

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. Kele Griffone Criminal Justice Services Division Director 385-468-3425
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 East 1300 South Suite 501, SLC, UT 84115
Covered Person's County Address/Volunteer's Address

B. Behavioral Health 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
Board Member
Covered person's status, relationship or commitment to the institution, entity, business or person named above
2001 South State Street SLC, UT 84115
Address and phone number of the institution, entity, business or person named above

- C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
 - I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
 - I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
 - I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
 - I hold a personal interest that creates a potential or actual conflict with my public duties.

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 in C Apply
Advisory Board Member as part of my duties as CJS Division Director.

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

Signed on the 17 day of January, 2020.
Date Month Year

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

Kele Griffone
Printed Name

Kele Griffone Digitally signed by Kele Griffone
Date: 2020.01.17 14:31:11 -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. Kele Griffone Criminal Justice Services Division Director 385-468-3425
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 East 1300 South Suite 501, SLC, UT 84115
Covered Person's County Address/Volunteer's Address

B. Salt Lake Family Justice Center 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
300 S 300 E, SLC, UT 84115
Address and phone number of the institution, entity, business or person named above

C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County,
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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 in C Apply
Advisory Board Member as part of my duties as CJS Division Director.

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

Signed on the 17 day of January, 2020
Date Month Year

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

Kele Griffone
Printed Name

Kele Griffone Digitally signed by Kele Griffone
Date: 2020.01.17 14:31:11 -07'00'

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. Kele Griffone Criminal Justice Services Division Director 385-468-3425
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 East 1300 South Suite 501, SLC, UT 84115
Covered Person's County Address/Volunteer's Address

B. Criminal Justice 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
Board Member
Covered person's status, relationship or commitment to the institution, entity, business or person named above
2001 S. State Street, SLC, UT 84115
Address and phone number of the institution, entity, business or person named above

- C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
 - I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
 - I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
 - I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
 - I hold a personal interest that creates a potential or actual conflict with my public duties.

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 in C Apply
Advisory Board Member as part of my duties as CJS Division Director.

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

Signed on the 17 day of January, 2020.
Date Month Year

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

Kele Griffone
Printed Name

Kele Griffone Digitally signed by Kele Griffone
Date: 2020.01.17 14:31:11 -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. Kele Griffone Criminal Justice Services Division Director 385-468-3425
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 East 1300 South Suite 501, SLC, UT 84115
Covered Person's County Address/Volunteer's Address

B. Legacy Plus 13, LLC
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Owner
Covered person's status, relationship or commitment to the institution, entity, business or person named above
4080 S. Montaña Dr, WVC, UT 84119
Address and phone number of the institution, entity, business or person named above

- C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
 - I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
 - I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
 - I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
 - I hold a personal interest that creates a potential or actual conflict with my public duties.

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 in C Apply
I am an owner of a consulting business that does not provide services or anticipate doing business with Salt Lake County.

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

Signed on the 17 day of January, 2020.
Date Month Year

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

Kele Griffone
Printed Name

Kele Griffone Digitally signed by Kele Griffone
Date: 2020.01.17 14:31:11 -07'00'

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. Kristina Pulsipher Criminal Justice Services 385-468-3541
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

145 E. 1300 S. #501, Salt Lake City, UT 84115
Covered Person's County Address/Volunteer's Address

B. Street Dawg Crew of Utah

Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Volunteer/Board Member

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

1385 S. Teakwood Dr., Taylorsville, UT 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.

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 volunteer and board member with Street Dawg Crew of Utah. We provide food, supplies, and medical care for the pets of people experiencing homelessness and other vulnerable populations. We often serve members of the community who are also clients of Criminal Justice Services. We are an all-volunteer organization and do not receive any kind of compensation for our services.

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

Signed on the 17 day of January, 2020,
Date Month Year

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

Kristina Pulsipher
Printed Name

Kristina Pulsipher Digitally signed by Kristina Pulsipher
Date: 2020.01.17 14:50:47 -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. Ms. Meredith Franck-Owner 8014849092
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 Est 1300 So, SLC, Ut 84111
Covered Person's County Address/Volunteer's Address

B. Meredith Franck Original
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
Covered person's status, relationship or commitment to the institution, entity, business or person named above
812 E. 1300 So SLC, Ut 84105 or P.O. Box 522035
Address and phone number of the institution, entity, business or person named above SLC, Ut 84102

- 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.)

3
Showcase in ~~the~~ public public locations
in Salt Lake County
Kenny Barnard Gallery
Utah Museum Fine Arts
Paletti

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

Signed on the 27 day of 1, 2020
Date Month Year

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

Meredith Franck
Printed Name
Meredith Franck
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. Heidi Marks Quality Assurance Manager, CJS 385-468-3423
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

145 E 1300 S, Suite 501, SLC, UT 84115-6141
Covered Person's County Address/Volunteer's Address

B. Clinical consultants
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

currently employed as a substance abuse counselor

Covered person's status, relationship or commitment to the institution, entity, business or person named above
7601 S Redwood Rd, W Jordan, UT 84088 801-233-8670
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.)

