



Jenny Wilson

Salt Lake County Mayor

**DEPARTMENT OF
COMMUNITY SERVICES**

ROBIN B CHALHOUB
Director

ROBERT SAMPSON
Associate Director

DIVISIONS

ARTS & CULTURE

CLARK PLANETARIUM

DISCOVERY GATEWAY

LIBRARY SERVICES

PARKS, RECREATION & GOLF

January 21, 2025

Dear Michelle:

The Department of Community Services submits the following employee County Disclosure Forms for your review and approval:

Employees:

- Robin Chalhoub, DGCM Board
- Robin Chalhoub, SLCC
- Robin Chalhoub, UPACA Board
- Robin Chalhoub, VSLSA Board
- Grace Hanley, DCC Board
- Lori Okino, OPEB Trust Board

Thank you for your time and consideration.

Sincerely,

Grace Hanley

Department Director

Mayor's Office Designee

SALT LAKE COUNTY
GOVERNMENT CENTER
2001 South State Street
Suite N-3200
Salt Lake City, UT 84190
385/468-7050
385/468-7072 fax
www.slco.org

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. _____
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

Covered Person's County Address/Volunteer's Address

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

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

Signed on the _____ day of _____, _____,
Date Month Year

at _____
City or other location, and state or county

Printed Name

Signature

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.

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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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. **Robin B. Chalhoi Department Director** **385-468-7501**
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 S. State Street N3-200 Salt Lake City, Utah 84190

Covered Person's County Address/Volunteer's Address

B. **Salt Lake Community College**
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

Adjunct Professor

Covered person's status, relationship or commitment to the institution, entity, business or person named above

4600 S. Redwood Road, Taylorsville, Utah 84123

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

Signed on the 12 day of January, 25
Date Month Year

Salt Lake City, Utah 84190
at City or other location, and state or county

Robin B. Chalhoub

Printed Name

Robin B. Chalhoub Digitally signed by Robin B. Chalhoub
Date: 2025.01.12 18:26:22 -07'00'

Signature

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.

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. **Robin B. Chalhoi Department Director** **385-468-7501**
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 S. State Street. N3-200 Salt Lake City, Utah 84190
Covered Person's County Address/Volunteer's Address

B. **UPACA**
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
131 S Main St, Salt Lake City, UT 84111
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 on the board as an official function of my County position.

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

Signed on the 12 day of January, 25
Date Month Year

Salt Lake City, Utah 84190
at
City or other location, and state or county

Robin B. Chalhoub
Printed Name
Robin B. Chalhoub Digitally signed by Robin B. Chalhoub
Date: 2025.01.12 18:22:43 -07'00'

Signature

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.

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. **Robin B. Chalhoi Department Director** **385-468-7501**
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 S. State Street N3-200 Salt Lake City, Utah 84190

Covered Person's County Address/Volunteer's Address

B. **Visit Salt Lake Sports Advisory Board**
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

90 S W Temple St, Salt Lake City, UT 84101

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 board member as a function of my position.

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

Signed on the 12 day of January, 25
Date Month Year

Salt Lake City, Utah 84190
at
City or other location, and state or county

Robin B. Chalhoub

Printed Name

Robin B. Chalhoub Digitally signed by Robin B. Chalhoub
Date: 2025.01.12 18:29:43 -07'00'

Signature

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.

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. **Grace Hanley** **Dept. Assistant to Community Services Department** **x87050**
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 S. State Street, N3-200, SLC UT 84190

Covered Person's County Address/Volunteer's Address

B. **Downtown Community Council**
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/Treasurer

Covered person's status, relationship or commitment to the institution, entity, business or person named above

NA

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.)*

The purpose of this Council is to investigate and conduct outreach for residents residing in downtown Salt Lake City. Outreach efforts include but are not limited to renters' rights, education and stakeholder ship regarding property development, and elections/legislation.

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

Signed on the 14 day of January, 2025
Date Month Year

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

Grace Hanley

Printed Name

Grace Hanley Digitally signed by Grace Hanley
Date: 2025.01.14 15:41:13 -07'00'

Signature

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.

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. **Lori Okino** **Community Services Dept.** **385-468-7053**
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 S. State Street, suite N3-200, Salt Lake City, UT 84114

Covered Person's County Address/Volunteer's Address

B. **Other Post Employment Benefits (OPEB) Trust Board**

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

Trustee

Covered person's status, relationship or commitment to the institution, entity, business or person named above

2001 S. State Street, Salt Lake City, UT 84114

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.)*

On April 21, 2015, the Salt Lake County Council adopted a resolution authorizing the creation of an irrevocable trust for the purpose of funding other post-employment benefit (OPEB) liabilities. I am one of four trustees charged with fiduciary duties related to the trust. Our goal is to begin reducing the unfunded liability associated with the benefits and increase the transparency in reporting of the liability, facilitate consistency with the current reporting requirement for pensions, and provide more useful information about the liability and cost of benefits.

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

Signed on the 10 day of January, 2025
Date Month Year

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

Lori Okino

Printed Name

Lori Okino

Digitally signed by Lori Okino
Date: 2025.01.10 15:34:12 -07'00'

Signature

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.