |
| James Weir | | |
| ges Weir (Jan 20, 2024 22::29 MST) ignature | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| _{A.} JDGreen | Youth Services | 3854684487 |
|----------------------------------|--|---|
| | Position, or County Division for which you are employed or vo. | lunteering County/Volunteer's Phone |
| 177 West Price Av | e. South Salt Lake City, Utah 84115 | |
| Covered Person's County A | Address/Volunteer's Address | |
| _{3.} Insight Counseling | Services (ICS) | |
| | private business or person in which the Covered Person has a prition | ersonal or business interest for which disclosure |
| Owner/Operator | | |
| Covered person's status, rel | lationship or commitment to the institution, entity, business or | person named above |
| 963 N 1025 E, Og | den Utah 84404 | |
| Address and phone number | of the institution, entity, business or person named above | |
| C. Select the category that ap | plies to yourself and the outside institution, entity, business or | nerson identified in subsection (B) above: |
| Parameter 1 | ed to receive compensation for assisting a person or business en | • |
| | tor, agent, employee or the owner of a substantial interest in a b | • |
| | or, agent, employee or owner of a substantial interest in a busin | ness entity that does or anticipates doing business wit |
| I hold an investment | or other financial interest that creates a potential or actual confl rest that creates a potential or actual conflict with my public du | |
| None of the above car | . , , | |
| | of the actual or potential conflicts of interest identified above, County. Use more sheets if necessary. (This disclosure stateme | |
| | nental health therapy services for individuals, couples, fai alt Lake County. | milies, groups. No clients receive mental |
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| I declare under criminal penalt | y under the law of Utah that the foregoing is true and correct. | |
| | f January , 2024 , | |
| Date Date | Month 'Year' | |
| South Salt Lake City | | |
| at City or other location, and | state or county | |
| JD Green | | |
| Printed Name | | |
| gogreen | | |
| J Green (Jan 25, 2024 15:17 MST) | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. Julianna Potter Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Healthy West Valley City Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section **Board Member** Covered person's status, relationship or commitment to the institution, entity, business or person named above 3600 S Constitution Blvd, 801-966-8658 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I serve as a board member for Healthy West Valley City and am unaware of any actual or potential conflicts I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{17}{Date}$ day of $\frac{January}{Month}$ South Salt Lake, UT City or other location, and state or county Julianna Potter Printed Name Qulianna Potter Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| Α. | Julianna Potter | | Youth Services | 385-468-4500 |
|------|--|---|--|---|
| 1. | Covered Person | Position, or Cour | ty Division for which you are employed or volunteering | County/Volunteer's Phone |
| | 177 W Price Ave | South Salt L | .ake, UT 84115 | |
| | Covered Person's County | y Address/Voluntee | er's Address | |
| В. | Magna United | | | |
| | Outside institution, entity is required in the above s | | or person in which the Covered Person has a personal or bu | siness interest for which disclosure |
| | Board Member | | | |
| | Covered person's status, | relationship or con | nmitment to the institution, entity, business or person name | dabove |
| | 8952 W Magna I | Main St, 385- | 977-2275 | |
| | Address and phone numb | per of the institution | n, entity, business or person named above | |
| c. | Select the category that | applies to yourself | and the outside institution, entity, business or person identi | fied in subsection (B) above: |
| | I receive or have ag | greed to receive con | npensation for assisting a person or business entity in a trans | action involving Salt Lake County. |
| | I am an officer, dir Lake County. | ector, agent, emplo | yee or the owner of a substantial interest in a business entity | y that is subject to the regulation of Sal- |
| | | ector, agent, emplo | yee or owner of a substantial interest in a business entity tha | t does or anticipates doing business wit |
| | Salt Lake County. I hold an investment | nt or other financia | l interest that creates a potential or actual conflict with my | oublic duties. |
| | I hold a personal ir | nterest that creates a | a potential or actual conflict with my public duties. | |
| | None of the above | categories apply. | | |
| D. | | | potential conflicts of interest identified above, i.e., the nature sheets if necessary. (This disclosure statement will not be | |
| | | ember for Magna | United and am unaware of any actual or potential cor | ıflicts |
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| I d | eclare under criminal pen | alty under the law o | of Utah that the foregoing is true and correct. | |
| | - | of January | 2024 | |
| Sig | gned on the Date | Month | 'Year' | |
| | South Salt Lake, UT | | | |
| at . | City or other location, ar | nd state or county | | |
| Ju | ilianna Potter | | | |
| | inted Name | , | | |
| Ge | ilianna Potter | | | |
| Z | gnature | | | |
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(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A. | Julianna Potter | | Youth Services | 385-468-4500 | | |
|-----|--|--|---|---|--|--|
| , | Covered Person | Position, or County Division f | or which you are employed or volunteering | County/Volunteer's Phone | | |
| | 177 W Price Ave | South Salt Lake, UT | 84115 | | | |
| | Covered Person's Count | y Address/Volunteer's Address | | | | |
| В. | MyKearns Coalit | tion | | | | |
| ٠. | Outside institution, entit is required in the above s | y, private business or person in v section | which the Covered Person has a personal or busi | ness interest for which disclosure | | |
| | Board Member | | | | | |
| | Covered person's status, | relationship or commitment to t | he institution, entity, business or person named | above | | |
| | N/A | | | | | |
| | Address and phone num | ber of the institution, entity, busi | ness or person named above | | | |
| C. | Select the category that | applies to yourself and the outsi | de institution, entity, business or person identifi | ied in subsection (B) above | | |
| | | | r assisting a person or business entity in a transa | | | |
| | | | ner of a substantial interest in a business entity | - | | |
| | Lake County. | | | - | | |
| | I am an officer, dir Salt Lake County. | ector, agent, employee or owner | of a substantial interest in a business entity that | does or anticipates doing business with | | |
| | I hold an investme | nt or other financial interest that | creates a potential or actual conflict with my pu | ıblic duties. | | |
| | | • | actual conflict with my public duties. | | | |
| | None of the above | | | • | | |
| D. | Give a detailed descript entity or person with th is completed.) | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | |
| | | ember for the MyKearns Com | munity Coalition and am unaware of any a | ctual or potential conflicts | | |
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| I d | eclare under criminal pen | alty under the law of Utah that th | e foregoing is true and correct. | | | |
| Sig | gned on the 17 day | y of January , 2024 Month , Year , | | | | |
| | Date | Month 'Year' | | | | |
| at_ | South Salt Lake, UT | | | | | |
| | City or other location, an | d state or county | - | | | |
| Ju | lianna Potter | | | | | |
| Pri | nted Name | | - | | | |
| Ju | lianna Potter | | | | | |
| _ | nature | | - | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. Julianna Potter Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Royal Family Kids Club Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Board member Covered person's status, relationship or commitment to the institution, entity, business or person named above 801-561-5911 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) serve as a board member for RFK and am unaware of any actual or potential conflicts I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Signed on the $\frac{17}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$ South Salt Lake, UT City or other location, and state or county Julianna Potter Printed Name Julianna Potter

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| Julianna Potter | Youth Services | 385-468-4500 |
|---|--|---|
| | ounty Division for which you are employed or volunteering | County/Volunteer's Phone |
| 177 W Price Ave South Salt | t Lake, UT 84115 | |
| Covered Person's County Address/Volum | teer's Address | <u>,</u> |
| s. | ss or person in which the Covered Person has a personal or bus | 50Clation |
| Outside institution, entity, private busines is required in the above section | | siness interest for which disclosure |
| t . | Board Member | |
| Covered person's status, relationship or c | commitment to the institution, entity, business or person named | i above |
| 2118 | ion, entity, business or person named above | 04040 |
| Address and phone number of the institut | tion, entity, business or person named above | |
| . Select the category that applies to yours | elf and the outside institution, entity, business or person identi | fied in subsection (B) above: |
| NAME OF THE PARTY | compensation for assisting a person or business entity in a trans- | ` ' |
| 7.77.25.11 | ployee or the owner of a substantial interest in a business entity | • |
| | loyee or owner of a substantial interest in a business entity that | t does or anticipates doing business wi |
| | cial interest that creates a potential or actual conflict with my pes a potential or actual conflict with my public duties. | public duties. |
| None of the above categories apply | : | |
| | or potential conflicts of interest identified above, i.e., the naturnore sheets if necessary. (This disclosure statement will not be | |
| | and am unaware of any actual or potential conflicts | |
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| declare under criminal penalty under the lay | w of Utah that the foregoing is true and correct. | |
| | 2024 | |
| tigned on the Date day of Month | - 'Year' | |
| South Salt Lake, UT | | |
| City or other location, and state or count | у | |
| ulianna Potter | | |
| rinted Name | | |
| Julianna Pottza | | |
| ignature | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

| A. | Kameron Leoncini | Youth Services | 385-468-4500 | | |
|------------------|--|---|---|--|--|
| | Covered Person Position | n, or County Division for which you are employed or volunte | cering County/Volunteer's Phone | | |
| | 177 W Price Ave South | า Salt Lake, UT 84115 | | | |
| | Covered Person's County Address | s/Volunteer's Address | | | |
| 3, | Make A Wish Utah | | | | |
| | is required in the above section | business or person in which the Covered Person has a person | nal or business interest for which disclosure | | |
| | Member, Board of Dire | | | | |
| | • | hip or commitment to the institution, entity, business or perso | on named above | | |
| | | Murray, UT 84107 - 801-262-9474 | | | |
| | Address and phone number of the | institution, entity, business or person named above | | | |
| C. | Select the category that applies to | o yourself and the outside institution, entity, business or person | on identified in subsection (B) above: | | |
| | I receive or have agreed to re | eceive compensation for assisting a person or business entity i | in a transaction involving Salt Lake County. | | |
| | Lake County. | ent, employee or the owner of a substantial interest in a busine | | | |
| | Salt Lake County. | ent, employee or owner of a substantial interest in a business e | entity that does or anticipates doing business wi | | |
| | | er financial interest that creates a potential or actual conflict wat creates a potential or actual conflict with my public duties. | vith my public duties. | | |
| | None of the above categorie | es apply. | | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | |
| | I sit on the board of directors | for Make-A-Wish Utah. | | | |
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| I d | eclare under criminal penalty unde | er the law of Utah that the foregoing is true and correct. | | | |
| | - · | | | | |
| | | uary 2024 | | | |
| Sig | gned on the 24 day of | uary 2024 | | | |
| Sig | gned on the Date day of Mont | h 'Year', | | | |
| Sig at_ | gned on the 24 day of Monti West Jordan, UT | h 'Year', | | | |
| Sig at_ Ka | gned on the $\frac{24}{Date}$ day of $Janument Month Mo$ | h 'Year', | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Youth Services Karen Dohle 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Northrop Grumman Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Full time employee Covered person's status, relationship or commitment to the institution, entity, business or person named above 8710 Freeport Parkway, Irving Texas75063 Address and phone number of the institution, entity, business or person named above Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) No potential conflict Admin assistant for space program. No conflicts wisalt lake County. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the 21 ___ day of January Month Year Salt Lake City City or other location, and state or county Karen Dohle Printed Name

