

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.)

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. Brock Yancey Program Manager 385-468-4512
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 W. Price Ave. SLC, Ut 84115
Covered Person's County Address/Volunteer's Address

B. Blomquist Hale Employee Assistance
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
869 E, 4500 S. #201 Murray, Ut 84107 801-262-9619
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.

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 business does not have a relationship with SL County. There is no actual or potential conflict.

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

Signed on the 11th day of January, 2021,
Date Month Year

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

Brock Yancey
Printed Name

Brock Yancey Digitally signed by Brock Yancey
Date: 2021.01.11 08:19:19 -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.)

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. Lorri Lake Youth Services
Covered Person Position, or County/Division for which you are employed or volunteering County/Volunteer's Phone
177 West Price Ave SLC UT 84115
Covered Person's County Address/Volunteer's Address

B. Mind, Body & Spirit Counseling
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
Owner- Therapist
Covered person's status, relationship or commitment to the institution, entity, business or person named above
5401 S Fashion Blvd Suite 200 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.

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.)

Private Therapist

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

Signed on the 10 day of 1, 2021
Date Month Year

at _____
City or other location, and state or county

Lorri Lake
Printed Name

Lorri Lake
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.)

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. Autumn Batta Youth worker / Youth services 385-408-4470
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 West Price Avenue South Salt Lake 84115
Covered Person's County Address/Volunteer's Address

B. Leonard Consultant
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
respite worker
Covered person's status, relationship or commitment to the institution, entity, business or person named above
3585 W. 1400 S. Bluffdale UT 84605
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.

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.)

None

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

Signed on the 10 day of January, 2021
Date Month Year

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

Autumn Batta
Printed Name

[Signature]
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.)

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. Juliana Ferreryra Youth worker (385) 468-4470
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 West price Ave. SLC 84115
Covered Person's County Address/Volunteer's Address

B. Lakeview Academy Special Ed Aide (801) 331-67
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
School
Covered person's status, relationship or commitment to the institution, entity, business or person named above
527 West 400 N Saratoga Springs, Utah 8404
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.

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.)

Special Ed Aide.

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

Signed on the 10 day of 01, 2021
Date Month Year

at SLC Utah.
City or other location, and state or county

Juliana Ferreryra
Printed Name

[Signature]
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.)

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. Mina Koplin, Chair CWIC 385-468-4541
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
195 North 1950 West SLC, UT 84116
Covered Person's County Address/Volunteer's Address

B. 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
195 N 1950 W
Covered person's status, relationship or commitment to the institution, entity, business or person named above
SLC, UT 84116
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.

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 Chair for the CWIC (Child Welfare Improvement ~~Committee~~ ^{Council} ~~Committee~~ ^{Council})
This Committee understands, promotes, and advocates for the Best Interest and Practices to prevent Child Abuse and/or Neglect. It reviews the DCFS system and gives feedback. This is an unpaid position.

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

Mina Koplin
Printed Name

Mina Koplin
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.)

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. JD Green Youth Services Program Manager 385-468-4487
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 W Price Ave South Salt Lake City UT 84115
Covered Person's County Address/Volunteer's Address

B. Insight Counseling 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
Owner/Operator
Covered person's status, relationship or commitment to the institution, entity, business or person named above
963 N 1025 E Ogden UT 84404
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.

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 conflict of interest. ICS does not have any past, present nor anticipated transactions with Salt Lake County

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

Signed on the 7 day of January, 2021,
Date Month Year

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

JD Green
Printed Name

J. Douglas Green Digitally signed by J. Douglas Green
Date: 2021.01.07 09:34:21 -0700

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.

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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. LeVaughn Wilkins Youth Worker 385-468-4463
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

B. Volunteers of America
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
Covered person's status, relationship or commitment to the institution, entity, business or person named above
888 South 400 West
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.

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 with homeless people 18 and up through volunteers of America. I help distribute resources and monitor the shelter process.

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

Signed on the 1 day of 7, 21,
Date Month Year
at Salt Lake City UT
City or other location, and state or county

LeVaughn Wilkins
Printed Name
[Signature]
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.)

