

Mayor's Office: Council Agenda Item Request Form

This form and supporting documents (if applicable) are due the Wednesday before the COW meeting by noon.

Date Received (office use)

Date of Request	5-29-18
Requesting Staff Member	Ina Landry
Requested Council Date	6-5-18
Topic/Discussion Title	Conflict of Interest Forms
Description	Four (4) Conflict Of Interest Forms: 1) Antigone H. Carlson - Contracts & Procurement 2) Premkumar Narayanan - Information Services 3) Megan Hillyard - Administrative Services 4) James Burton - Information Services
Requested Action¹	Review & Approve
Presenter(s)	NA
Time Needed²	NA
Time Sensitive³	No
Specific Time(s)⁴	No
Will You Be Providing a PowerPoint?	☐ Yes ☒ No
Will You Be Providing Back-Up Documentation or Handouts? Please attach supporting documentation you plan to provide for the packets to this form. While not ideal, if supporting documents are not yet ready, you can still submit them by 10 am the Friday morning prior to the COW agenda. Items without documentation may be taken off for consideration at that COW meeting.	☐ Yes ☒ No

Mayor or Designee approval: _____

¹ What you will ask the Council to do (e.g., discussion only, appropriate money, adopt policy/ordinance) – in specific terms.

² Assumed to be 10 minutes unless otherwise specified.

³ Urgency that the topic to schedule on the requested date.

⁴ If important to schedule at a specific time, list a few preferred times.

DISCLOSURE OF PRIVATE BUSINESS INTERESTS (Use one form for each outside business entity, institution, or person involved.)

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 private business interests. (Type or print all information.)

A. Antigone H Carlson Contracts Administrator (Contracts & Procurement) 385-468-0310
Covered Person* Position* or County Division County Phone

2001 S. State St. Ste. N4-600, SLC, UT 84190
Covered Person's County Address

B. Salt Lake County Elections
Outside institution, entity, private business or person involved

Translator/Proofer - Contractor
Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract

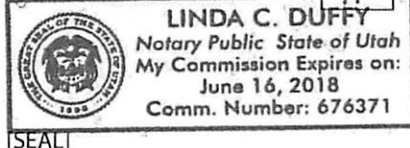
2001 S. State St. Ste. S1-200, SLC, UT 84190
Outside institution, entity, business or person's address and phone number

C. Describe below the nature of the assistance you are providing to the institution, entity, private business or person named above, or describe the nature of the economic interest or employment you hold in the private business. Also describe the relationship with or transaction between the business, institution, person, etc. and Salt Lake County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)

I will proof the spanish translations of the ballot and audio ballot for elections to ensure accuracy and consistency with previous years' ballots. I will also provide translations to minor tweaks in wording that are made after initial translations are provided. This work for the Elections Division does not overlap the work that I do for Contracts & Procurement and is a separate service.

Antigone H Carlson
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 11th day of May, 2018.



Linda C. Duffy
Salt Lake City, Utah
NOTARY PUBLIC, Residing in
Salt Lake Utah
County State

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 persists.

*"Covered person" means any person appointed to any statutory office or position or any other person appointed to any position of employment with Salt Lake County. "Covered person" includes, but is not limited to, persons serving on special, regular or full-time committees, agencies, or boards whether or not such persons are compensated for their services.

*"Position" refers to any Salt Lake County office, appointment, employment, or uncompensated volunteer situation as described in the definition of "covered person."

DISCLOSURE OF PRIVATE BUSINESS INTERESTS (Use one form for each outside business entity, institution, or person involved.)

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 private business interests. *(Type or print all information.)*

A.

PREMKUMAR NARAYANAN	Principal BI Engineer	385 468 0737
Covered Person*	Position* or County Division	County Phone

2001 S State Street

Covered Person's County Address

B.

Intermountain Healthcare

Outside institution, entity, private business or person involved

PRN Employee for assistance as needed

Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract

Intermountain Healthcare , 36 S State Street, Ste 2200 , Salt Lake City, UT 84111

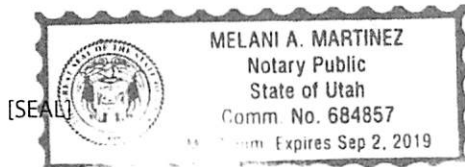
Outside institution, entity, business or person's address and phone number

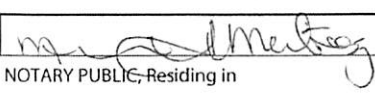
C. Describe below the nature of the assistance you are providing to the institution, entity, private business or person named above, or describe the nature of the economic interest or employment you hold in the private business. Also describe the relationship with or transaction between the business, institution, person, etc. and Salt Lake County. Use more sheets if necessary. *(This disclosure statement will not be accepted as valid unless this section is completed.)*

Was asked to assist in my transition out of my previous employer[Intermountain Healthcare] to provide help as needed via phone calls/email etc for knowledge transfer . In order for me to be able to do so, I was kept on the rolls as a 0 hour budgeted employee.

Covered Person's Signature 

SUBSCRIBED and SWORN to before me this 19th day of April, 2018.




NOTARY PUBLIC, Residing in

Salt Lake County	State
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*"Position" refers to any Salt Lake County office, appointment, employment, or uncompensated volunteer situation as described in the definition of "covered person."

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. Megan Hillyard Department Director, Administrative Services 385-468-7062
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State Street Suite N3-200 SLC, UT 84190
Covered Person's County Address/Volunteer's Address

B. SLC Green Bike
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
150 State Street SLC, UT 84111
Address and phone number of the institution, entity, business or person named above

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

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

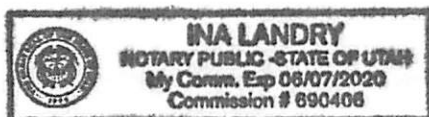
D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. *(This disclosure statement will not be accepted as valid unless this section is completed.)*

I was elected to serve as a member of SLC Green Bike on April 5th, 2018. SLC Green Bike sometimes receives funds from Salt Lake County.

 4/13/18
Megan Hillyard Digitally signed by Megan Hillyard
Covered Person's Signature Date: 2018.04.13 10:11:03 -06'00'

SUBSCRIBED and SWORN to before me this 13th day of April, 2018.

[SEAL]




NOTARY PUBLIC, Residing in
Salt Lake County UT
County State

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DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

A. James Burton GIS Intern - IS/GIS 385-468-0739
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
7835 S Honeycomb Rd, Cottonwood Heights, UT 84121
Covered Person's County Address/Volunteer's Address

B. Snowbird Ski Resort
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 GIS

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

9385 So Snowbird Center Dr., Snowbird, UT 84092
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.

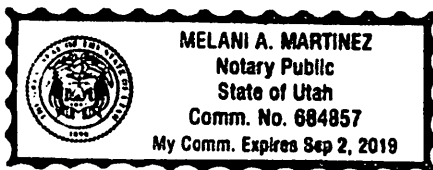
D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)

Access to county GIS Data and information that could be beneficial for Snowbird Ski Resort to know.

James Burton
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 12 day of May, 2018.

[SEAL]



Melani Martinez
NOTARY PUBLIC, Residing in

Salt Lake County UT
County State

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