

Jennifer Wilson Salt Lake County Mayor

Zachary Posner Chief Information Officer February 6, 2023

County Council Salt Lake County Government Center 2001 S. State Street Salt Lake City, UT 84190

Dear County Council,

Provided below is a list of names of individuals turning in a Conflict-of-Interest form for Information Technology:

Brent Thompson, Tinc Shave LLC Benjamin Thompson, Anusara Holdings, LLC Benjamin Thompson, Owner Produced Parts, LLC Benjamin Thompson, Elevated Technology Consulting, LLC Michael Welling, Home Depot Michael Welling, Vortex Fireworks Artists Prem Narayanan, University of Utah Valina Eckley, Cheer Salt Lake Cindy Beck, St. Paul's Episcopal Church Cindy Beck, Eccles Theatre Cindy Beck, Capital Theatre Cherie Root, Traditions HOA Isaac Pawling, Level Crossing Brewing Co. Mark Garrison, ReviewNet Corporation

Sincerely,

Zachary Digitally signed by Zachary Posner Date: 2023.02.06 14:56:31-0700'

Chief Information Officer Division Director

Megan Hillyard Digitally signed by Megan Hillyard Date: 2023.02.07 12:33:32 -07'00'

Megan Hillyard Administrative Services Department Director Michelle Hicks

Digitally signed by Michelle Hicks Date: 2023.02.14 17:53:39 -07'00'

Mayor's Office

SALT LAKE COUNTY GOVERNMENT CENTER

2001 S. State St. Ste. S3-600 Salt Lake City, UT 84190 385-468-0625 phone

> www.slco.org TTY: 7-1-1

(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.)

AR

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. Bre	ent Thompson	n Business Analyst	385-468-0710	
	ered Person	Position, or County Division for which you are employed	or volunteering County/Volunteer's Phone	
20	01 S. State S	treet Suite S3-600, Salt Lake City, UT 841	14	
Cove	ered Person's Coun	ty Address/Volunteer's Address		
B. Tin	c Shave Ice	LLC		
Outs is rea	quired in the above	ty, private business or person in which the Covered Person has section	s a personal or business interest for which disclosure	
	vner			
		, relationship or commitment to the institution, entity, busines	· · · · · · · · · · · · · · · · · · ·	
30	96 S. Waterle	af Way WVC Utah 84128 - 801-867-9628		
Add	ress and phone num	ber of the institution, entity, business or person named above		
C. Sel	ect the category that	t applies to yourself and the outside institution, entity, busine	ss or person identified in subsection (B) above:	
	I receive or have a	greed to receive compensation for assisting a person or busine	ess entity in a transaction involving Salt Lake County.	
X	Lake County.	rector, agent, employee or the owner of a substantial interest		
		rector, 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 an investment of other initiation interest that reades a potential of actual conflict with my public duties.			
	None of the above	e categories apply.		
ent		tion of the actual or potential conflicts of interest identified ab he County. Use more sheets if necessary. (This disclosure sto		
		that has a license with the SLCO Health Department.		
I declar	e under criminal pe	nalty under the law of Utah that the foregoing is true and corre	ect.	
Signed	on the $\frac{2}{Date}$ da	y of February , 2023 Month , Year ,		
West	t Valley City, Utah	i de la construcción de la constru		
at	or other location, a			
Brent T	hompson			
Printed	Name			
Brent	t K. Thompso	Digitally signed by Brent K. Thompson Date: 2023.02.06 10:48:50 -07'00'		
Signatu	re			

Zh

(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*.)

Benjamin Thomp Senior SharePoint Developer	80664
Covered Person Position, or County Division for which you are employed or volunteer	ring County/Volunteer's Phone
2001 S State St. Ste S3-600 Salt Lake City, UT 84114	
Covered Person's County Address/Volunteer's Address	
Anusara Holdings, LLC	
Outside institution, entity, private business or person in which the Covered Person has a personal is required in the above section	l or business interest for which disclosure
Co-Owner	
Covered person's status, relationship or commitment to the institution, entity, business or person	a named above
6432 S 900 East Murray, UT 84121	
Address and phone number of the institution, entity, business or person named above	
Select the category that applies to yourself and the outside institution, entity, business or person	a 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 busines Lake County.	is entity that is subject to the regulation of Sal
I am an officer, director, agent, employee or owner of a substantial interest in a business ent	tity that does or anticipates doing business wit
Salt Lake County.	de en en blie de dies
I hold an investment or other financial interest that creates a potential or actual conflict with I hold a personal interest that creates a potential or actual conflict with my public duties.	in my public duties.
None of the above categories apply.	
Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will is completed.</i>)	
Anusara Holdings, LLC owns and operates residential rental properties, none of which	are presently within Salt Lake
County. My wife and I are co-owners of this company.	
leclare under criminal penalty under the law of Utah that the foregoing is true and correct.	
gned on the ³⁰ day of ^{January} 2023	
Date Month , Year	
Murray, UT	