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| Д | Kelly Paluso | UTAH | 8015870949 |
|-------|--|--|---|
| | Covered Person 50 NORTH MEI | Position, or County Division for which you are employed or volunteering | County/Volunteer's Phone |
| | Covered Person's Coun | ty Address/Volunteer's Address F UTAH HOSPITAL | |
| В. | | ty, private business or person in which the Covered Person has a personal or bus | iness interest for which disclosure |
| | Programment of the control of the co | F UTAH HOSPITAL | |
| | (T.) | , relationship or commitment to the institution, entity, business or person named | above |
| | SERVICE SERVICE CONTRACTOR PRODUCTION OF THE SERVICE S | Norker in Women and Children's units | |
| | Address and phone num | aber of the institution, entity, business or person named above | |
| C. | Select the category that | t applies to yourself and the outside institution, entity, business or person identif | fied in subsection (B) above: |
| | I receive or have a | agreed to receive compensation for assisting a person or business entity in a transa | action involving Salt Lake County. |
| | Lake County. | rector, agent, employee or the owner of a substantial interest in a business entity | |
| | I am an officer, di Salt Lake County | rector, agent, employee or owner of a substantial interest in a business entity that | does or anticipates doing business with |
| | I hold an investme | ent or other financial interest that creates a potential or actual conflict with my p interest that creates a potential or actual conflict with my public duties. | ublic duties. |
| 多 | None of the above | e categories apply. | |
| D. | | tion of the actual or potential conflicts of interest identified above, i.e., the nature he County. Use more sheets if necessary. (<i>This disclosure statement will not be</i> | |
| | doesn't | social worker at the University of Utah Hospital in the Women's and Child WUYK WITH HOUTH SEMICES CLI WLD PASS THEM ON TO ANOT | |
| | Socia | 1 Worker. | |
| | MCI | 1 à post partun depress | 1021 |
| I de | eclare under criminal per | nalty under the law of Utah that the foregoing is true and correct. | |
| Sig | gned on the $\frac{8}{\text{Date}}$ da | y of February , 24 / Year , | |
| | SALT LAKE CITY | | |
| at _ | City or other location, a | and state or county | |
| KE | LLY PALUSO | | |
| | nted Name | | |
| Kelly | Celly Paluso Paluso (Feb 8, 2024 14:10 MST) | <u>- </u> | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Kevin Rushforth | UT | 8015180292 |
|-----|--|---|---|
| , | | ion, or County Division for which you are employed or volunteering | County/Volunteer's Phone |
| | 177 West Price Avenue | ue | |
| | Covered Person's County Addre | ess/Volunteer's Address | |
| В. | Youth Action Board | | |
| | Outside institution, entity, priva is required in the above section | te business or person in which the Covered Person has a personal or busi | ness interest for which disclosure |
| | Non-voting advisor | | |
| | Covered person's status, relation | nship or commitment to the institution, entity, business or person named | above |
| | 177 W. Price Ave Sou | uth Salt Lake UT 84115 | |
| | Address and phone number of the | he institution, entity, business or person named above | |
| C. | Select the category that applies | s to yourself and the outside institution, entity, business or person identifi | ied in subsection (B) above: |
| | I receive or have agreed to | receive compensation for assisting a person or business entity in a transa | ction involving Salt Lake County. |
| | I am an officer, director, a | agent, employee or the owner of a substantial interest in a business entity | that is subject to the regulation of Salt |
| | | gent, employee or owner of a substantial interest in a business entity that | does or anticipates doing business with |
| | | her financial interest that creates a potential or actual conflict with my puthat creates a potential or actual conflict with my public duties. | ıblic duties. |
| | None of the above categor | • • • | |
| D. | Give a detailed description of the entity or person with the Coun is completed.) | the actual or potential conflicts of interest identified above, i.e., the nature ty. Use more sheets if necessary. (<i>This disclosure statement will not be a</i> | of the relationship of each business accepted as valid unless this section |
| | No potential conflicts identif | fied | |
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| Ιd | leclare under criminal penalty und | der the law of Utah that the foregoing is true and correct. | |
| Q1. | gned on the day of | nuary 2024 | |
| ŊI, | Date day of Mo: | nth 'Year' | |
| at. | Salt Lake City | | |
| | City or other location, and state | or county | |
| Κe | evin Rushforth | | |
| Pr | inted Name | | |
| Ke | vin Rushforth | | |
| | gnature | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Kira Coelho | | Youth Services | 385-468-4500 |
|----------|--|-------------------------|--|---|
| | Covered Person | Position, or Cou | nty Division for which you are employed or volunteer | ring County/Volunteer's Phone |
| | 177 W Price Av | e South Salt | Lake, UT 84115 | |
| | Covered Person's Cou | nty Address/Volunte | eer's Address | |
| В. | Door Dash | | | |
| υ. | Outside institution, entire is required in the above | | or person in which the Covered Person has a persona | l or business interest for which disclosure |
| | Independent Se | econd Job | | |
| | Covered person's statu | ıs, relationship or co | mmitment to the institution, entity, business or person | ı named above |
| | 10244 S Phlox | St. Sandy, U | T 84094 | |
| | Address and phone nu | mber of the institution | on, entity, business or person named above | |
| C. | Select the category th | at applies to yoursel | f and the outside institution, entity, business or person | n identified in subsection (B) above: |
| | | | mpensation for assisting a person or business entity in | , , |
| | | | oyee or the owner of a substantial interest in a busines | · · |
| | Lake County. | | | |
| | I am an officer, d Salt Lake Count | | oyee or owner of a substantial interest in a business en | tity that does or anticipates doing business with |
| | A TANAMAN, | • | al interest that creates a potential or actual conflict wi | th my public duties. |
| | I hold a personal | l interest that creates | a potential or actual conflict with my public duties. | |
| | X None of the above | ve categories apply. | | |
| D. | | | potential conflicts of interest identified above, i.e., the pre sheets if necessary. (This disclosure statement will | |
| | Pick up and Delive | ring Food items to | customers. | |
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| Ιά | declare under criminal p | enalty under the law | of Utah that the foregoing is true and correct. | |
| | _ | lay of January | 2024 | |
| Si | gned on the Date | lay of Month | - ' Year' ' | |
| | 177 W Price Ave (36 | 10 S) Salt Lake Ci | tv. UT 84115 | |
| at | City or other location, | · | | |
| Ki | ira Coelho | | | |
| Pr | inted Name | | | |
| | Kala- | | | |
| Si Si | <u>: Coelho (Jan 29, 2024 13;38 MST)</u> gnature | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Kira Coeino | | Youth Services | 385-468 - 4500 | | | | |
|--------|--|--|---|---|--|--|--|--|
| | Covered Person | Position, or County Divis | sion for which you are employed or volunteering | County/Volunteer's Phone | | | | |
| | 177 W Price Av | e South Salt Lake, | UT 84115 | | | | | |
| | Covered Person's Com | nty Address/Volunteer's Add | Iress | | | | | |
| В. | Kiki Shiree Nail | s | | | | | | |
| | Outside institution, ent is required in the above | | n in which the Covered Person has a personal or bu | isiness interest for which disclosure | | | | |
| | Independent Si | de Work | | | | | | |
| | Covered person's statu | Covered person's status, relationship or commitment to the institution, entity, business or person named above | | | | | | |
| | 10244 S Phlox | St. Sandy, UT 8409 | 94 | | | | | |
| | Address and phone nur | nber of the institution, entity | , business or person named above | | | | | |
| C. | Select the category th | at applies to yourself and the | outside institution, entity, business or person ident | tified in subsection (B) above: | | | | |
| U. | - | | ion for assisting a person or business entity in a tran | ` ' | | | | |
| | | | he owner of a substantial interest in a business enti- | - | | | | |
| | Lake County. | meetor, agent, employee or t | ne owner of a substantial interest in a business entr | ly that is subject to the regulation of Sar | | | | |
| | I am an officer, d Salt Lake County | | wner of a substantial interest in a business entity the | at does or anticipates doing business wit | | | | |
| | I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. | | | | | | | |
| | | _ | all or actual conflict with my public duties. | | | | | |
| | a recompet | ve categories apply. | | | | | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | | | | |
| | | ning Press On Nails for cu | stomers. | | | | | |
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| T de | eclare under criminal pe | enalty under the law of Utah | that the foregoing is true and correct. | | | | | |
| | _ | | | | | | | |
| Sig | ned on the Date | lay of January , 2024 Month , Year | | | | | | |
| | 177 W Price Ave (36 | 10 S) Salt Lake City, UT 8 | 4115 | | | | | |
| at | City or other location, | and state or county | | | | | | |
| Kir | a Coelho | | | | | | | |
| Pri | nted Name | | <u> </u> | | | | | |
| Wir- 1 | Kaller 100 2024 1340 METS | | | | | | | |
| | oelho (Jan 29, 2024 13;40 MST) nature | | • | | | | | |

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. Kira Coelho Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Kingdom Hall of jehovah's Witnesses Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Baptized Member, Volunteerism Covered person's status, relationship or commitment to the institution, entity, business or person named above 9936 S 300 E, Sandy, UT 84070 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. X None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) Member of religious organization and participation in volunteerism for community activities and outreach. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{29}{Date}$ day of $\frac{January}{Month}$, $\frac{2024}{Year}$, 177 W Price Ave (3610 S) Salt Lake City, UT 84115 City or other location, and state or county Kira Coelho Printed Name Kira Coelho (Jan 29, 2024 13:26 MST)

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. Kira Coelho Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Salt Lake Afterschool Regional Network (SLARN) Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Member of the Advisory Board Covered person's status, relationship or commitment to the institution, entity, business or person named above 254 S 600 E #200, Salt Lake City, UT 84102 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) (SLARN) is a afterschool networking and collaborative group to increase professional development and share resources. I'm a member of the Advisory Board to help launch the work forward for the afterschool field, I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{29}{Date}$ day of $\frac{January}{Month}$ 177 W Price Ave (3610 S) Salt Lake City, UT 84115 City or other location, and state or county Kira Coelho Printed Name

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Kone Levaga | | Youth Services | 385-468-4500 |
|------|---|----------------------------|---|--|
| | Covered Person Pos | sition, or County Divis | ion for which you are employed or volunteering | County/Volunteer's Phone |
| | 177 W Price Ave Sc | outh Salt Lake, I | UT 84115 | |
| | Covered Person's County Add | dress/Volunteer's Add | ress | |
| В. | Huntsman Mental H | ealth Institute | | |
| | Outside institution, entity, pri- is required in the above section | vate business or person | n in which the Covered Person has a personal or b | usiness interest for which disclosure |
| | Full Time | | | |
| | Covered person's status, relati | ionship or commitmen | t to the institution, entity, business or person nam | ed above |
| | 501 Chipeta Way, S | alt Lake City, U | JT 84108 | |
| | Address and phone number of | f the institution, entity, | business or person named above | |
| C. | Select the category that apple | ies to yourself and the | outside institution, entity, business or person iden | tified in subsection (B) above: |
| | | · | on for assisting a person or business entity in a trar | ` ' |
| | AMELIA | | ne owner of a substantial interest in a business enti | • |
| | | , agent, employee or ov | wner of a substantial interest in a business entity th | at does or anticipates doing business with |
| | I hold an investment or | | that creates a potential or actual conflict with my al or actual conflict with my public duties. | public duties. |
| | None of the above categ | gories apply. | | |
| D. | | | conflicts of interest identified above, i.e., the nature if necessary. (This disclosure statement will not be | |
| | | Huntsman Mental He | ealth Institute as a Psychiatric Technician in t | ne Adult Unit. |
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| т 1 | | | 1-44-6 | |
| I a | 07 | | hat the foregoing is true and correct. | |
| Sig | gned on the day of _ | January 2024 | -, | |
| | | fonth Year | | |
| at . | Salt Lake City | | | |
| | City or other location, and sta | ite or county | | |
| Κc | one Tevaga | | | |
| Pri | nted Name | | | |
| | Kone Tevaga z Tevaga (Jan 27/2024 00:37 MST) | | | |
| | gnature | | · · · · · · · · | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A. | Kristen Faerber | | Youth Services | 385-468-4500 | | |
|----------|---|---|---|---|--|--|
| . L, | Covered Person | Position, or County Division for | or which you are employed or volunteering | County/Volunteer's Phone | | |
| | 177 W Price Ave | South Salt Lake, UT | 84115 | | | |
| | Covered Person's County | y Address/Volunteer's Address | | | | |
| В. | 4900 S 4620 W, | Kearns, UT 84118 | | | | |
| ٥. | Outside institution, entity is required in the above s | | hich the Covered Person has a personal or bus | iness interest for which disclosure | | |
| | West Kearns Ele | ementary School | | | | |
| | Covered person's status, | relationship or commitment to the | ne institution, entity, business or person named | above | | |
| | Paraprofessiona | l | | | | |
| | Address and phone numb | per of the institution, entity, busing | ness or person named above | | | |
| C. | Select the category that | applies to yourself and the outsi | de institution, entity, business or person identif | ied in subsection (B) above | | |
| | | | assisting a person or business entity in a transa | ` ' | | |
| | | | ner of a substantial interest in a business entity | - · · · · · · · · · · · · · · · · · · · | | |
| | Lake County. | | | _ | | |
| | I am an officer, directly. | ector, agent, employee or owner | of a substantial interest in a business entity that | does or anticipates doing business with | | |
| | I hold an investmen | nt or other financial interest that | creates a potential or actual conflict with my p | ublic duties. | | |
| | | | actual conflict with my public duties. | | | |
| | None of the above | • | | | | |
| D. | Give a detailed descript: entity or person with th is completed.) | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is convoleted.) | | | | |
| | | sor during this time. I work as | entary School 1 hour a week and Kyle Cho a Coordinator of ASP at West Kearns Ele | | | |
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| Ιd | • | alty under the law of Utah that th | e foregoing is true and correct, | | | |
| Si | gned on the $\frac{5}{2}$ day | of February , 2024 , | | | | |
| | Date | Month Year | | | | |
| at. | Salt Lake County | | _ | | | |
| | City or other location, an | nd state or county | | | | |
| Kr | isten Faerber | | | | | |
| Pr | nted Name | | - | | | |
| <u>l</u> | Kriston Faerber | _ | | | | |
| | en raeroer (red 5, 2024 10:12 MS1) gnature | | • | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| _{A.} Ma | aggie Depain | | Youth Services | 385-468 - 4500 |
|------------------|--|--|--|--|
| | ered Person | Position, or County Division for | or which you are employed or volunteering | County/Volunteer's Phone |
| 17 | 7 W Price Ave | South Salt Lake, UT | 84115 | |
| Cove | ered Person's County | y Address/Volunteer's Address | | No to |
| _{B.} Ma | agna United C | TC | | |
| Outs | ide institution, entity quired in the above s | | which the Covered Person has a personal or business | s interest for which disclosure |
| Me | ember | | | |
| Cove | ered person's status, | relationship or commitment to t | he institution, entity, business or person named abo | ove |
| 17 | 7 W. Price Ave | e, Salt Lake, UT | | |
| Addı | ress and phone numb | per of the institution, entity, busi | ness or person named above | |
| C. Sele | ect the category that | applies to yourself and the outsi | de institution, entity, business or person identified | in subsection (B) above: |
| | • | | r assisting a person or business entity in a transactic | ` ' |
| | • | | mer of a substantial interest in a business entity tha | - |
| است | Lake County. | | | _ |
| | Salt Lake County. | ector, agent, employee or owner | of a substantial interest in a business entity that doe | s or anticipates doing business wit |
| | | | creates a potential or actual conflict with my publi | c duties. |
| | _ | _ | actual conflict with my public duties. | |
| | None of the above | | | |
| enti | ve a detailed descripti ity or person with the completed.) | ion of the actual or potential conf e County. Use more sheets if ne | dicts of interest identified above, i.e., the nature of cessary. (This disclosure statement will not be accessary. | the relationship of each business epted as valid unless this section |
| | ember of Magna Ur | ntied CTC. | | |
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| I declare | e under criminal pena | alty under the law of Utah that the | ne foregoing is true and correct. | |
| Signed o | on the 29 | of, 2024 | | |
| Signed (| Date day | Month 'Year' | | |
| Magr | na, UT | | | |
| at | or other location, an | d state or county | | |
| | e DeSpain | | | |
| Printed 1 | · | | - | |
| _1/s | Oi Din | _ | | |
| Signatur | Spain (Jan 29, 2024 09:43 MST) re | | - | |
| Signatur | re | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

| | der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) |
|-----|---|
| Α. | Viviana Dominguez (Maria Viviana) Youth Services |
| A. | Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone |
| | 177 Price Ave |
| | Covered Person's County Address/Volunteer's Address |
| B. | Mi Preferida Radio Station 104.7 FM |
| | Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section |
| | Announcer |
| | Covered person's status, relationship or commitment to the institution, entity, business or person named above |
| | 189 N Hwy 89 Suite-C 112 North Salt Lake |
| | Address and phone number of the institution, entity, business or person named above |
| C. | Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: |
| | I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. |
| | I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. |
| | I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. |
| | I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. |
| | I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section |
| | is completed.) Volunteer announcer in the radio program "Periodismo Independiente" |
| | |
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| | |
| | |
| Ιċ | declare under criminal penalty under the law of Utah that the foregoing is true and correct. |
| e: | igned on the 31 day of January , 2024 , |
| 51 | Date Month , Year , |
| | Salt Lake City |
| at. | City or other location, and state or county |
| Vi | iviana M. Dominguez |
| | inted Name |
| | Viviana Dominguez |
| | ana Dominguez (Jan 31. 202¥13:39 MST) Ignature |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

| Unc und | ler the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, er penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) |
|------------|--|
| | Viviana Dominguez (Waria Viviana) Ut Youth Semices |
| Α. | Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone |
| | 177 Price Ave |
| | Covered Person's County Address/Volunteer's Address |
| В. | Centro Dihemec |
| | Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section |
| | 3441 S Decker Lake Dr Suite 220, West Valley |
| | Covered person's status, relationship or commitment to the institution, entity, business or person named above |
| | Workshop presentation and Inspirational Speaker |
| | Address and phone number of the institution, entity, business or person named above |
| C. | Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: |
| | I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. |
| | I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. |
| | I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with |
| | Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. |
| | None of the above categories apply. |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) |
| | Workshop presentation and Inspirational Speaker |
| | |
| | |
| | |
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| | |
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| | |
| | eclare under criminal penalty under the law of Utah that the foregoing is true and correct. |
| Sig | ned on the 31 day of Month , Year , |
| at _ | Salt Lake City |
| aı_ | City or other location, and state or county |
| Viv | riana M. Dominguez |
| Pri | nted Name |
| V | Viviana Dominguez |
| Sig | nature |