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. Corylyn Ybarra Youth Services 385-468-4445
Covered Person Position, or County/Division for which you are employed or volunteering County/Volunteer's Phone

3660 S West Temple SLC, VT 04115
Covered Person's County Address/Volunteer's Address

B. Highland Springs Specialty Clinic
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

contract therapist

4460 S Highland Dr SLC, VT 04124
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.

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.)

only see private insurance clients -
no conflict as youth services only see's
medicaid clients

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

Signed on the 7 day of January, 2021
Date Month Year

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

Corylyn Ybarra
Printed Name

[Signature]
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.)

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 Director 385-468-4510
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 W Price Ave SLC, UT 84115
Covered Person's County Address/Volunteer's Address

B. OPTAVIA
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
Health Coach
Covered person's status, relationship or commitment to the institution, entity, business or person named above
100 International Drive, 18th Floor Baltimore, MD 21202 1-888-OPTAVIA
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.

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 assist my husband in coaching persons who are interested in losing weight through the OPTAVIA health plans. Assist clients with ordering kits, beginning their plan, answer questions about plan, make weekly coach calls to clients on plan. Assist others in becoming an OPTAVIA coach and provide them with information and assistance in coaching others on this plan. Those who are on plan who work for SLCO my husband conducts the health assessments and provides them with information about the plan.

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

Signed on the 7th day of January, 2021,
Date Month Year

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

Carolyn Hansen
Printed Name

Carolyn J. Hansen Digitally signed by Carolyn J. Hansen
Date: 2021.01.07 11:29:41 -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.)

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 Director 385-468-4510
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 W Price Ave SLC, UT 84115
Covered Person's County Address/Volunteer's Address

B. Raise The Future
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
7414 S State Street, Suite 101 Midvale, UT 84097
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.

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.)

Attend advisory board meetings every other month. Board meetings address children who are waiting to be adopted and fundraising event coordination to support non-profit agency. Share resources regarding Youth Services with board members. No known conflict.

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

Signed on the 7th day of January, 2021,
Date Month Year

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

Carolyn Hansen
Printed Name
Carolyn J. Hansen Digitally signed by Carolyn J. Hansen
Date: 2021.01.07 11:38:41 -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.)

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 Director 385-468-4510
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 W Price Ave SLC, UT 84115
Covered Person's County Address/Volunteer's Address

B. Utah Board of Juvenile Justice
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

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.

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.)

Attend monthly board meetings. Board meetings address policy and programming that effect and impact youth in the Juvenile Justice and DCFS systems. Vote on new board members, board meeting agendas, give input on current legislation effecting youth. Vote on use of UBJJ grants. Appointed by the Governor as part of my role as Youth Services director.

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

Signed on the 7th day of January, 2021,
Date Month Year
at Salt Lake City, Utah
City or other location, and state or county

Carolyn Hansen
Printed Name
Carolyn J. Hansen Digitally signed by Carolyn J. Hansen
Date: 2021.01.07 11:38:41 -0700
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 refiled 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.)

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. Annie Brantley Youth Service 385-468-4452
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 W. Price Ave. SLC, UT 84115
Covered Person's County Address/Volunteer's Address

B. National Park Service
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 - Supervisory Park Ranger
Covered person's status, relationship or commitment to the institution, entity, business or person named above
2038 Alpine Loop Road, American Fork, UT 84003
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.

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 National Park Service and Salt Lake County have no known relationship at this time.

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

Signed on the 9 day of 1, 2021,
Date Month Year

at Salt Lake City, UT 84108
City or other location, and state or county

Annie Brantley
Printed Name
Annie Brantley
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. Kent G. Larson
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 W. Price Ave Salt Lake City, UT 84115
Covered Person's County Address/Volunteer's Address

B. Kent G Larson Counseling Service - private business
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
Sole proprietor - private therapist working independently
Covered person's status, relationship or commitment to the institution, entity, business or person named above
3578 W. 4850 S. Taylorsville, UT 84129 (801) 558-6253
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 have my own business, located within Salt Lake County where I mostly see adults. I do see a few teens. If I have seen a teen, or his/her parent at Youth Semars, I don't see them in my private practice and viceversa.