City or other location, and state or county

Benjamin Thompson

Printed Name Benjamin Thompson Digitally signed by Benjamin Thompson Date: 2023.01.30 14:28:32 -07'00'

Signature

at

N

(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	Benjamin Thomp Senior SharePoint Developer	80664
1 8.	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	2001 S State St. Suite S3-600 Salt Lake City, UT 84114	
	Covered Person's County Address/Volunteer's Address	
B.	Owner Produced Parts, LLC.	
D.	Outside institution, entity, private business or person in which the Covered Person has a personal or bus is required in the above section	siness interest for which disclosure
	Owner	
	Covered person's status, relationship or commitment to the institution, entity, business or person named	d above
	6432 S 900 East Murray, UT 84121	
	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 identi	fied in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a trans	action involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity	y that is subject to the regulation of Salt
	Lake County. I am an officer, director, agent, employce or owner of a substantial interest in a business entity that	t does or anticipates doing business with
	Salt Lake County.	t does of anticipates doing business with
	I hold an investment or other financial interest that creates a potential or actual conflict with my p	public duties.
	I hold a personal interest that creates a potential or actual conflict with my public duties.	
	X None of the above categories apply.	
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the natur entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be</i> <i>is completed.</i>)	
	Owner Produced Parts salvages and resells parts for small General Aviation aircraft. Other t	han operating within Salt Lake
	County, it currently does no business with the county, and does not anticipate doing so in the	e future.
Id	leclare under criminal penalty under the law of Utah that the foregoing is true and correct.	
	0000	
Sig	gned on the $\frac{30}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2023}{\text{Year}}$,	
	Murray, UT	

City or other location, and state or county

Benjamin Thompson

Printed Name

Benjamin Thompson Digitally signed by Benjamin Thompson Date: 2023.01.30 14:31:05 -07'00'

Signature

at

1 12.

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Covered Person Position, or County Division for which you are employed or volunteering 2001 S State St. Suite S3-600 Salt Lake City, UT 84114 Covered Person's County Address/Volunteer's Address B. Elevated Technology Consulting, LLC Outside institution, entity, private business or person in which the Covered Person has a personal or business is required in the above section Co-OWner Covered person's status, relationship or commitment to the institution, entity, business or person named abov 6432 S 900 East Murray, UT 84121 Address and phone number of the institution, entity, business or person identified in I receive or have agreed to receive compensation for assisting a person or business entity in a transaction I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that does is alt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does is alt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public if hold a person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accept is completed.</i>) D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accept is completed.</i>) Elevated Teechnology Cons	subsection (B) above: involving Salt Lake County. is subject to the regulation of S				
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I declare under criminal penalty under the law of Utah that the foregoing is true and correct.					
Signed on the $\frac{30}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2023}{\text{Year}}$,					
Murray, UT					
City or other location, and state or county					

Benjamin Thompson

Printed Name

Benjamin Thompson Digitally signed by Benjamin Thompson Date: 2023.01.30 14:32:32 -07'00'

Signature

1/1

(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*.)

٩.	Michael Welling Service Desk Lead Technician	385-468-0718			
-	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone			
	2001 S. State Street, Suite S3-600 Salt Lake City, Utah 84114				
	Covered Person's County Address/Volunteer's Address				
3.	Home Depot				
	Outside institution, entity, private business or person in which the Covered Person has a personal or l is required in the above section	business interest for which disclosure			
	Part Time - Freight Unload				
	Covered person's status, relationship or commitment to the institution, entity, business or person nam	ned above			
	885 West Grassland Dr American Fork, Utah 84003 (801)763-8640				
	Address and phone number of the institution, entity, business or person named above				
	Select the category that applies to yourself and the outside institution, entity, business or person idea	ntified in subsection (B) above:			
	I receive or have agreed to receive compensation for assisting a person or business entity in a tra	nsaction involving Salt Lake County.			
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Sal				
	Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity the	hat does or anticipates doing business with			
	Salt Lake County.	NAME OF A			
	I hold an investment or other financial interest that creates a potential or actual conflict with my I hold a personal interest that creates a potential or actual conflict with my public duties.	y public duties.			
None of the above categories apply.					
).	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nat entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not</i> <i>is completed.</i>)				
	Home Depot has businesses in Salt Lake County, but I only work at the American Fork loc	ation in Utah County			
de	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.				
uc	sense under erminnar penalty under the law of ortan unit the foregoing is the and correct.				