Marita Vi (Jan 19, 2024 05:34 MST)

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. Marita Vi Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address **AFSCME** B. Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Chief Steward Covered person's status, relationship or commitment to the institution, entity, business or person named above 2261 S Redwood Rd, Salt Lake City, UT 84119 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I am the chief steward for AFSCME at Salt Lake County Youth Services, I help other union members at Youth Services as well as Aging Services with questions about services offered by AFSCME and point them in the directions of a representative that can discuss next steps in solving issues. I also recruit new members into joining AFSCME if the services they provide is a benefit to the new members. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{19}{Date}$ day of $\frac{January}{Month}$ Salt Lake City, Utah City or other location, and state or county Marita Vi Printed Name Melle

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A, | Mary Smith | | Youth Services | 385-468-4500 |
|-------------|---|--|--|--|
| <i>t</i> 1. | Covered Person | Position, or County | Division for which you are employed or volunteering | County/Volunteer's Phone |
| | 177 W Price Av | ve South Salt La | ke, UT 84115 | |
| | Covered Person's Cou | nty Address/Volunteer' | s Address | |
| В. | Central 9th You | uth Coalition | | |
| D. | Outside institution, en is required in the abov | | person in which the Covered Person has a personal or busi | ness interest for which disclosure |
| | Board Member | and Youth Invo | lvement Workgroup Member | |
| | Covered person's statu | ıs, relationship or comn | nitment to the institution, entity, business or person named | above |
| | 208 West Harv | ey Milk Blvd, Sa | ılt Lake City, UT 84101 | |
| | Address and phone nu | mber of the institution, | entity, business or person named above | |
| <u></u> | G-1 | 41! 416 | and also a constant to a street and a constant to a street and a stree | to 4 to small construction (TO) - 1 |
| C. | | | nd the outside institution, entity, business or person identif | |
| | 2. 3.2. 3. | _ | ensation for assisting a person or business entity in a transa | - |
| | I am an officer, the Lake County. | director, agent, employe | ee or the owner of a substantial interest in a business entity | that is subject to the regulation of Sal |
| | | | e or owner of a substantial interest in a business entity that | does or anticipates doing business wit |
| | | | nterest that creates a potential or actual conflict with my pu | ıblic duties. |
| | - | _ | otential or actual conflict with my public duties. | |
| | None of the abo | ve categories apply. | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>) | | | |
| | I serve as an elect | ed Board Member and riolence amongst Salt | d member of the Youth Involvement Workgroup seek Lake City youth. | ing to reduce risks of drug |
| | | | | |
| | İ | | | |
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| Ιć | leclare under criminal p | enalty under the law of | Utah that the foregoing is true and correct. | |
| Si | gned on the 24 | day of, | 2024 | |
| | Date | Month | Year ' | |
| a.t | Salt Lake City, Utah | | | |
| at | City or other location, | and state or county | | |
| М | ary Smith | | | |
| | inted Name | | | |
| | ary Smith | | | |
| - | gnature | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Mary Smith | Y | outh Services | 385-468-4500 |
|----|--|---|---|---|
| | Covered Person | • | which you are employed or volunteering | County/Volunteer's Phone |
| | | e South Salt Lake, UT 8 | 4115 | |
| | | nty Address/Volunteer's Address | | |
| В. | | Youth Prevention Coalitie | | |
| | Outside institution, entire is required in the above | | nich the Covered Person has a personal or bus | iness interest for which disclosure |
| | Youth Advisor | | | |
| | Covered person's statu | s, relationship or commitment to the | e institution, entity, business or person named | above |
| | Magna, UT - Ma | agnaUnitedCTC@gmail | .com | |
| | Address and phone nur | nber of the institution, entity, busin | ess or person named above | <u> </u> |
| C. | Select the category the | at applies to yourself and the outsid | e institution, entity, business or person identif | fied in subsection (B) above: |
| | I receive or have | agreed to receive compensation for | assisting a person or business entity in a transa | action involving Salt Lake County. |
| | I am an officer, d Lake County. | irector, agent, employee or the own | er of a substantial interest in a business entity | that is subject to the regulation of Salt |
| | I am an officer, d Salt Lake County | | f a substantial interest in a business entity that | does or anticipates doing business with |
| | I hold an investm | ent or other financial interest that c | reates a potential or actual conflict with my petual conflict with my public duties. | ublic duties. |
| | - | e categories apply. | promote name and promote announce | |
| D. | | | icts of interest identified above, i.e., the nature essary. (This disclosure statement will not be | |
| | | visor for Magna United CTC's Yo youth can develop leadership s | outh Coalition. I help recruit youth, set age kills and serve their community. | endas, and foster a safe |
| | | | | |
| Ι¢ | declare under criminal pe | enalty under the law of Utah that the | foregoing is true and correct. | |
| Si | gned on the 24 Date | ay of January , 2024 , Year , | | |
| at | Salt Lake City, UT | | | |
| aı | City or other location, | and state or county | | |
| M | ary Smith | | | |
| Pr | inted Name | | | |
| m | lary Smith | | | |
| Si | gnature | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| Δ | Mary Smith | | Youth Services | 385-468-4500 |
|----|---|-------------------------------------|---|---|
| 1. | Covered Person | Position, or County Divis | sion for which you are employed or volunteering | County/Volunteer's Phone |
| | 177 W Price Ave | South Salt Lake, | UT 84115 | |
| | Covered Person's Count | y Address/Volunteer's Add | ress | |
| R | The Point Churc | :h | | |
| ٠, | Outside institution, entities required in the above | | n in which the Covered Person has a personal or bus | iness interest for which disclosure |
| | Volunteer | | | |
| | Covered person's status | , relationship or commitmer | nt to the institution, entity, business or person named | above |
| | 5133 Heath Ave | Kearns, UT 84118 | 3 | |
| | Address and phone num | ber of the institution, entity | , business or person named above | |
| C. | Select the category tha | t applies to yourself and the | outside institution, entity, business or person identif | ied in subsection (B) above: |
| | I receive or have a | greed to receive compensati | ion for assisting a person or business entity in a transa | ction involving Salt Lake County. |
| | I am an officer, di | rector, agent, employee or t | he owner of a substantial interest in a business entity | that is subject to the regulation of Salt |
| | I am an officer, din Salt Lake County. | - | wner of a substantial interest in a business entity that | - |
| | | | t that creates a potential or actual conflict with my prial or actual conflict with my public duties. | ablic duties. |
| | None of the above | categories apply. | | |
| D. | | | Il conflicts of interest identified above, i.e., the nature is if necessary. (This disclosure statement will not be | |
| | | | ng adult groups. I lead a team of volunteers to deep have a space where they belong and are su | |
| | | | | |
| Ιc | - | • | that the foregoing is true and correct. | |
| Si | gned on the Date | y of January , 2024 Month , Year | _, | |
| | Salt Lake City, UT | | | |
| at | City or other location, a | nd state or county | | |
| М | lary Smith | | | |
| Pr | inted Name | | | |
| m | ary Smith | | | |
| Si | onature | | | |

Mary Smith Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. Mary Smith Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Utah Black Student Union Alliance Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Mentor Covered person's status, relationship or commitment to the institution, entity, business or person named above Meetings at 178 E 5300 S, Murray, UT 84107 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) Attend quarterly meetings to provide support and foster a connection to services offered by various County departments. I declare under criminal penalty under the law of Utah that the foregoing is true and correct, Signed on the $\frac{24}{Date}$ day of $\frac{January}{Month}$ Salt Lake City, Utah City or other location, and state or county Mary Smith Printed Name

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Mina Koplin 385-468-4541 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 West Price Ave Covered Person's County Address/Volunteer's Address Division of Child and Family Services Child Welfare Improvement Council (CWIC) Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Past president and member of the council Covered person's status, relationship or commitment to the institution, entity, business or person named above on-line meetings at this time 801-538-4100 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I am the past president and voting member of the CWIC. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the SLC City or other location, and state or county Mina Koplin Printed Name

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. Penelope Corpus-Garcia Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address The Essential Dentist Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Dental Assistant Covered person's status, relationship or commitment to the institution, entity, business or person named above 1364 S pleasant grove Blvd. Unit 300, Pleasant Grove UT. Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) none Dental assistant. no conflict whyereh services I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{22}{Date}$ day of $\frac{January}{Month}$ South salt Lake, Utah City or other location, and state or county penelope Helena Corpus Garcia Printed Name Penelope Corpus Garcia

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

A. Sharami Martinez

Youth Services

385-468-4500

| 1. | | 000 100 1000 |
|---|---|---|
| Covered Person | Position, or County Division for which you are employed or volunteering | County/Volunteer's Phone |
| 177 W Price A | ve South Salt Lake, UT 84115 | |
| Covered Person's Co | unty Address/Volunteer's Address | |
| The Phoenix F | Recovery Center | |
| Outside institution, e is required in the abo | ntity, private business or person in which the Covered Person has a personal or busin ve section | ness interest for which disclosure |
| Employee | | |
| Covered person's sta | tus, relationship or commitment to the institution, entity, business or person named a | bove |
| 489 S Jordan | Pkwy Suite 400, South Jordan, UT 84095 (801) 438-318 | 35 |
| Address and phone n | umber of the institution, entity, business or person named above | |
| C. Select the category | that applies to yourself and the outside institution, entity, business or person identifie | ed in subsection (B) above: |
| | re agreed to receive compensation for assisting a person or business entity in a transac | , , |
| I am an officer, Lake County. | director, agent, employee or the owner of a substantial interest in a business entity to | hat is subject to the regulation of Sa |
| I am an officer, Salt Lake Cour | director, agent, employee or owner of a substantial interest in a business entity that d | loes or anticipates doing business w |
| I hold an invest | tment or other financial interest that creates a potential or actual conflict with my pul al interest that creates a potential or actual conflict with my public duties. | blic duties. |
| | ove categories apply. | |
| D. Give a detailed desc entity or person wit is completed.) | ription of the actual or potential conflicts of interest identified above, i.e., the nature of the County. Use more sheets if necessary. (This disclosure statement will not be actually the county.) | of the relationship of each business eccepted as valid unless this section |
| | who are currently receiving treatment for substance abuse. I also work with treatment for their mental health. | adults in the same facility |
| | | |
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| | , | |
| | | |
| | | |
| | penalty under the law of Utah that the foregoing is true and correct. | |
| Signed on the 23 | day of January , 2024 , Month , Year , | |
| | | |
| South Salt Lake City | | |
| City or other location | , and state or county | |
| Sharami Martinez | | |
| Printed Name | | |
| Sharami Martin | | |
| harami Martinez (Jan 23, 2024 09% Signature | (M21) | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| Taulia Van der beek | Youth Services | 385-468-4500 |
|--|---|---|
| Covered Person Position, or Covered Person | County Division for which you are employed or volunteering | County/Volunteer's Phone |
| 177 W Price Ave South Sa | alt Lake, UT 84115 | |
| Covered Person's County Address/Vol | unteer's Address | |
| | Delta Airlines | |
| Outside institution, entity, private busing | ness or person in which the Covered Person has a personal or bus | siness interest for which disclosure |
| is required in the above section | Sea Corn al Mallalanca | |
| 0 1 1 1 1 1 1 1 1 | SCA SONAL EMPLOYEE r commitment to the institution, entity, business or person named | T. I. |
| Covered person's status, relationship of | 9925 S L 10 E | 1 above |
| Address and above acception of the institution | 1000 100 1000 100 100 100 100 100 100 1 | |
| Address and phone number of the instit | tution, entity, business or person named above | |
| Select the category that applies to you | rself and the outside institution, entity, business or person identi | fied in subsection (B) above: |
| I receive or have agreed to receive | e compensation for assisting a person or business entity in a trans | action involving Salt Lake County. |
| I am an officer, director, agent, en Lake County. | imployee or the owner of a substantial interest in a business entity | y that is subject to the regulation of Sa |
| | nployee or owner of a substantial interest in a business entity tha | t does or anticipates doing business w |
| Salt Lake County. | | |
| | uncial interest that creates a potential or actual conflict with my pates a potential or actual conflict with my public duties. | outlic duties. |
| None of the above categories app | ly. | |
| Give a detailed description of the actual | al or potential conflicts of interest identified above, i.e., the natur | e of the relationship of each business |
| entity or person with the County. Use | e more sheets if necessary. (This disclosure statement will not be | |
| is completed.) None | b of | 1 1 M Caral |
| seasmal empl | lyee w/Delta, no conflict a | J yourn services |
| Control of the contro | | 7 0 |
| | | |
| | | |
| | | |
| | | |
| | | |
| declare under criminal penalty under the | law of Utah that the foregoing is true and correct. | |
| 7 | | |
| Signed on the Date day of Month | ······································ | |
| Sandy, Utah, United States of Amer | ica | |
| City or other location, and state or cou | | |
| | * | |
| Faulia van der Beek Frinted Name | | |
| Taulia Van Der Beek | | |
| aulia Van Der Beek (Feb 7, 2024 10:53 MST) | | |
| Signature | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