CJS clients are being treated by clinical consultants that could potentially be in my groups. I do not meet with any CJS clients individually for counseling, unless necessary. I disclose to clients my role at CJS and that it will not impact their treatment or probation progress.

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

Signed on the 21 day of January, 2020
Date Month Year

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

Heidi Marks
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. Alisha Salinas Criminal Justice Services 385-408-3514
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

145 E. 1300S. Ste 501 SLCT 84115
Covered Person's County Address/Volunteer's Address

B. Odyssey House
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

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

3445. 100S. SLCT 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.

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.)

Complete assessments for CATS clients. I do not complete assessments for clients that are involved with drug court.

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

Signed on the 22 day of Jan, 2020
Date Month Year

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

Alisha Salinas
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. Jumana Dhaher 305 468 -3495
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 East 1300 South Suite 501 SLU, UT 84115
Covered Person's County Address/Volunteer's Address

B. Draper Therapy + Wellness Center
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
I work as a therapist with this agency
Covered person's status, relationship or commitment to the institution, entity, business or person named above
12397 South 300 ea. Suite 150, Draper UT 84020
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.)

There is no conflict of interest.
I work for a private agency

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

Signed on the 16 day of Jan., 2020
Date Month Year

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

Jumana Dhaher
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. Rebecca Bowles Treatment Specialist CJS 83583
 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E 1300 S. Ste 501 SLC UT 84115
 Covered Person's County Address/Volunteer's Address

B. Middle Path 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
employee/therapist
 Covered person's status, relationship or commitment to the institution, entity, business or person named above
4905 S. Wasatch Blvd. Holladay UT 84124
 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 for a private business that has no interest w/SLC County

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

Signed on the 23 day of 1, 2000
Date Month Year

at SLC UT
City or other location, and state or county

Rebecca Bowles
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. Tara Bennion Case Manger Criminal Justice Services 385-468-3539
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E. 1300 S. Suite 501 SLC,UT 84115
Covered Person's County Address/Volunteer's Address

B. Volunteers of Amercia of Utah- VOA
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

Voluneteer
Covered person's status, relationship or commitment to the institution, entity, business or person named above
Administration office -- 435 West Bearcat Drive Salt Lake City, UT 84115
Address and phone number of the institution, entity, business or person named above

C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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 currently volunteer with VOA with special events and other clerical duties. I also help with donations and other odds and end volunteer work. There could be a potential conflict if I run into clients but will abide by all HIPAA and confidentiality laws under both entities. Most of my volunteer duties are away from direct client care.

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

Signed on the 21 day of January, 2020,
Date Month Year

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

Tara Bennion
Printed Name

Tara Bennion
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. Jeff Wade Criminal Justice Services 385-468-3525
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E. 1300s. SLC, ut. 84115
Covered Person's County Address/Volunteer's Address

B. Changes 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
Therapist
Covered person's status, relationship or commitment to the institution, entity, business or person named above
8221 S. 700 E. Sandy, ut. 84070 / 801-542-7060
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 conduct therapy both Individual & Group Sessions. I do have contact with some clients who are on Probation or Pretrial Services. However, I do not have any contact with Drug Court Clients.

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

Signed on the 22 day of January, 2020
Date Month Year

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

Jeff Wade
Printed Name

Jeff Wade
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. Ashley Jimenez Criminal Justice Services position 385-468-2577
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

145 E 1300 S Suite 501
Covered Person's County Address/Volunteer's Address

B. Trilogy Education
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

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

Online
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.)

Don't see any potential conflicts. IF a client enrolled in the course I will notify my supervisor.

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

Signed on the 21st day of JANUARY, 20,
Date Month Year

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

Ashley Jimenez
Printed Name

Ashley n Jimenez
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. CHRIS PACHECO CASE MANAGER 385-468-3590
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E 1300 S SALT LAKE CITY, UTAH 84115
Covered Person's County Address/Volunteer's Address

B. DISCOVER CARD, LLC - CREDIT CARD COMPANY
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
WORK WEEKENDS FROM HOME DOING CUSTOMER SERVICE
Covered person's status, relationship or commitment to the institution, entity, business or person named above
2500 LAKE PARK BLVD WEST VALLEY CITY, UTAH 84130
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 16TH day of JANUARY, 2020,
Date Month Year

at CRIMINAL JUSTICE SERVICES
City or other location, and state or county

CHRIS PACHECO
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.