Signed on the $\frac{23 \text{rd}}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2023}{\text{Year}}$,

Date Month Year Salt Lake County Government Center

at _______ City or other location, and state or county

Michael Welling

Printed Name Michael Welling Digitally signed by Michael Welling Date: 2023.01.23 09:47:40 -07'00'

Signature

ZA

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

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Michael Welling	Service Desk Lea	ad Technician	385-468-0718
Covered Person	Position, or County Divis	ion for which you are employed or volunteering	County/Volunteer's Phone
2001 S. State St	reet, Suite S3-600	Salt Lake City, Utah 84114	
Covered Person's County	y Address/Volunteer's Add	ress	
Vortex Fireworks	Artists		
Outside institution, entity is required in the above s		n in which the Covered Person has a personal or busin	ess interest for which disclosure
Pyrotechnician			
Covered person's status,	relationship or commitmen	t to the institution, entity, business or person named a	ibove
1865 South, Was	satch Dr E, Salt La	ke City, UT 84108 (801) 580-6389	
Address and phone numb	per of the institution, entity,	business or person named above	
Select the category that	applies to yourself and the	outside institution, entity, business or person identified	ed in subsection (B) above:
1 receive or have ag	greed to receive compensati	on for assisting a person or business entity in a transact	tion involving Salt Lake County.
Lake County.		ne owner of a substantial interest in a business entity t	
I am an officer, dire Salt Lake County.	ector, agent, employee or ov	wher of a substantial interest in a business entity that of	loes or anticipates doing business w
Statistical Control of	nt or other financial interes	that creates a potential or actual conflict with my pu	blic duties.
		al or actual conflict with my public duties.	
X None of the above	categories apply.		
		conflicts of interest identified above, i.e., the nature if necessary. (<i>This disclosure statement will not be a</i>	
Vortex does firework	shows in Salt Lake Cour	nty	
eclare under criminal nen	alty under the law of Utah t	hat the foregoing is true and correct.	
	2		
gned on the Date day	of January , 2023	- 3	
Salt Lake County Gove	monu		
some many sources sources	and the second sec		

City or other location, and state or county

Michael Welling

Printed Name Michael Welling Digitally signed by Michael Welling Date: 2023.01.23 09:46:05 -07'00'

Signature

at

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.)

1.P.

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.	Prem Narayanan Principal Data Engineer/IT	801 618 4950
	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	2001 S State St, Salt Lake City, UT 84190	
	Covered Person's County Address/Volunteer's Address	
B.	University of Utah	
<i>D</i> .	Outside institution, entity, private business or person in which the Covered Person has a personal or busin is required in the above section	ness interest for which disclosure
	Adjunct Instructor/PhD Research Statistician	
	Covered person's status, relationship or commitment to the institution, entity, business or person named a	bove
	201 Presidents Cir, Salt Lake City, UT 84112	
	Address and phone number of the institution, entity, business or person named above	
C.	Select the category that applies to yourself and the outside institution, entity, business or person identified	ed in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a transac	- W NA READER OF DEPENDING STATE 12
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity t	
	Lake County.	
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that d Salt Lake County.	loes or anticipates doing business with
	I hold an investment or other financial interest that creates a potential or actual conflict with my pul	blic 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 entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be ac</i> <i>is completed.</i>)	
	PhD Researcher/Associate Instructor at University of Utah in the Department of Family and Co	onsumer Studies.
	https://faculty.utah.edu/u0755115-PREMKUMAR_NARAYANAN/teaching/index.hml	
I d	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.	
Si	gned on the $\frac{30}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2023}{\text{Year}}$,	
6	Date Month Year	
at	Salt Lake City , UT	

City or other location, and state or county

PREM NARAYANAN

Printed Name

Prem Narayanan Digitally signed by Prem Narayanan Date: 2023.01.30 14:30:20 -07'00'

Signature

M

(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*.)

Valina Eckley	Information Technology	8-0714
Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
2001 S State S	Street S3-600	
Covered Person's Co	unty Address/Volunteer's Address	
Cheer Salt La	(e	
Outside institution, en is required in the above	ntity, private business or person in which the Covered Person has a personal or busive section	iness interest for which disclosure
Founder/Direc	tor	
Covered person's stat	us, relationship or commitment to the institution, entity, business or person named	labove
3556 S 5600 \	V #1-752	
Address and phone ne	umber of the institution, entity, business or person named above	
Select the category t	hat applies to yourself and the outside institution, entity, business or person identif	fied in subsection (B) above:
	e agreed to receive compensation for assisting a person or business entity in a transa	
	director, agent, employee or the owner of a substantial interest in a business entity	
Lake County.		
I am an officer, Salt Lake Coun	director, agent, employee or owner of a substantial interest in a business entity that tv.	does or anticipates doing business w
I hold an invest	ment or other financial interest that creates a potential or actual conflict with my p	ublic duties.
I hold a persona	al interest that creates a potential or actual conflict with my public duties.	
X None of the abo	ove categories apply.	
Give a detailed desc entity or person wit is completed.)	ription of the actual or potential conflicts of interest identified above, i.e., the nature h the County. Use more sheets if necessary. (<i>This disclosure statement will not be</i>	e of the relationship of each business accepted as valid unless this section
I am the founder a	and director of this non profit, and we do not foresee doing any business wi	th Salt Lake County. However
I disclose this eve	ry year just to protect myself.	
leclare under criminal	penalty under the law of Utah that the foregoing is true and correct.	
	day of, 2023	
gned on the $\frac{17}{Date}$	day of Month, Year,	
Salt Lake City		
City or other location	and state or county	
eny or other location	, and share or county	
alina Eckley		