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

Signed on the 18th day of January 2021
Date Month Year

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

Kent G. Larson, LCSW
Printed Name

[Signature]
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.)

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. DOUGLAS BUNKER YOUTH SERVICES 385-468-4516
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 W. PRICE AVE, SALT LAKE CITY, UT 84115
Covered Person's County Address/Volunteer's Address

B. PRIVATE PRACTICE OF PSYCHOLOGY
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
SOLE PROPRIETOR
Covered person's status, relationship or commitment to the institution, entity, business or person named above
1008 S. 1300 E, SALT LAKE CITY 84105 801-910-7128
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.

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 POTENTIAL CONFLICT IS OF REFERRING CLIENTS TO MY PRIVATE PRACTICE. I HAVE NOT AND WILL NOT ACCEPT CLIENTS WHO ARE PAST OR CURRENT CLIENTS OF THE DIVISION OF YOUTH SERVICES.

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

Signed on the 14 day of JAN, 2021
Date Month Year

at SALT LAKE CITY, UT
City or other location, and state or county

DOUGLAS BUNKER
Printed Name
Douglas B Bunker
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. Chris Bereshnyi Family Therapist 385-468-4545
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 W Price Ave

Covered Person's County Address/Volunteer's Address

B. Humane Society of Utah and 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

HSU- 4242 S 300 W RH- 1370 S 400 W

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 walk dogs at HSU and work with the cats at Ruff Haven.

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

Signed on the 12th day of January, 2021,
Date Month Year

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

Chris Bereshnyi
Printed Name

Chris Bereshnyi Digitally signed by Chris Bereshnyi
Signature Date: 2021.01.12 17:07:38 -0700

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. German Ochoa Youth Worker 385-210-4450
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 W. Price Ave Salt Lake City Utah 84115

Covered Person's County Address/Volunteer's Address
Weber Human Services

B. German Ochoa
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
237 26th St, Ogden Utah 84401

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.)

Part time Prevention Group Facilitator

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

Signed on the 13 day of January, 2021
Date Month Year

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

German Ochoa
Printed Name

German Ochoa

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.)

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-C Full time Family Therapist 801-842-4192
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 W. Price Ave. South Salt Lake City, Utah 84115
Covered Person's County Address/Volunteer's Address

B. MEHR Therapeutic Counseling 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
Owner, Therapist
Covered person's status, relationship or commitment to the institution, entity, business or person named above
262 E. 3900 S. SU 115 Millcreek Utah 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.

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 therapist and business owner. I have some contracts that are involved with various insurance companies that pay my for my time through the Insurance Company of my clients. My company has a contract with Stepping Stones, a placement Agency that takes some children who are in custody with DCFS Or JJS.

I haven't had any conflicts in the past. I am very careful and don't anticipate any conflicts in my future. I only work about 5- 6 hours per week in my company, this is not during my work schedule hours at Youth Services.

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

Signed on the 13 day of January, 2021,
Date Month Year

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

Desiree Steadman-Gallegos
Printed Name



Digitally signed by Desiree Steadman-Gallegos
Date: 2021.01.13 14:56:44 -0700

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.)

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. Jeffery Langworthy, Youth Services, 385-468-4610
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
8781 S Redwood Rd Bldg 3, West Jordan UT 84088
Covered Person's County Address/Volunteer's Address

B. Lifeline Community
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
Biblical Counselor.
Covered person's status, relationship or commitment to the institution, entity, business or person named above
4431 Lifeline Way, West Jordan UT 84088,
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.

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 provide counseling at Lifeline Community Church.

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

Signed on the 11 day of 01, 2021
Date Month Year

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

Jeffery Langworthy.
Printed Name

[Signature]
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.)