| Un unc | ler penalties of perjury, make the following stateme | loyees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 19 ent regarding my personal or business interest. (<i>Type</i> e | 53 as amended, I, the undersigned, or print all information.) |
|-----------|---|---|--|
| A. | Andrew Aragon (Timothy Aragon | Youth Services | 385-468-4500 |
| | | vision for which you are employed or volunteering | County/Volunteer's Phone |
| | 177 W Price Ave South Salt Lake | , UT 84115 | |
| | Covered Person's County Address/Volunteer's Ad | ddress | |
| В. | Salt Lake City School District | | |
| | Outside institution, entity, private business or persis required in the above section | son in which the Covered Person has a personal or bus | iness interest for which disclosure |
| | Full-time school social worker | | |
| | Covered person's status, relationship or commitm | ent to the institution, entity, business or person named | above |
| | 465 South 400 East, Suite 300; 86 | 01-578-8599 | |
| | Address and phone number of the institution, entire | ty, business or person named above | <u> </u> |
| C. | Select the category that applies to yourself and the | ne outside institution, entity, business or person identif | ied in subsection (B) above: |
| | <u> </u> | ation for assisting a person or business entity in a transa | ` ' |
| | | the owner of a substantial interest in a business entity | • |
| | | owner of a substantial interest in a business entity that | does or anticipates doing business with |
| | I hold an investment or other financial interest | est that creates a potential or actual conflict with my p | ublic duties. |
| | Account | ntial or actual conflict with my public duties. | |
| | None of the above categories apply. | | |
| D. | Give a detailed description of the actual or potent entity or person with the County. Use more sheet is completed.) | cial conflicts of interest identified above, i.e., the nature ets if necessary. (This disclosure statement will not be | of the relationship of each business accepted as valid unless this section |
| | I work as a school social worker in two diffe | etween my positions at the Salt Lake City School rent high schools and there is no overlap with Sa lls, and none of the students I meet with are in DC County. | t Lake County. I do individual |
| Ιd | eclare under criminal penalty under the law of Utal | h that the foregoing is true and correct. | |
| Çi. | gned on the 27 day of January 202 | .4 | |
| ΩŲ | Date Month Year | • | |
| | Salt Lake City, UT | | |
| at. | City or other location, and state or county | | |
| Ar | ndrew Aragon | | |
| | nted Name | | |
| | | | |
| | 2001 (Jan 27, 2024 01:45 MST) 2004 (Jan 27, 2024 01:45 MST) | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. Uinise Tu'avao | Youth Services | 385-468-4500 | | |
|---|---|---|--|--|
| | County Division for which you are employed or volunteering | County/Volunteer's Phone | | |
| 177 W Price Ave South S | alt Lake, UT 84115 | | | |
| Covered Person's County Address/Vo | lunteer's Address | | | |
| B. Volunteers of America - U | Itah | | | |
| | iness or person in which the Covered Person has a personal or bus | siness interest for which disclosure | | |
| Support Services Manage | er | | | |
| Covered person's status, relationship | or commitment to the institution, entity, business or person named | d above | | |
| 888 S 400 W Salt Lake C | ity, UT 84101 | | | |
| Address and phone number of the inst | itution, entity, business or person named above | | | |
| C. Select the category that applies to yo | ourself and the outside institution, entity, business or person identi | fied in subsection (B) above: | | |
| | ve compensation for assisting a person or business entity in a trans- | | | |
| | employee or the owner of a substantial interest in a business entity | (27.0) | | |
| | employee or owner of a substantial interest in a business entity that | t does or anticipates doing business with | | |
| | nancial interest that creates a potential or actual conflict with my p | public duties. | | |
| | eates a potential or actual conflict with my public duties. | | | |
| None of the above categories ap | ply. | | | |
| entity or person with the County. U | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section</i> | | | |
| is completed.) I work with youth in a similar age | group and clients might access both services. | | | |
| , | | | | |
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| I dealers and an animinal monalty and as the | e law of Utah that the foregoing is true and correct. | | | |
| CONTRACTOR OF A CONTRACTOR CONTR | 2010-2010 - 2010 | | | |
| Signed on the $\frac{20}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$ | , 2024 , Year , | | | |
| Salt Lake City, Utah | Total | | | |
| City or other location, and state or co | unty | | | |
| Uinise Tu'avao | | | | |
| Printed Name | | | | |
| Vint Janaa | | | | |
| unise i ii ayao (Jan 20, 2024 08:11 MST) | | | | |

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| Alexus Averett | Youth Services | 385-468-4500 | | |
|---|---|--------------------------------------|--|--|
| | County Division for which you are employed or volunteering | County/Volunteer's Phone | | |
| 177 W Price Ave South Sa | alt Lake, UT 84115 | | | |
| Covered Person's County Address/Vol- | unteer's Address | 7 | | |
| Maverick center | | | | |
| Outside institution, entity, private busing is required in the above section | ness or person in which the Covered Person has a personal or business | iness interest for which disclosure | | |
| Guest services | | | | |
| Covered person's status, relationship or | commitment to the institution, entity, business or person named | above | | |
| 3200 S Decker Lake Dr. W | /est Valley City, Utah 84119 801-988-8888 | | | |
| Address and phone number of the instit | aution, entity, business or person named above | | | |
| Select the category that applies to you | rself and the outside institution, entity, business or person identif | ied in subsection (B) above: | | |
| | e compensation for assisting a person or business entity in a transa | , , | | |
| | mployee or the owner of a substantial interest in a business entity | | | |
| | nployee or owner of a substantial interest in a business entity that | does or anticipates doing business v | | |
| | ncial interest that creates a potential or actual conflict with my puters a potential or actual conflict with my public duties. | ublic duties. | | |
| None of the above categories app | ly. | | | |
| Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>) | | | | |
| At this job I help guests get to the | r seats, scan their tickets and help out with any questions t en so it should not be to big of a conflict regarding my job | hat they might have about the | | |
| | | | | |
| | | | | |
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| | | | | |
| | | | | |
| declare under criminal penalty under the | law of Utah that the foregoing is true and correct. | | | |
| 2 Eobruary | | | | |
| gned on the Date day of Month | Year, | | | |
| Kearns Utah | | | | |
| City or other location, and state or cou | inty | | | |
| exus Averett | | | | |
| inted Name | | | | |
| xus Averett (Feb 2, 2024 12:52 MST) | | | | |
| ignature | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| _{4.} Amber Elliott | Youth Services | 385-468 - 4500 | | | |
|--|--|---|--|--|--|
| | Position, or County Division for which you are employed or voluntee | ering County/Volunteer's Phone | | | |
| 177 W Price Ave S | South Salt Lake, UT 84115 | | | | |
| Covered Person's County A | Address/Volunteer's Address | • | | | |
| _{3.} Fox Hills Elementa | ary | | | | |
| | orivate business or person in which the Covered Person has a person tion | nal or business interest for which disclosure | | | |
| Para Educator | | | | | |
| Covered person's status, re | lationship or commitment to the institution, entity, business or perso | on named above | | | |
| 3775 W 6020 S Ta | aylorsville, UT. 84129, 385-646-4828 | | | | |
| Address and phone number | of the institution, entity, business or person named above | | | | |
| C. Select the category that ap | plies to yourself and the outside institution, entity, business or perso | on identified in subsection (B) above: | | | |
| | ed to receive compensation for assisting a person or business entity in | , , | | | |
| - | tor, agent, employee or the owner of a substantial interest in a busine | - | | | |
| • | or, agent, employee or owner of a substantial interest in a business en | ntity that does or anticipates doing business wit | | | |
| | or other financial interest that creates a potential or actual conflict w rest that creates a potential or actual conflict with my public duties. | ith my public duties. | | | |
| None of the above ca | tegories apply. | | | | |
| | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | |
| | tor- I teach small groups in the Resource program at Fox Hills | S | | | |
| | | · | | | |
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| | | | | | |
| | | | | | |
| I declare under criminal penalt | y under the law of Utah that the foregoing is true and correct. | | | | |
| Signed on the 30 day o | f, 2024 | | | | |
| Date Date | Month 'Year' | | | | |
| Salt Lake City | | | | | |
| City or other location, and | state or county | | | | |
| Amber Elliott | | | | | |
| Printed Name | | | | | |
| HERD. | | | | | |
| Amber Elliott (Jan 30, 2024 15:45 MST) | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A. | Amy Staley | | Youth Services | 385-468-4500 |
|------------|---|-------------------------|--|--|
| | Covered Person | Position, or Cou | nty Division for which you are employed or volunteering | ng County/Volunteer's Phone |
| | 177 W Price A | ve South Salt I | ₋ake, UT 84115 | |
| | Covered Person's Cou | inty Address/Volunte | er's Address | |
| В. | Granite Schoo | l District | | |
| υ. | Outside institution, en is required in the above | | or person in which the Covered Person has a personal of | or business interest for which disclosure |
| | Teacher | | | |
| | Covered person's state | us, relationship or cor | nmitment to the institution, entity, business or person r | named above |
| | 2500 South St | ate SLC, UT 8 | 4115 385- 646-5000 | |
| | Address and phone nu | mber of the institutio | n, entity, business or person named above | |
| C. | Select the category th | hat annlies to voursel | and the outside institution, entity, business or person i | identified in subsection (D) above |
| Ç, | | | npensation for assisting a person or business entity in a | ` ' |
| | | | byce or the owner of a substantial interest in a business | - |
| | Lake County. | director, agent, empit | yee of the owner of a substantial interest in a business | entity that is subject to the regulation of Sait |
| | I am an officer, Salt Lake Count | | yee or owner of a substantial interest in a business entit | ty that does or anticipates doing business with |
| | | | d interest that creates a potential or actual conflict with | my public duties. |
| | - | | a potential or actual conflict with my public duties. | |
| | | ve categories apply. | | |
| D. | entity or person with | | potential conflicts of interest identified above, i.e., the re sheets if necessary. (This disclosure statement will necessary) | |
| | is completed.) 6th grade teacher | at Copper Hills Elei | mentary | |
| | John grand todano. | | , | |
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| Ic | - | · • | of Utah that the foregoing is true and correct. | |
| Si | gned on the | day of Month | , 2024 | |
| | | Month | Year | |
| at. | Magna, UT | | | |
| | City or other location, | , and state or county | | |
| Αı | my Staley | | | |
| Pr | inted Name | | | |
| | Amy Staley | | | |
| Amy Si- | <u>/ Stavey (Jan 25, 202/4 11:49 MST)</u> on afure | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| Α. | Bailynn McKay | | Youth Services | 385-468-4500 | | | |
|-----|--|-------------------------------------|---|--|--|--|--|
| | Covered Person | Position, or County Division | for which you are employed or volunteering | County/Volunteer's Phone | | | |
| | 177 W Price Ave South Salt Lake, UT 84115 | | | | | | |
| | Covered Person's Coun | ty Address/Volunteer's Address | | | | | |
| В. | • | | Magna Um | ted (TC | | | |
| • | Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure | | | | | | |
| | s required in the above section Well bey | | | | | | |
| | | · | _ · | | | | |
| | Covered person's status, relationship or commitment to the institution, entity, business or person named above | | | | | | |
| | | 1635 W W | ashington Rd, mag | na | | | |
| | Address and phone num | ber of the institution, entity, bus | siness or person named above | | | | |
| C. | Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: | | | | | | |
| | I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. | | | | | | |
| | I am an officer, di Lake County. | rector, agent, employee or the o | wner of a substantial interest in a business entity | that is subject to the regulation of Sal | | | |
| | I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business was Salt Lake County. | | | | | | |
| | I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. | | | | | | |
| | None of the above | e categories apply. | | | | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | | | |
| | Voting member on N | lagna United CTC, No conflic | et e | | | | |
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| I d | leclare under criminal per | nalty under the law of Utah that | the foregoing is true and correct. | | | | |
| Q; | gned on the 25 | y of, 2024 | | | | | |
| וט | Date Date | Month 'Year' | | | | | |
| | Magna, UT | | | | | | |
| at. | City or other location, a | and state or county | | | | | |
| | ailynn McKay | • | | | | | |
| | inted Name | | | | | | |
| | Bailynn McKay | | | | | | |
| | vnn May (Jan 25, 2024 1 <i>f</i> 39 MST) gnature | | <u> </u> | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A. | Ballynn McKay | | Youth Services | 385-468 - 4500 |
|------|--|----------------------------|---|---|
| • •• | Covered Person | Position, or County I | Division for which you are employed or volunteering | County/Volunteer's Phone |
| | 177 W Price Ave | e South Salt Lak | e, UT 84115 | |
| | Covered Person's Count | y Address/Volunteer's | Address | |
| В. | | | USU EXTE | nsion SLCo |
| | | | erson in which the Covered Person has a personal or busi | |
| | is required in the above | section | Youth & family Ea | her has |
| | | | | |
| | Covered person's status, | , relationship or commit | ment to the institution, entity, business or person named | |
| | | | 2001 S Statest, | SLCIUT |
| | Address and phone num | ber of the institution, er | ntity, business or person named above | |
| C. | Select the category that | t applies to yourself and | the outside institution, entity, business or person identifi | ied in subsection (B) above: |
| | I receive or have a | greed to receive comper | nsation for assisting a person or business entity in a transa | ction involving Salt Lake County. |
| | I am an officer, din | rector, agent, employee | or the owner of a substantial interest in a business entity | that is subject to the regulation of Salt |
| | | ector, agent, employee | or owner of a substantial interest in a business entity that | does or anticipates doing business with |
| | I hold an investme | | erest that creates a potential or actual conflict with my putential or actual conflict with my public duties. | ablic duties. |
| | None of the above | categories apply. | • | |
| D. | | | ential conflicts of interest identified above, i.e., the nature | |
| | entity or person with the is completed.) | ne County. Use more sh | neets if necessary. (This disclosure statement will not be a | accepted as valid unless this section |
| | | nd present existing cu | rriculum to Jr. High Students. No conflict. | |
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| Τd | leclare under criminal per | nalty under the law of U | tah that the foregoing is true and correct. | <u></u> |
| | .= | | 024 | |
| Si | gned on the Date | V 0I | ear , | |
| | Magna, UT | | | |
| at. | City or other location, as | nd state or county | | |
| | • | in pain of county | | |
| | ailynn McKay inted Name | | | |
| | mted Name Bailunn McKau | | | |
| Bail | vnn McKay (Jan 25, 2024 12/44 MST) | | | |
| Si | gnature | | | |

Brandon Kerby (Feb 2, 2024 11:31 MST)

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. Brandon Kerby Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Granite School District Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Teacher Covered person's status, relationship or commitment to the institution, entity, business or person named above Cyprus High School 8623 W 3000 S, Magna, UT 84044 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I'm a teacher at Cyprus High School in Granite School District. I also am a facilitator for Magna Yuzawa Educational Exchange. I declare under criminal penalty under the law of Utah that the foregoing is true and correct, $\begin{array}{c} \text{Signed on the} \ \frac{2}{\text{Date}} & \text{day of} \ \frac{\text{February}}{\text{Month}} \end{array}$ Magna, Utah City or other location, and state or county Brandon Kerby Printed Name Brandon Kerby

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Brandi Brothers | | Youth Services | 385-468 - 4500 |
|------|---|---|--|---|
| . 1. | Covered Person | Position, or County Division | on for which you are employed or volunteering | County/Volunteer's Phone |
| | 177 W Price Ave | South Salt Lake, U | T 84115 | |
| | Covered Person's Count | y Address/Volunteer's Addre | 88 | or to the |
| В. | | | granite School Di | MMA |
| ν. | Outside institution, entities required in the above s | section | in which the Covered Person has a personal or b educator | ousiness interest for which disclosure |
| | Covered person's status, | ((~ (~ (~ (~ (~ (~ (~ (~ (~ (| to the institution, entity, business or person name. | ed above |
| | Address and phone num | | ousiness or person named above | |
| C. | Salast the entagent that | capilies to voursalf and the o | utside institution, entity, business or person iden | atified in subsection (D) aboves |
| ٠, | - | | n for assisting a person or business or person iden | ` , |
| | d same | | owner of a substantial interest in a business enti | - , |
| | Lake County. | ector, agent, employee of the | owner of a substantial interest in a desiness end | my that is subject to the regulation of Sai |
| | Salt Lake County. | | ner of a substantial interest in a business entity th | • • |
| | | | hat creates a potential or actual conflict with my or actual conflict with my public duties. | public duties. |
| | None of the above | _ | or actual contract with my public duries. | |
| D. | entity or person with the is completed.) | e County. Use more sheets it | conflicts of interest identified above, i.e., the nate f necessary. (This disclosure statement will not be | |
| | I work for the school | and the county after school | ol program | *** |
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| Ιd | - | • | at the foregoing is true and correct. | |
| Si | gned on the day | y of February , 2024 , Month , Year , | | |
| | Kearns utah | | | |
| at. | City or other location, as | nd state or county | | |
| Br | andi Brothers | | | |
| Pr | inted Name | · · · · · · · · · · · · · · · · · · · | · | |
| | Brandi Brothers | - | | |
| | ndi Brothers (Feb 1, 2024 08:12 MST) Grantura | | | |

Brian Uribe-Bate (Feb 2, 2024 11:35 MST)

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.) Brian Universate
Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Position, or County Division for which you are employed or volunteering Brian Unbe-Bate 177 W Price Ave, SLC, UTSYID Covered Person's County Address/Volunteer's Address Granite School District В. Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section -··· Teacher Covered person's status, relationship or commitment to the institution, entity, business or person named above Address and phone number of the institution, entity, business or person named above Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. X None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I don't believe I have any conflicts of interest I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{2}{\text{Date}}$ day of $\frac{\text{February}}{\text{Month}}$, $\frac{2024}{\text{Year}}$ Sandy City or other location, and state or county Brian Uribe-Bate Printed Name Brian Uribe-Bate

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| Α. | Candace Collins | | Youth Services | 385-468-4500 | | | | |
|------------|--|--|--|--|--|--|--|--|
| • ~- | Covered Person | Position, or County Division | n for which you are employed or volunteering | County/Volunteer's Phone | | | | |
| | 177 W Price Ave | South Salt Lake, U | Т 84115 | | | | | |
| | Covered Person's County | y Address/Volunteer's Addres | es . | | | | | |
| В. | Copper Hills Elei | mentary | | | | | | |
| υ. | Outside institution, entity is required in the above s | | n which the Covered Person has a personal or busin | ess interest for which disclosure | | | | |
| | Teacher | | | | | | | |
| | Covered person's status, | Covered person's status, relationship or commitment to the institution, entity, business or person named above | | | | | | |
| | 7635 west 3715 | South Magna, Utah | 84044 | | | | | |
| | Address and phone numb | per of the institution, entity, b | usiness or person named above | | | | | |
| C. | Select the category that | annlies to yourself and the or | ttside institution, entity, business or person identifie | ed in subsection (B) above: | | | | |
| U. | | | for assisting a person or business entity in a transac | • • | | | | |
| | | - | owner of a substantial interest in a business entity the | , | | | | |
| | Lake County. | cotor, agent, employee or the | owner of a substantial merest in a business entity to | iat is subject to the regulation of Sait | | | | |
| | Salt Lake County. | | er of a substantial interest in a business entity that d | | | | | |
| | | | nat creates a potential or actual conflict with my pul | olic duties. | | | | |
| | - | I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. | | | | | | |
| _ | | | | | | | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | | | | |
| | | Copper Hills Elementary. | | | | | | |
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| Ιd | eclare under criminal pen | alty under the law of Utah tha | t the foregoing is true and correct. | | | | | |
| | - | of, 2024 ,, | | | | | | |
| S1; | gned on the Date | Month , Year | | | | | | |
| | Magna, Utah | | | | | | | |
| at. | City or other location, an | nd state or county | | | | | | |
| C | andace Collins | | | | | | | |
| | nted Name | | | | | | | |
| | Candace Collins | | | | | | | |
| Can Sid | dace Collins (Jan 26, 2024 13:17 MST) on a ture | | | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| Cassie Fish | Youth Services | 385-468-4500 | | | |
|---|---|---------------------------------------|--|--|--|
| Covered Person | Position, or County Division for which you are employed or volunteering | County/Volunteer's Phone | | | |
| 177 W Price Ave | South Salt Lake, UT 84115 | | | | |
| Covered Person's County | Address/Volunteer's Address | | | | |
| * * | Granite School | Matrict | | | |
| Outside institution, entity, is required in the above see | private business or person in which the Covered Person has a personal or buction | usiness interest for which disclosure | | | |
| Public School | teacher | | | | |
| " · · · · · · · · · · · · · · · · · · · | elationship or commitment to the institution, entity, business or person name | ed above | | | |
| 87 | 201 W 770US, Magny, UT | 84044 | | | |
| Address and phone numbe | er of the institution, entity, business or person named above | <u> </u> | | | |
| Select the category that a | pplies to yourself and the outside institution, entity, business or person ident | tified in subsection (B) above: | | | |
| | eed to receive compensation for assisting a person or business entity in a tran | ` ' | | | |
| K-marks | ctor, agent, employee or the owner of a substantial interest in a business enti- | - | | | |
| | ctor, agent, employee or owner of a substantial interest in a business entity the | at does or anticipates doing business | | | |
| | t or other financial interest that creates a potential or actual conflict with my erest that creates a potential or actual conflict with my public duties. | public duties. | | | |
| None of the above ca | ategories apply, | | | | |
| | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed) | | | | |
| | er with Granite School District, and teach full-time at Pleasant Green | Elementary. | | | |
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| eclare under criminal penal | ty under the law of Utah that the foregoing is true and correct. | | | | |
| gned on the 29 | of January , 2024 | | | | |
| Date On the | Month 'Year' | | | | |
| Magna, Utah | | | | | |
| City or other location, and | state or county | | | | |
| ssie Fish | | | | | |
| ited Name | | | | | |
| assio Fish | | | | | |
| e Fish (Jan 31, 2024 15:52 MST) | | | | | |
| nature | | | | | |

Printed Name

ner Brothers (Feb 1, 2024 16:23 MST)

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Christopher Brothers Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure B. is required in the above section Para educator Covered person's status, relationship or commitment to the institution, entity, business or person named above Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. X None of the above categories apply. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section I do not have any conflicts of interest I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{1}{Date}$ day of $\frac{\text{February}}{\text{Month}}$ Kearns, UT City or other location, and state or county Christopher Brothers

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Clair Reichert | Youth Services | 385-468-4500 | | | |
|-------|--|--|---|--|--|--|
| . 3.4 | Covered Person P | osition, or County Division for which you are employed or volunteering | ng County/Volunteer's Phone | | | |
| | 177 W Price Ave S | South Salt Lake, UT 84115 | | | | |
| | Covered Person's County A | ddress/Volunteer's Address | | | | |
| В. | This is the Place H | eritage Park | | | | |
| υ, | Outside institution, entity, p is required in the above sect | rivate business or person in which the Covered Person has a personal ion | or business interest for which disclosure | | | |
| | Employee | | | | | |
| | Covered person's status, rel | ationship or commitment to the institution, entity, business or person i | named above | | | |
| | 8015821847 | | | | | |
| | Address and phone number | of the institution, entity, business or person named above | | | | |
| C. | Select the category that an | plies to yourself and the outside institution, entity, business or person i | identified in subsection (B) above | | | |
| Ç. | | ed to receive compensation for assisting a person or business entity in a | , , | | | |
| | | or, agent, employee or the owner of a substantial interest in a business | | | | |
| | Lake County. | or, agent, employee or the owner of a substantial interest in a business entit | | | | |
| | Salt Lake County. | | | | | |
| | | I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. | | | | |
| | None of the above cat | egories apply. | | | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | | |
| | Work as an employee on weekends - no real conflict of interest. | | | | | |
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| TА | eclare under criminal nenalty | y under the law of Utah that the foregoing is true and correct. | | | | |
| | | | | | | |
| Sig | gned on the Date day of | February 2024 Month Year | | | | |
| | Millcreek, Utah. | THORN W | | | | |
| at - | City or other location, and s | tota au accentu | | | | |
| | City or other location, and s | state or county | | | | |
| | air Reichert | | | | | |
| | nted Name | | | | | |
| | r Asidet A Reichert (Feb 2, 2024 17:17 MST) | | | | | |
| | nature | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| _{A.} Deborah DuPaix | Youth Services | 385-468-4500 | | | | |
|--|--|---|--|--|--|--|
| | or County Division for which you are employed or volunteering | County/Volunteer's Phone | | | | |
| 177 W Price Ave South S | Salt Lake, UT 84115 | | | | | |
| Covered Person's County Address/V | olunteer's Address | | | | | |
| B. Granite School District, k | Kearns Jr High | | | | | |
| | Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section | | | | | |
| Teacher | | | | | | |
| Covered person's status, relationship | or commitment to the institution, entity, business or person named | above | | | | |
| 4040 W Sams Blvd, Kea | rns 84118. 385-646-5200 | | | | | |
| Address and phone number of the inc | stitution, entity, business or person named above | | | | | |
| C. Salast the actorous that applies to ve | course of and the anneals in elieution and the leading and the | ind in miles at in (D) at any | | | | |
| | ourself and the outside institution, entity, business or person identifi | ` ' | | | | |
| - Africa and | ive compensation for assisting a person or business entity in a transa | • | | | | |
| Lake County. | , employee or the owner of a substantial interest in a business entity | that is subject to the regulation of Salt | | | | |
| | employee or owner of a substantial interest in a business entity that | does or anticipates doing business with | | | | |
| | inancial interest that creates a potential or actual conflict with my pu | ablic duties. | | | | |
| <u> </u> | I hold a personal interest that creates a potential or actual conflict with my public duties. | | | | | |
| None of the above categories a | | | | | | |
| | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed</i>) | | | | | |
| I am a paid teacher for Granite | School District. | | | | | |
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| I donlars under griminal nanalty under th | ne law of Utah that the foregoing is true and correct. | | | | | |
| | ~ ~ | | | | | |
| Signed on the 31 day of Januar Date day of Month | Year 'Year' | | | | | |
| Kearns, Utah | | | | | | |
| City or other location, and state or c | county | | | | | |
| Deborah Dupaix | | | | | | |
| Printed Name | | | | | | |
| Deborah DuPaix | | | | | | |
| Signature | | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Youth Services Elisapeta So'oalo 385-468**-**4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address grante School Dist B. Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Afterschool Program Covered person's status, relationship or commitment to the institution, entity, business or person named above Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above; I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I am a full-time employee for Granite School District. I work as a teacher for afterschool program at Pleasant Green elementary.

I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Signed on the 30 day of January , 2024 , Year ,

at Salt Lake City, UT at City or other location, and state or county

Elisapeta Socialo

Elisapeta Socialo

Elisapeta Socialo

Elisapeta Socialo

Elisapeta Socialo

Elisapeta Socialo (Jan 30, 2024 19:56 MST)