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. Brooke Blake Family Resource Facilitator Salt Lake County Youth Services 385-215-5355
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. N/A C.A.R.I.
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

C.A.R.I. Board member
Covered person's status, relationship or commitment to the institution, entity, business or person named above

Sandy Justice Court 210 W. Segal Lily Dr. Sandy, UT
Address and phone number of the institution, entity, business or person named above 84070

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.

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.)

[Empty box for detailed description of conflicts of interest]

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

Signed on the 7 day of 1, 2021
Date Month Year

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

Brooke Blake
Printed Name

Brooke Blake Digitally signed by Brooke Blake
Date: 2021.01.07 11:29:17 -0700

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.)

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. Lauren Greco Family Resource Facilitator 385-414-3584
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 W Price Ave, SLC, Utah 84115.
Covered Person's County Address/Volunteer's Address

B. ~~See attachment~~ Granite School District Mental Health Consortium
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
2500 S State St committee member
Covered person's status, relationship or commitment to the institution, entity, business or person named above
2500 S State St, SLC, 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.

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 07 day of 01, 2021,
Date Month Year

at 177 W Price Ave, SLC, Utah 84115.
City or other location, and state or county

Lauren Greco
Printed Name
Lauren Greco Digitally signed by Lauren Greco
Date: 2021.01.07 10:53:42 -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.)

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. Laura B Ellsworth, FRF Division of Youth Services 801-3001162
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

492 E Elizabeth Dr, Draper, Utah 84020

Covered Person's County Address/Volunteer's Address

B. 3rd District Court Juvenile Drug Treatment Court
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

JDTA team member acting Family Resource Facilitator

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

Matheson Courthouse

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:

NA

- 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.

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.)

In this assignment I am acting as a Family Resource Facilitator from/representing the Division of Youth Services so there is no conflict.

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

Signed on the 7 day of January, 2021
Date Month Year

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

Laura B Ellsworth
Printed Name

LBEllswor
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.)

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. Mandy Susaeta Division of Youth Services 385-315-1431
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177W. Price Ave South Salt Lake, UT 84115
Covered Person's County Address/Volunteer's Address

B. Systems of Care Screening Committee
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
Committee member
Covered person's status, relationship or commitment to the institution, entity, business or person named above
3450 S 900 W South Salt Lake, UT 84119, 385-414-1644
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.

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 08 day of 01, 2021,
Date Month Year

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

Mandy Susaeta
Printed Name

Mandy Susaeta Digitally signed by Mandy Susaeta
Date: 2021.01.08 11:42:34 -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.)

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. Mandy Susaeta Division of Youth Services 385-315-1431
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177W. Price Ave South Salt Lake, UT 84115
Covered Person's County Address/Volunteer's Address

B. CARE Court
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
Committee member
Covered person's status, relationship or commitment to the institution, entity, business or person named above
450 S State St Salt Lake City, UT 84111, 801-238-7749
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.

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 08 day of 01, 2021,
Date Month Year

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

Mandy Susaeta
Printed Name

Mandy Susaeta Digitally signed by Mandy Susaeta
Date: 2021.01.08 11:42:34 -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.)

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. Mandy Susaeta Division of Youth Services 385-315-1431
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177W. Price Ave South Salt Lake, UT 84115
Covered Person's County Address/Volunteer's Address

B. Systems of Care Regional Advisory 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
Committee member
Covered person's status, relationship or commitment to the institution, entity, business or person named above
5735 S Redwood Rd Taylorsville, UT 84123, 385-414-1644
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.

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 08 day of 01, 2021,
Date Month Year

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

Mandy Susaeta
Printed Name

Mandy Susaeta Digitally signed by Mandy Susaeta
Date: 2021.01.08 11:42:34 -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.)

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. Christopher Faaliliu Youth Worker (385)468-4470
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
177 W. Price Ave., SLC, UT 84115
Covered Person's County Address/Volunteer's Address

B. Open Arms
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.

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.)

Foster Care through Open Arms.

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

Signed on the 19th day of Jan, 2011.
Date Month Year

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

Chris Faaliliu
Printed Name

[Signature]
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.