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Elysia Nikki Adams | Youth Services | 385-468-4500 | | | |
|-----|---|---|---|--|--|--|
| | Covered Person Position, or Cour | nty Division for which you are employed or volunteering | County/Volunteer's Phone | | | |
| | 177 W Price Ave South Salt Lake, UT 84115 | | | | | |
| | Covered Person's County Address/Volunte | er's Address | | | | |
| В. | Utah State University | | | | | |
| Δ, | Outside institution, entity, private business is required in the above section | or person in which the Covered Person has a personal or bus | iness interest for which disclosure | | | |
| | Facilitator | | | | | |
| | Covered person's status, relationship or commitment to the institution, entity, business or person named above | | | | | |
| | 2001 South State Street | | | | | |
| | Address and phone number of the institution | n, entity, business or person named above | | | | |
| C. | Select the category that applies to yoursel | f and the outside institution, entity, business or person identif | ied in subsection (B) above: | | | |
| | Promised. | mpensation for assisting a person or business entity in a transa | ` ' | | | |
| | y , 40-41 | byee or the owner of a substantial interest in a business entity | • | | | |
| | • | yee or owner of a substantial interest in a business entity that | does or anticipates doing business with | | | |
| | I hold an investment or other financia | al interest that creates a potential or actual conflict with my p | ublic duties. | | | |
| | None of the above categories apply. | I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply | | | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section | | | | | |
| | is completed.) I am a facilitator for the Utah State University's program called Too Good For Drugs/Violence. I teach the program to the students at the After School site at Pleasant Green, Magna. | | | | | |
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| | <u> </u> | | | | | |
| Ιd | | of Utah that the foregoing is true and correct. | | | | |
| Si | gned on the Date day of Month | 2024 'Year' | | | | |
| | Magna, Utah | | | | | |
| at. | City or other location, and state or county | | | | | |
| El | ysia Adams | | | | | |
| Pri | inted Name | | | | | |
| Cl. | ysia Adams | | | | | |
| | gnature | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| _a Emmalee Neibaur | Youth Services | 385-468-4500 | | | |
|---|---|--|--|--|--|
| Covered Person Position, | or County Division for which you are employed or volunteering | County/Volunteer's Phone | | | |
| 177 W Price Ave South | Salt Lake, UT 84115 | | | | |
| Covered Person's County Address/ | Volunteer's Address | | | | |
| The Church of Jesus Ch | rist of Latter Day Saints | | | | |
| · · · · · · · · · · · · · · · · · · · | usiness or person in which the Covered Person has a personal or busi | ness interest for which disclosure | | | |
| Young womens 11-14yr | advisor | | | | |
| Covered person's status, relationship | p or commitment to the institution, entity, business or person named | above | | | |
| 8739 West 3000 South I | Magna Ut 84044 | | | | |
| Address and phone number of the in | stitution, entity, business or person named above | | | | |
| C. Select the category that applies to | yourself and the outside institution, entity, business or person identifi | ied in subsection (B) above: | | | |
| | eive compensation for assisting a person or business entity in a transa | | | | |
| F. Anna. | t, employee or the owner of a substantial interest in a business entity | , | | | |
| Lake County. | • | , , | | | |
| I am an officer, director, agent Salt Lake County. | , employee or owner of a substantial interest in a business entity that | does or anticipates doing business wit | | | |
| February 1 | financial interest that creates a potential or actual conflict with my pu | ablic duties. | | | |
| I hold a personal interest that | I hold a personal interest that creates a potential or actual conflict with my public duties. | | | | |
| None of the above categories | apply. | | | | |
| | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business ntity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | |
| I interact with and help young g | Interact with and help young girls ages 11-14 with their spiritual and physical goals that they set for themselves on a | | | | |
| weekly basis. | | | | | |
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| | | | | | |
| I declare under criminal penalty under t | he law of Utah that the foregoing is true and correct. | | | | |
| Signed on the day of | ry 2024 | | | | |
| Date Cay of Month | Year 'Year | | | | |
| Magna Utah | | | | | |
| City or other location, and state or | county | | | | |
| Emmalee Neibaur | | | | | |
| Printed Name | | | | | |
| Emples Nellows | | | | | |
| Emmalee Neibaur (Jan 29, 2024 14:24 MST) | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A. | Emmalee Neibaur | Youth Services | 385-468-4500 | | | | |
|------------|--|--|---|--|--|--|--|
| 1. | Covered Person Position, or Cor | unty Division for which you are employed or volunteering | County/Volunteer's Phone | | | | |
| | 177 W Price Ave South Salt | Lake, UT 84115 | | | | | |
| | Covered Person's County Address/Volunt | eer's Address | | | | | |
| В. | Granite School District | | | | | | |
| יט | Outside institution, entity, private business is required in the above section | Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure | | | | | |
| | Special Ed Inclusion Paraec | ducator | | | | | |
| | Covered person's status, relationship or co | ommitment to the institution, entity, business or person named | above | | | | |
| | 8201 2700 S. Magna Ut (3 | 85)-646-4972 | | | | | |
| | Address and phone number of the instituti | on, entity, business or person named above | | | | | |
| C. | Select the category that applies to yourse | If and the outside institution, entity, business or person identifi | ied in subsection (B) above: | | | | |
| ٠. | | ompensation for assisting a person or business entity in a transa | , , | | | | |
| | 2 money. | loyee or the owner of a substantial interest in a business entity | - | | | | |
| | Lake County. | loyee of the owner of a substantial interest in a dustices entity | that is subject to the regulation of Balt | | | | |
| | R 3 | oyee or owner of a substantial interest in a business entity that | does or anticipates doing business with | | | | |
| | Salt Lake County. I hold an investment or other finance | ial interest that creates a potential or actual conflict with my pu | ıblic duties. | | | | |
| | | s a potential or actual conflict with my public duties. | | | | | |
| | None of the above categories apply. | | | | | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | | | |
| | | g students with both academic and behavioral issues. As ata on this students. At the end of the day, I report back when needed. | | | | | |
| | eclare under criminal penalty under the law gned on the 29 Date day of Month | of Utah that the foregoing is true and correct. - '2024 - 'Year' | | | | | |
| at | Magna, Utah | | | | | | |
| at . | City or other location, and state or county | / | | | | | |
| Ër | nmalee Neibaur | | | | | | |
| | nted Name | | | | | | |
| | Estrale 1 | | | | | | |
| Emn Sie | nalee Neibaur (Jan 29, 2024 14:25 MST) Qnature | | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A. | Heidi Sartori | | Youth Services | 385-468-4500 | | |
|--------------|---|------------------------|--|--|--|--|
| | Covered Person | Position, or Cou | nty Division for which you are employed or volunteeri | ng County/Volunteer's Phone | | |
| | 177 W Price Ave South Salt Lake, UT 84115 | | | | | |
| | Covered Person's Coun | ty Address/Volunt | eer's Address | | | |
| В. | Granite School I | District | | | | |
| | Outside institution, entities required in the above | | or person in which the Covered Person has a personal | or business interest for which disclosure | | |
| | Para Educator | | | | | |
| | Covered person's status | , relationship or co | mmitment to the institution, entity, business or person | named above | | |
| | 4040 west Sams | s blvd | | | | |
| | Address and phone num | ber of the institution | on, entity, business or person named above | | | |
| C. | Select the category tha | t annlies to vourse | If and the outside institution, entity, business or person | identified in subsection (R) above | | |
| C. | | | empensation for assisting a person or business entity in a | , , | | |
| | | _ | oyee or the owner of a substantial interest in a business | , , , , , , , , , , , , , , , , , , , | | |
| | Lake County. | rector, agent, emp | oyee of the owner of a substantial interest in a business | sentity that is subject to the regulation of San | | |
| | E | | oyee or owner of a substantial interest in a business enti | ty that does or anticipates doing business wit | | |
| | Salt Lake County. I hold an investment | | al interest that creates a potential or actual conflict with | n my public duties. | | |
| | I hold a personal interest that creates a potential or actual conflict with my public duties. | | | | | |
| | None of the above | e categories apply. | | | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section | | | | | |
| | is completed.) I have no conflicts of interest. | | | | | |
| | I have no conflicts o | i interest. | | | | |
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| I de | - | • | of Utah that the foregoing is true and correct. | | | |
| Sig | ned on the da | y of | 2024 | | | |
| | Date | Month | Year | | | |
| at _ | Kearns, Ut | | | | | |
| (| City or other location, a | and state or county | | | | |
| He | idi Sartori | | | | | |
| Pri | nted Name | | | | | |
| | teidi Sartori | | | | | |
| Heidi Sig | Sartori (Jan 31, 2024 22:18 MST) nature | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| _{a.} Jaimie Haydocł | (| Youth Services | 385-468-4500 | | |
|--|--|---|--------------------------------------|--|--|
| Covered Person | Position, or County Division | n for which you are employed or volunteering | County/Volunteer's Phone | | |
| 177 W Price Av | re South Salt Lake, U⁻ | Т 84115 | | | |
| Covered Person's Cour | nty Address/Volunteer's Addres | s | | | |
| B. Copper Hills Ele | ementary | | | | |
| | | n which the Covered Person has a personal or bus | siness interest for which disclosure | | |
| Literacy coach | | | | | |
| Covered person's statu | s, relationship or commitment to | o the institution, entity, business or person named | l above | | |
| 7635 West Was | shingoton Road Magn | a, UT 84044 385-646-4792 | | | |
| Address and phone nur | mber of the institution, entity, bu | usiness or person named above | | | |
| C. Select the category the | at annlies to yourself and the ou | tside institution, entity, business or person identi | fied in subsection (R) above | | |
| | | for assisting a person or business entity in a trans | | | |
| The stage of the stage of | _ | owner of a substantial interest in a business entity | • | | |
| Lake County. | | · | · - | | |
| Salt Lake County | <i>i</i> . | er of a substantial interest in a business entity tha | | | |
| | | nat creates a potential or actual conflict with my portion actual conflict with my public duties. | oublic duties. | | |
| 2 | I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. | | | | |
| E. Carrier | | 0: 4 - 6: 4 - 4: 1 - 4: 6 - 1 - 1 - 4: 4 - 4: 4 | | | |
| | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | |
| | Copper Hills Elementary | | | | |
| | | | | | |
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| | | | | | |
| I declare under criminal pe | enalty under the law of Utah tha | t the foregoing is true and correct. | | | |
| • | ay of, 24 | | | | |
| Signed on the Date d | ay of,, Year, | | | | |
| Magna Utah | | | | | |
| City or other location, | and state or county | | | | |
| Jaimie Haydock | | | | | |
| Printed Name | | | | | |
| Jaimie Haydock | | | | | |
| Jaimie Haydock (Jan 26, 2024 13:39 MS Signature | .T) | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| _{A.} Jaimie Haydock | Youth Services | 385-468-4500 | | | | |
|--|--|--|--|--|--|--|
| | County Division for which you are employed or volunteering | County/Volunteer's Phone | | | | |
| 177 W Price Ave South Sa | alt Lake, UT 84115 | | | | | |
| Covered Person's County Address/Vol | lunteer's Address | | | | | |
| B. WGU Western | n governors University | | | | | |
| Outside institution, entity, private busing is required in the above section | ness or person in which the Covered Person has a personal or busi | ness interest for which disclosure | | | | |
| Evaluator | | | | | | |
| Covered person's status, relationship o | or commitment to the institution, entity, business or person named | above | | | | |
| 4001 South 700 East Salt | Lake City UT 84107 801-2743280 | | | | | |
| Address and phone number of the insti | tution, entity, business or person named above | | | | | |
| C. Salaat the astronomy that applies to you | modificand the contribe in stitution antity. It will be seen in the state of the st | (-1'11' (D) 1 | | | | |
| | urself and the outside institution, entity, business or person identifi | 8 16 | | | | |
| | re compensation for assisting a person or business entity in a transa | ne en en en en en en en en en en en en e | | | | |
| Lake County. | employee or the owner of a substantial interest in a business entity | that is subject to the regulation of Sa | | | | |
| | mployee or owner of a substantial interest in a business entity that | does or anticipates doing business w | | | | |
| I hold an investment or other final | ancial interest that creates a potential or actual conflict with my pu | ıblic duties. | | | | |
| | I hold a personal interest that creates a potential or actual conflict with my public duties. | | | | | |
| None of the above categories app | ply. | | | | | |
| Give a detailed description of the actu- entity or person with the County. Us is completed.) | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section</i> | | | | | |
| Evaluation of student Paper | | | | | | |
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| I declare under criminal penalty under the | law of Utah that the foregoing is true and correct. | | | | | |
| Signed on the day of | 24 | | | | | |
| Date Month | Year, | | | | | |
| Magna UT | | | | | | |
| City or other location, and state or cou | unty | | | | | |
| Jaimie Haydock | | | | | | |
| Printed Name | | | | | | |
| Dainie Haydock | | | | | | |
| Signature | | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Jennianne Vaai | | Youth Services | 385-468-4500 | | | |
|-------|--|--|--|--|--|--|--|
| • • • | Covered Person | Position, or County | Division for which you are employed or volunteering | County/Volunteer's Phone | | | |
| | 177 W Price Ave | South Salt La | ke, UT 84115 | | | | |
| | Covered Person's Count | Covered Person's County Address/Volunteer's Address | | | | | |
| В. | Pleasant Green | Elementary | | | | | |
| υ. | Outside institution, entity is required in the above s | | person in which the Covered Person has a personal or b | usiness interest for which disclosure | | | |
| | Teacher | | | | | | |
| | Covered person's status, | relationship or comm | nitment to the institution, entity, business or person nam | ed above | | | |
| | 8201 West 2700 | South, Magna | ı, UT 84044 | | | | |
| | Address and phone num | ber of the institution, | entity, business or person named above | | | | |
| C. | Select the category that | applies to yourself at | nd the outside institution, entity, business or person iden | tified in subsection (B) above: | | | |
| | | | ensation for assisting a person or business entity in a tran | • • • | | | |
| | | | e or the owner of a substantial interest in a business enti | • | | | |
| | • | ector, agent, employe | e or owner of a substantial interest in a business entity th | at does or anticipates doing business with | | | |
| | I hold an investme | I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. | | | | | |
| | X None of the above | categories apply. | • | | | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | | | |
| | I work as a volunteer | for Girls on the Ru | n at Pleasant Green Elementary. | | | | |
| Ιά | leclare under criminal pen | alty under the law of | Utah that the foregoing is true and correct. | ······································ | | | |
| ç: | gned on the 29 day | y of January | 2024 | | | | |
| 31 | Date Date | Month 'S | Year | | | | |
| at. | Magna, UT | | | | | | |
| at. | City or other location, as | nd state or county | | | | | |
| Je | ennianne Matautia Vaai | | | | | | |
| Pr | inted Name | | | | | | |
| _d | Jennianne Vaai | | | | | | |
| Si | gnature | | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

A. Jillian Newman Youth Services 385-468-4500

| Α. | |
|-----|--|
| | Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone |
| | 177 W Price Ave South Salt Lake, UT 84115 |
| | Covered Person's County Address/Volunteer's Address |
| В. | University of Utah |
| , | Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section |
| | Employee |
| | Covered person's status, relationship or commitment to the institution, entity, business or person named above |
| | 201 Presidents' Cir, Salt Lake City, UT 84112 |
| | Address and phone number of the institution, entity, business or person named above |
| C. | Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: |
| | I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. |
| | I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Sal Lake County. |
| | I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. |
| | I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. |
| | None of the above categories apply. |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) |
| | I work as a data entry specialist at the University of Utah. I can work on it whenever I have time, it does not conflict with my job at Salt Lake County. |
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| Ιd | eclare under criminal penalty under the law of Utah that the foregoing is true and correct. |
| | |
| Si | ned on the Date day of February 72024, Year, |
| | |
| at. | Millcreek |
| | City or other location, and state or county |
| Jil | ian Newman |
| Pr | nted Name |
| | illian Newman 1 Newman (Feb 2, 2024 17:19 MST) |
| | 1 Newman (Feb 2, 2024 17:19 MST) nature |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A . ' | Jodi Deer | Youth Services | 385-468-4500 | | |
|--------------|--|---|--|--|--|
| | Covered Person | Position, or County Division for which you are employed or volunteering | County/Volunteer's Phone | | |
| | 177 W Price A | ve South Salt Lake, UT 84115 | | | |
| (| Covered Person's Cou | nty Address/Volunteer's Address | | | |
| 3. | Matheson Juni | or High | | | |
| (| Outside institution, en is required in the abov | tity, private business or person in which the Covered Person has a personal or businesection | ness interest for which disclosure | | |
| | Teacher | | | | |
| (| Covered person's statu | is, relationship or commitment to the institution, entity, business or person named | above | | |
| | 3650 South Mo | ontclair street, Magna, Utah; (385) 646-5290 | | | |
| - | Address and phone nu | mber of the institution, entity, business or person named above | | | |
| C. | Select the category th | nat applies to yourself and the outside institution, entity, business or person identifi | ed in subsection (B) above | | |
| ٠. | - | agreed to receive compensation for assisting a person or business entity in a transac | * * | | |
| | | director, agent, employee or the owner of a substantial interest in a business entity | • | | |
| | Lake County. | anotor, agont, employee of the owner of a substantial merest in a business entry | unat is subject to the regulation of ban | | |
| | I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business wit Salt Lake County. | | | | |
| | I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. | | | | |
| | - control | l interest that creates a potential or actual conflict with my public duties. | | | |
| | P | ve categories apply. | | | |
| D. | entity or person with is completed.) | iption of the actual or potential conflicts of interest identified above, i.e., the nature the County. Use more sheets if necessary. (This disclosure statement will not be a | of the relationship of each business accepted as valid unless this section | | |
| | I am employed at I from for the Count | Matheson Junior High as a teacher during the school year, which is the sch y program. | ool that the students come | | |
| | _ | enalty under the law of Utah that the foregoing is true and correct. day of February , 2024 / Year , | | | |
| ı. | Magna | tylonur 1 car | | | |
| at _ | City or other location, | and state or county | | | |
| • | Try or other rocation, | and state of county | | | |
| | li Deer | | | | |
| Prin | ited Name | | | | |
| Jodi | ger (Feb 3, 2024 12:22 MST) | | | | |
| Sign | nafure | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. ' | Julie Reichert | | Youth Services | 385-468-4500 |
|----------------------|---|------------------------|--|---|
| | Covered Person | Position, or Coun | ty Division for which you are employed or volunteering | County/Volunteer's Phone |
| | 177 W Price Ave | e South Salt L | ake, UT 84115 | |
| (| Covered Person's Count | y Address/Voluntee | r's Address | |
| В, | Granite School [| District | | |
| (| Outside institution, entits required in the above s | | or person in which the Covered Person has a personal or bu | isiness interest for which disclosure |
| | Employee Para | educator | | |
| (| Covered person's status, | relationship or com | mitment to the institution, entity, business or person name | ed above |
| | 2500 South Stat | e Street Sout | h Salt Lake City, UT 84115 385-646-500 | 00 |
| Ā | Address and phone num | ber of the institution | , entity, business or person named above | |
| C. | Select the category that | annlies to vourself | and the outside institution, entity, business or person ident | rified in subsection (B) above: |
| O. | | | pensation for assisting a person or business entity in a tran | • , |
| | · · · · · · · · · · · · · · · · · · · | _ | yee or the owner of a substantial interest in a business entit | · |
| | Lake County. | | | |
| | | ector, agent, employ | yee or owner of a substantial interest in a business entity that | at does or anticipates doing business wit |
| | Salt Lake County. I hold an investme | nt or other financial | interest that creates a potential or actual conflict with my | public duties. |
| | I hold a personal is | nterest that creates a | potential or actual conflict with my public duties. | • |
| | X None of the above | categories apply. | | |
| D. | | | potential conflicts of interest identified above, i.e., the natu | |
| | entity or person with the is completed.) | ne County. Use mor | re sheets if necessary. (This disclosure statement will not be | e accepted as valid unless this section |
| | Employee of Granite | School District | | |
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| ĭ da | alara undor ariminal nor | alty under the law o | of Utah that the foregoing is true and correct. | |
| | - | - | 2024 | |
| Sign | ned on the 2 day | y of February Month | Year ' | |
| N | | WOITH | | |
| at | fillcreek City | | | |
| Ĺ | fity or other location, a | nd state or county | | |
| Juli | e Reichert | | | |
| Prin | ted Name | | | |
| <i>10</i> Julie R | ulie Reichert eichert (Feb 2, 2024 17:15 MST) | - | | |
| Sign | nature | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| _A Karen Hunt | | Youth Services | 385-468-4500 | | |
|------------------------------|--|---|---|--|--|
| Covered Person | Position, or County | Division for which you are employed or volunteering | County/Volunteer's Phone | | |
| 177 W Price A | ve South Salt Lai | ke, UT 84115 | | | |
| Covered Person's Co | unty Address/Volunteer's | s Address | | | |
| _{B.} Copper Hills E | lementary | | | | |
| | | person in which the Covered Person has a personal or bu | siness interest for which disclosure | | |
| Teacher | | | | | |
| Covered person's stat | tus, relationship or comm | itment to the institution, entity, business or person name | d above | | |
| 7635 West Wa | ashington Road M | lagna, Utah 385-646-4792 | | | |
| Address and phone no | umber of the institution, e | entity, business or person named above | | | |
| C. Select the category t | hat applies to yourself an | d the outside institution, entity, business or person ident | ified in subsection (B) above: | | |
| | | ensation for assisting a person or business entity in a trans | , , | | |
| - A | _ | e or the owner of a substantial interest in a business entit | * | | |
| - | - | e or owner of a substantial interest in a business entity that | at does or anticipates doing business wit | | |
| I hold an invest | I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. | | | | |
| None of the abo | ove categories apply. | | | | |
| | | tential conflicts of interest identified above, i.e., the natural sheets if necessary. (This disclosure statement will not be | | | |
| | at Copper Hills Eleme | ntary | | | |
| | | | | | |
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| | | | | | |
| I declare under criminal : | nenalty under the law of I | Utah that the foregoing is true and correct. | | | |
| | | 2024 | | | |
| Signed on the Date | $\frac{\text{day of } }{\text{Month}}, \overline{\text{Y}}$ | , rear | | | |
| Magna, Utah | | | | | |
| City or other location | , and state or county | | | | |
| Karen Hunt | | | | | |
| Printed Name | | | | | |
| Karen Hunt | | | | | |
| Signature | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Kelly Price Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Bikers Against Child Abuse Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Volunteer Covered person's status, relationship or commitment to the institution, entity, business or person named above 11596 South Moring Point Way South Jordan, Utah 84009, 801-696-9081 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I volunteer with Bikers Against Child Abuse to help children who have been abused to stand up to their perpetrators and learn to live without fear. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. _ day of ____ Month Signed on the

Kelly Price

Printed Name

Magna, Utah

Kelly Price (Jan 29, 2024 10:49 MST)

City or other location, and state or county

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A. Kelly Price | Youth Services | 385-468-4500 | | | |
|---|--|--|--|--|--|
| | n, or County Division for which you are employed or volunteering | County/Volunteer's Phone | | | |
| 177 W Price Ave Soutl | n Salt Lake, UT 84115 | | | | |
| Covered Person's County Addres | s/Volunteer's Address | | | | |
| _{3.} Pleasant Green Eleme | entary | | | | |
| | business or person in which the Covered Person has a personal or business | ness interest for which disclosure | | | |
| teacher | | | | | |
| Covered person's status, relations | hip or commitment to the institution, entity, business or person named | above | | | |
| 8201 West 2700 South | n Magna, Utah 84044 (385) 646-4972 | | | | |
| Address and phone number of the | institution, entity, business or person named above | | | | |
| C. Select the category that applies t | to yourself and the outside institution, entity, business or person identifi | ed in subsection (R) above: | | | |
| | eceive compensation for assisting a person or business entity in a transaction | ` ' | | | |
| 198890 | ent, employee or the owner of a substantial interest in a business entity | · · | | | |
| Lake County. | one, employee of the owner of a substantial interest in a business entity | that is subject to the regulation of San | | | |
| I am an officer, director, age Salt Lake County. | I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with | | | | |
| | er financial interest that creates a potential or actual conflict with my pu | iblic duties. | | | |
| 5 - 100-100-100 J | I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. | | | | |
| | | | | | |
| | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | |
| | chool District and an After School Program teacher for Salt Lake | County. | | | |
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| I declare under criminal penalty under | er the law of Utah that the foregoing is true and correct. | | | | |
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| Signed on the 29 day of Mont | th 'Year' | | | | |
| Magna, Utah | 11 2 422 | | | | |
| at City or other location, and state of | or county | | | | |
| • | n county | | | | |
| Kelly Price | | | | | |
| Printed Name | | | | | |
| Kelly Price Kelly Price (Jan 29, 2024 10:40 MST) | | | | | |
| Signature | | | | | |

Signature

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Kennedy Sartori Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Granite school district Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Paraeducator Covered person's status, relationship or commitment to the institution, entity, business or person named above 4040 west sams blvd Kearns Utah 84118 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County, I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. X None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I have no conflicts of interest I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the 31 Kearns, Utah City or other location, and state or county Kennedy Sartori Printed Name

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A. | Kristina Martinez | Yo | outh Services | 385-468-4500 | |
|-----|---|---|---|-------------------------------------|--|
| 11. | Covered Person | Position, or County Division for v | hich you are employed or volunteering | County/Volunteer's Phone | |
| | 177 W Price Ave | South Salt Lake, UT 84 | 115 | | |
| | Covered Person's County | Address/Volunteer's Address | | <u> </u> | |
| В. | Freelance Film | | | | |
| υ. | Outside institution, entity is required in the above se | | h the Covered Person has a personal or bus | iness interest for which disclosure | |
| | Assistant Directo | r | | | |
| | Covered person's status, | relationship or commitment to the i | nstitution, entity, business or person named | above | |
| | 10588 S Wild Rid | ce Dr | | | |
| | Address and phone numb | er of the institution, entity, busines | s or person named above | | |
| C. | Select the category that | applies to yourself and the outside | nstitution, entity, business or person identif | ied in subsection (B) above: | |
| | Pagarana | | sisting a person or business entity in a transa | | |
| | I am an officer, dire | _ | of a substantial interest in a business entity | • | |
| | I am an officer, dire | Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business wit | | | |
| | I hold an investmen | Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. | | | |
| | None of the above of | | at connect with my phone autres. | | |
| D. | Give a detailed descripti | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section | | | |
| | | of a feature film, filming days ar | e being decided (may be during weekda | ays). | |
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| Ιd | leclare under criminal pena | alty under the law of Utah that the f | oregoing is true and correct. | | |
| | - | of, 2024 | | | |
| 51; | gned on the Date day | Month , Year , | | | |
| | Magna | | | | |
| at. | City or other location, an | d state or county | | | |
| Kr | ristina Martinez | | | | |
| | inted Name | | | | |
| | Kristina Martinez | | | | |
| _ | tina Martinez (Feb 2, 2024 17:22/MST) gnature | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A. | Kylee Gordon | | Youth Services | 385-468-4500 | | |
|------------|---|---|---|--|--|--|
| | Covered Person | • | on for which you are employed or volunteering | County/Volunteer's Phone | | |
| | | South Salt Lake, U | | | | |
| | · | , Address/Volunteer's Addre District-Pleasant Gre | | | | |
| В. | | y, private business or person | in which the Covered Person has a personal or b | usiness interest for which disclosure | | |
| | Employee-Teach | | | | | |
| | | | to the institution, entity, business or person nam | ed above | | |
| | 8201 W 2700 S I | Magna, UT 84044 | | | | |
| | | - | ousiness or person named above | | | |
| C. | Salast the actoromy that | applies to varyealf and the a | utside institution, entity, business or person iden | tified in subsection (D) shows | | |
| U. | | | a for assisting a person or business entity in a tran | • , | | |
| | Magazing Company | - | owner of a substantial interest in a business enti | , | | |
| | Lake County. | | | | | |
| | I am an officer, dire Salt Lake County. | ector, agent, employee or own | ner of a substantial interest in a business entity th | at does or anticipates doing business with | | |
| | I hold an investmen | I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. | | | | |
| | - | _ | or actual conflict with my public duties. | | | |
| | None of the above | categories apply. | | | | |
| D. | | | conflicts of interest identified above, i.e., the nate fracessary. (This disclosure statement will not be | | | |
| | | Granite School District | · · · · · · · · · · · · · · · · · · · | | | |
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| Ιd | leclare under criminal pena | alty under the law of Utah the | at the foregoing is true and correct. | | | |
| Si | gned on the 28 day | of January , 2024 | | | | |
| | Date | Month Year | • | | | |
| at. | Magna, Utah | | | | | |
| ai. | City or other location, an | d state or county | | | | |
| Ky | /lee Gordon | | | | | |
| - | inted Name | | | | | |
| <u>.</u> K | War | | | | | |
| Kyle C: | Gov on (Jan 28, 2024 12:19 MST) | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information.*)

| 、Kyndra Burnett | Youth Services | 385-468-4500 | | |
|---|---|--------------------------------------|--|--|
| Covered Person Position, or | County Division for which you are employed or volunteering | County/Volunteer's Phone | | |
| 177 W Price Ave South S | alt Lake, UT 84115 | | | |
| Covered Person's County Address/Vo | lunteer's Address | | | |
| Murray City School Distric | et | | | |
| Outside institution, entity, private busi is required in the above section | ness interest for which disclosure | | | |
| Student Teacher | | | | |
| Covered person's status, relationship of | or commitment to the institution, entity, business or person named | above | | |
| 5102 S. Commerce Drive | Murray, UT 84107 | | | |
| Address and phone number of the inst | itution, entity, business or person named above | | | |
| C. Select the category that applies to yo | urself and the outside institution, entity, business or person identifi | ed in subsection (B) above: | | |
| | ve compensation for assisting a person or business entity in a transac | • • | | |
| W.C. | employee or the owner of a substantial interest in a business entity | | | |
| | mployee or owner of a substantial interest in a business entity that | does or anticipates doing business w | | |
| I hold an investment or other fin | I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. | | | |
| None of the above categories ap | ply. | | | |
| O. Give a detailed description of the actuentity or person with the County. Us is completed.) | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section | | | |
| I am a student teacher during the between these two commitments | day at an elementary school in Murray City School District. | There is no conflict of interest | | |
| declare under criminal penalty under the | law of Utah that the foregoing is true and correct. | | | |
| Signed on the $\frac{3}{\text{Date}}$ day of $\frac{\text{February}}{\text{Month}}$ | / , 2024 , Year , | | | |
| West Jordan, Utah | | | | |
| City or other location, and state or co | unty | | | |
| Kyndra Burnett | | | | |
| Printed Name | | | | |
| Kyndra Burnett | | | | |
| (yny/a Burnett (Feb 3, 2024 12:27 MST) | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A. | Makenzie Rowe | | Youth Services | 385-468-4500 | |
|-----------|--|---|--|--|--|
| | Covered Person | Position, or County I | Division for which you are employed or volunteering | County/Volunteer's Phone | |
| | 177 W Price Ave | South Salt Lak | e, UT 84115 | | |
| Ō | Covered Person's County | y Address/Volunteer's | Address | · · · · · · · · · · · · · · · · · · · | |
| 3, | Let Me Shine Ch | ristian Playscho | ool | | |
| (| Outside institution, entity s required in the above s | | erson in which the Covered Person has a personal or bus | siness interest for which disclosure | |
| | Pre-K Teacher | | | | |
| Î | Covered person's status, | relationship or commit | ment to the institution, entity, business or person named | l above | |
| | 1070 Foothill Dr, | Salt Lake City, | UT 84108; (801) 583-6400 | | |
| - | Address and phone numb | per of the institution, er | ntity, business or person named above | | |
| ٦. | Salact the cotegory that | annlies to vourself and | the outside institution, entity, business or person identi | fied in subsection (D) above: | |
| ٠, | | | asation for assisting a person or business entity in a trans | , , | |
| | | <u> </u> | or the owner of a substantial interest in a business entity | • | |
| | Lake County. | ector, agent, employee | of the owner of a substantial interest in a business entity | mat is subject to the regulation of Sai | |
| | I am an officer, dire Salt Lake County. | ector, agent, employee | or owner of a substantial interest in a business entity that | t does or anticipates doing business wit | |
| | | | erest that creates a potential or actual conflict with my p | oublic duties. | |
| | | _ | tential or actual conflict with my public duties. | | |
| | None of the above | • | | | |
|). | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | |
| | | eacher at Let Me Sh | nine Christian Playschool. | | |
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| í de | clare under criminal pen | alty under the law of H | tah that the foregoing is true and correct. | | |
| | = | • | 024 | | |
| Sig | ned on the Date day | OI , | ear , | | |
| s at _ | Salt Lake City | ******** | | | |
| . (| City or other location, an | d state or county | | | |
| Ма | kenzie Rowe | | | | |
| Prin | ted Name | | | | |
| N | lakenzie Rowe | | | | |
| Sigi | nature 1881 - | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| Melissa Howard | Youth Services | 385-468-4500 | | | |
|---|---|---|--|--|--|
| | or County Division for which you are employed or volunteering | ng County/Volunteer's Phone | | | |
| 177 W Price Ave South | Salt Lake, UT 84115 | | | | |
| Covered Person's County Address/ | Volunteer's Address | | | | |
| Copper Hills Elementary | 1 | | | | |
| Outside institution, entity, private b is required in the above section | usiness or person in which the Covered Person has a personal of | or business interest for which disclosure | | | |
| Teacher | | | | | |
| Covered person's status, relationshi | p or commitment to the institution, entity, business or person n | named above | | | |
| 7635 W.Washington Rd | , Magna, UT 84044 385-646-4792 | | | | |
| Address and phone number of the in | astitution, entity, business or person named above | | | | |
| Select the category that applies to | yourself and the outside institution, entity, business or person i | identified in subsection (B) above: | | | |
| A WARRANT CO. | eive compensation for assisting a person or business entity in a | • • | | | |
| I am an officer, director, agen | t, employee or the owner of a substantial interest in a business | • | | | |
| | Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with | | | | |
| I hold an investment or other | I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. | | | | |
| None of the above categories | . , , | | | | |
| . Give a detailed description of the a | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section | | | | |
| Teacher at Copper Hills Eleme | ntary | - | | | |
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| 4-1444 | A. L. CITAL ALAS CARREST AND A | · | | | |
| | the law of Utah that the foregoing is true and correct. | | | | |
| Signed on the 25 day of Janua The Date day of Month | ry ,2024 | | | | |
| | i cai | | | | |
| Magna, UT t | | | | | |
| City or other location, and state or | county | | | | |
| Melissa Howard | | | | | |
| rinted Name | | | | | |
| Melissa Howard | | | | | |
| Signature | | | | | |



(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| _{A.} Miranda LaVallee | Youth Services | 385-468-4500 | | | |
|--|--|--|--|--|--|
| | County Division for which you are employed or volunteering | County/Volunteer's Phone | | | |
| 177 W Price Ave South Sa | 177 W Price Ave South Salt Lake, UT 84115 | | | | |
| Covered Person's County Address/Volu | inteer's Address | | | | |
| B. Magna Coalition | | | | | |
| | ess or person in which the Covered Person has a personal or | business interest for which disclosure | | | |
| Coalition member | | | | | |
| Covered person's status, relationship or | commitment to the institution, entity, business or person nan | ned above | | | |
| 8952 W Magna Main St, W | agna, UT 84044 | | | | |
| Address and phone number of the instit | ution, entity, business or person named above | | | | |
| C. Select the category that applies to you | rself and the outside institution, entity, business or person ide | ntified in subsection (B) above: | | | |
| | e compensation for assisting a person or business entity in a tra | | | | |
| | imployee or the owner of a substantial interest in a business en | | | | |
| Lake County. | | | | | |
| I am an officer, director, agent, en Salt Lake County. | nployee or owner of a substantial interest in a business entity t | that does or anticipates doing business with | | | |
| The state of the s | ncial interest that creates a potential or actual conflict with m | y public duties. | | | |
| | ates a potential or actual conflict with my public duties. | | | | |
| None of the above categories app | ly. | | | | |
| | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed</i>) | | | | |
| | agna Coalition. I attend meetings and when needed vote | e on decisions. | | | |
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| I declare under criminal penalty under the | law of Utah that the foregoing is true and correct. | | | | |
| 20 January | 2024 | | | | |
| Signed on the Date day of Month | · Year · | | | | |
| Salt Lake City, Utah | | | | | |
| at City or other location, and state or cou | nty | | | | |
| Miranda Lavallee | | | | | |
| Printed Name | | | | | |
| Miranda Lavallee | | | | | |
| Signature | | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Samantha Bollard | Youth Services | 385-468-4500 |
|-----|--|--|---|
| | Covered Person Position, or Co | unty Division for which you are employed or volunteering | County/Volunteer's Phone |
| | 177 W Price Ave South Salt | Lake, UT 84115 | |
| | Covered Person's County Address/Volun | teer's Address | |
| В. | Granite School District | | |
| _, | Outside institution, entity, private busines is required in the above section | s or person in which the Covered Person has a personal or busi | ness interest for which disclosure |
| | Special Education Paraeduc | cator | |
| | Covered person's status, relationship or co | ommitment to the institution, entity, business or person named | above |
| | 2500 S State St, South Slat | Lake, UT 84115 | |
| | Address and phone number of the institut | ion, entity, business or person named above | |
| C. | Select the category that applies to yourse | elf and the outside institution, entity, business or person identifi | ied in subsection (B) above: |
| | | ompensation for assisting a person or business entity in a transa | |
| | , and the second | sloyee or the owner of a substantial interest in a business entity | • |
| | | loyee or owner of a substantial interest in a business entity that | does or anticipates doing business with |
| | I hold an investment or other finance | ial interest that creates a potential or actual conflict with my pus a potential or actual conflict with my public duties. | ıblic duties. |
| | None of the above categories apply. | • • • | |
| D. | | or potential conflicts of interest identified above, i.e., the nature nore sheets if necessary. (This disclosure statement will not be a | |
| | I work with kids who have special ne | eds. I start my day around 8:45am and I get off at 3:20. \ght, or run off. I assist the teacher in whatever else she n | |
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| | | | |
| Ιd | eclare under criminal penalty under the lav | v of Utah that the foregoing is true and correct. | |
| Sig | gned on the 29 day of January Date Month | - , 2024 - , Year , | |
| | Pleasant Green Elementary | | |
| at | City or other location, and state or count | y | |
| Sa | amantha Bollard | | |
| Pri | inted Name | | |
| Şam | antha Bollard (Jan 29, 2024 16:39 MST) | | |
| Sig | gnature | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| A. | Sui Ha Lee | Youth Services | 385-468-4500 |
|-------|---|--|---|
| • •• | Covered Person | Position, or County Division for which you are employed or volum | nteering County/Volunteer's Phone |
| dies | | 177 W. Pria Ave SLC, Ut | 84115 |
| | Covered Person's C | County Address/Volunteer's Address | |
| В. | Copper Hills I | Elementary | |
| | Outside institution, is required in the abo | entity, private business or person in which the Covered Person has a persove section | sonal or business interest for which disclosure |
| | Teacher | | |
| | Covered person's st | atus, relationship or commitment to the institution, entity, business or pe | rson named above |
| | 7635W Wash | nington Road, Magna, Utah | |
| | Address and phone | number of the institution, entity, business or person named above | |
| C. | Select the category | that applies to yourself and the outside institution, entity, business or pe | erson identified in subsection (B) above: |
| ٠. | | we agreed to receive compensation for assisting a person or business entit | |
| | -17440000 | r, director, agent, employee or the owner of a substantial interest in a bus | , |
| | Lake County. | | · · · · · · |
| | I am an officer Salt Lake Cou | r, director, agent, employee or owner of a substantial interest in a business | s entity that does or anticipates doing business with |
| | | mry. stment or other financial interest that creates a potential or actual conflict | t with my public duties. |
| | I hold a person | nal interest that creates a potential or actual conflict with my public dutie | es. |
| | None of the al | bove categories apply. | |
| D. | | cription of the actual or potential conflicts of interest identified above, i.e ith the County. Use more sheets if necessary. (<i>This disclosure statement</i> | |
| | | ner at Copper Hills Elementary School. | |
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| Ιđ | leclare under criminal | l penalty under the law of Utah that the foregoing is true and correct. | |
| | 25 | 0004 | |
| Si | gned on the Date | day of, 2024 Month , Year , | |
| | Magna, Utah | | |
| at . | | on, and state or county | |
| | • | ni, and state of county | |
| | u Ha Lee | | |
| Pri | inted Name | | |
| Siu l | Ha Lee (Jan 25, 2024 15:30 MST) | | |
| Si | enature | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

| Un u n o | the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) | ed, |
|--------------------|---|------|
| ۱. | iffany Adams UT Youth Services | |
| • | overed Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone | - |
| | - 177 W Price Ave, SLC, UT84115 | _ |
| | overed Person's County Address/Volunteer's Address | _ |
| | | _ |
| | utside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosu required in the above section | re |
| | overed person's status, relationship or commitment to the institution, entity, business or person named above | _ |
| | 2500 S State St. SLC, UT 84115 | |
| | ddress and phone number of the institution, entity, business or person named above | _ |
| | I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake Count I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. | of S |
|). | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each businentity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this sector is completed.) I work in a unit class during the day. | |
| | lare under criminal penalty under the law of Utah that the foregoing is true and correct. | |
| δi | $\frac{31}{\text{Date}} \text{ day of } \frac{\text{January}}{\text{Month}}, \frac{24}{\text{Year}},$ | |
| t. | agna , Utah | |
| | ty or other location, and state or county | |
| i | ny Adams | |
| r | ed Name | |
| - | | |
| Ш Ц | dams (Jan 31, 2024 16:37 MST) | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| Δ | Veronica Morales | Youth Services | 385-468-4500 | | |
|----|--|--|---|--|--|
| | Covered Person Position, or Count | y Division for which you are employed or volunteering | County/Volunteer's Phone | | |
| | 177 W Price Ave South Salt La | ake, UT 84115 | | | |
| | Covered Person's County Address/Volunteer | c's Address | | | |
| В. | Granite schools district | | | | |
| υ. | Outside institution, entity, private business o is required in the above section | r person in which the Covered Person has a personal or busi | ness interest for which disclosure | | |
| | Para | | | | |
| | Covered person's status, relationship or commitment to the institution, entity, business or person named above | | | | |
| | 3560 s. Montclair St, magna U | It 84044 | | | |
| | Address and phone number of the institution | , entity, business or person named above | · | | |
| C. | Select the category that applies to yourself: | and the outside institution, entity, business or person identifi | ied in subsection (B) above: | | |
| Ο. | | pensation for assisting a person or business entity in a transa | , , | | |
| | Z (4 noman) | ree or the owner of a substantial interest in a business entity | • | | |
| | | ee or owner of a substantial interest in a business entity that | does or anticipates doing business with | | |
| | I hold an investment or other financial | interest that creates a potential or actual conflict with my pupotential or actual conflict with my public duties. | ıblic duties. | | |
| | None of the above categories apply. | | | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | |
| | Para in Matheson je. High during school | ol day2 | | | |
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| L | declare under criminal penalty under the law o | f Litab that the foregoing is true and correct | | | |
| | 2 Echruoni | 2024 | | | |
| Si | igned on the Date day of Month | , Year , | | | |
| | Magna Utah salt lake county | | | | |
| at | City or other location, and state or county | | | | |
| ٧ | eronica morales | | | | |
| Pr | inted Name | | | | |
| | -ya! | | | | |
| _ | onica morales (Feb 2, 2024 13:16 MST) | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

| A. | Vicki Lewellyn | Youth Services | 385-468-4500 | | |
|-------------|--|--|-------------------------------------|--|--|
| <i>i</i> 1. | Covered Person Position, or | County Division for which you are employed or volunteering | County/Volunteer's Phone | | |
| | 177 W Price Ave South S | alt Lake, UT 84115 | | | |
| | Covered Person's County Address/Vo | lunteer's Address | | | |
| В. | Granite School District | | | | |
| υ. | Outside institution, entity, private bus is required in the above section | ness or person in which the Covered Person has a personal or bus | iness interest for which disclosure | | |
| | Elementary Librarian | | | | |
| | Covered person's status, relationship or commitment to the institution, entity, business or person named above | | | | |
| | 2500 S State Street, Salt | Lake City, UT 84115 | | | |
| | Address and phone number of the inst | itution, entity, business or person named above | | | |
| C. | Select the category that applies to yo | urself and the outside institution, entity, business or person identif | fied in subsection (B) above: | | |
| | | - · · · · · · · · · · · · · · · · · · · | - , | | |
| | I am an officer, director, agent, | I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Sal | | | |
| | Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business wi | | | | |
| | Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. | | | | |
| | I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. | | | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | |
| | | lasses for students K-6th grades. Teach library skills, library cocess new books, check books in/out to students, shelf books | | | |
| T. | | | | | |
| | 31 January | law of Utah that the foregoing is true and correct. 2024 | | | |
| Si | gned on the Date day of Month | Year ' | | | |
| | Magna, Utah, Salt Lake County | 2000 | | | |
| at. | | number . | * | | |
| | City of other location, and state of ec | unty | | | |
| | icki Lewellyn | | | | |
| Pr | inted Name | | | | |
| Vick | Vicki Lewellyn (i Lewellyn (Jan 31, 2024 16:31 MST) | | | | |
| Q. | anatura | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

| Δ | Wendy Timothy | Youth Services | 385-468-4500 | | |
|------|--|--|----------------------------------|--|--|
| λ, | Covered Person P | osition, or County Division for which you are employed or volunteering | County/Volunteer's Phone | | |
| | 177 W Price Ave S | South Salt Lake, UT 84115 | | | |
| | Covered Person's County A | Address/Volunteer's Address | | | |
| R | Copper Hills Eleme | entary | | | |
| | Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure s required in the above section | | | | |
| | Special Ed. Teacher | | | | |
| | Covered person's status, relationship or commitment to the institution, entity, business or person named above | | | | |
| | 7635 W. 3715 S. Magna, UT 84044 | | | | |
| | Address and phone number | of the institution, entity, business or person named above | | | |
| C. | Select the category that an | plies to yourself and the outside institution, entity, business or person iden | tified in subsection (B) above: | | |
| | | ed to receive compensation for assisting a person or business entity in a trar | • / | | |
| | | or, agent, employee or the owner of a substantial interest in a business enti | - | | |
| | Lake County. | or, agent, employee or owner of a substantial interest in a business entity th | | | |
| | Salt Lake County. | | | | |
| | | or other financial interest that creates a potential or actual conflict with my rest that creates a potential or actual conflict with my public duties. | public duties. | | |
| | None of the above car | - 7 - | | | |
| Б | Exthermost . | | una aftha nalationaldia af l. li | | |
| D. | Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) | | | | |
| | | Copper Hills Elementary | | | |
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| I de | eclare under criminal penalt | y under the law of Utah that the foregoing is true and correct. | | | |
| | - ' | f | | | |
| Sig | ned on the Date day of | Month 'Year', | | | |
| J | Magna, UT | | | | |
| at_ | City or other location, and | state or county | | | |
| We | endy Timothy | | | | |
| | nted Name | | | | |
| _4 | Vendy Timothy | | | | |
| | iy Timoyay (Jan 26, 2024) 3:27 MST) nature | | | | |

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Yixiao Burke Youth Services 385-468-4500 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address University of Utah Internal Medicine office of education Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Work study student Covered person's status, relationship or commitment to the institution, entity, business or person named above 30 North Mario Capecchi Dr. Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I am a work study student for the U of U internal medicine office of education. I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Signed on the 29 ___ day of ____ Month Salt Lake City, Utah City or other location, and state or county Yixiao Burke Printed Name

Signature