Printed Name Valina Eckley Digitally signed by Valina Eckley Date: 2023.01.17 10:09:51 -07'00'

Signature

UN

(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.	CINDY BECK	OFFICE COORDINATOR	385-468-0625
-	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	2001 S STATE S	ST S3-600 SLC UT 84190	
(Covered Person's Count	y Address/Volunteer's Address	
B.	ST. PAUL'S EPI	SCOPAL CHURCH	
(Outside institution, entity s required in the above s	y, private business or person in which the Covered Person has a personal or busin	ness interest for which disclosure
	SCHEDULER		
(Covered person's status,	relationship or commitment to the institution, entity, business or person named a	above
	261 S 900 E SL	C UT 84102 801-322-5869	
	Address and phone num	per of the institution, entity, business or person named above	
C.	Select the category that	applies to yourself and the outside institution, entity, business or person identified	ed in subsection (B) above:
	I receive or have as	greed to receive compensation for assisting a person or business entity in a transac	tion involving Salt Lake County.
	I am an officer, dir Lake County.	ector, agent, employee or the owner of a substantial interest in a business entity t	that is subject to the regulation of Salt
	I am an officer, dir	ector, agent, employee or owner of a substantial interest in a business entity that c	loes or anticipates doing business wit
	Salt Lake County.	nt or other financial interest that creates a potential or actual conflict with my pu	blic duties.
		terest that creates a potential or actual conflict with my public duties.	
	X None of the above	categories apply.	
D.		ion of the actual or potential conflicts of interest identified above, i.e., the nature of e County. Use more sheets if necessary. (<i>This disclosure statement will not be a</i>	
	CREATE QUARTER	LY SCHEDULES, TRAIN, LAUNDER VESTEMENTS FOR ACOLYTES (OF THE CHURCH.
I de	clare under criminal pen	alty under the law of Utah that the foregoing is true and correct.	
Sig	ned on the 30 day	y of, 2023	
0	Date	Month , Year	
5	SALT LAKE COUNTY		

at _______ City or other location, and state or county

CINDY BECK

Printed Name		
Cindy Beck	Digitally signed by Cindy Beck Date: 2023.01.30 14:28:06 -07'00'	

Signature

1M.

(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*.)

CINDY BECK	DIVISION OFFICE COORDINATOR	385-468-0625		
Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone		
2001 S STATE S	STREET S3-600 SLC UT 84190			
Covered Person's Count	y Address/Volunteer's Address			
ECCLES THEAT	IRE			
Outside institution, entit is required in the above		ness interest for which disclosure		
WARDROBE/DF	RESSER			
Covered person's status,	relationship or commitment to the institution, entity, business or person named a	above		
131 S MAIN ST	SLC UT 84111			
Address and phone num	ber of the institution, entity, business or person named above			
Select the category that	applies to yourself and the outside institution, entity, business or person identified	ed in subsection (B) above:		
I receive or have a	greed to receive compensation for assisting a person or business entity in a transac	tion involving Salt Lake County.		
I am an officer, dir Lake County.	rector, agent, employee or the owner of a substantial interest in a business entity	that is subject to the regulation of Sa		
	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.	nt or other financial interest that creates a potential or actual conflict with my pu	blic duties.		
	I hold a personal interest that creates a potential or actual conflict with my public duties.			
X None of the above	categories apply.			
	ion of the actual or potential conflicts of interest identified above, i.e., the nature is county. Use more sheets if necessary. (<i>This disclosure statement will not be a</i>			
I am a dresser for ba	llet dancers/talent for this venue.			
declare under criminal pen	alty under the law of Utah that the foregoing is true and correct.			
igned on the 5 day	y of January 2023			
Date Date	Month 'Year'			
SALT LAKE COUNTY				

at ______ City or other location, and state or county

CINDY BECK

Printed Name	
Cindy Beck	Digitally signed by Cindy Beck Date: 2023.01.05 09:54:22 -07'00'

Signature

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

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

Cindy Beck	Office Coordinator	385-468-0625				
Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone				
2001 S State	St s3-600 SLC UT 84190					
Covered Person's County Address/Volunteer's Address						
Capital Theat	re					
	entity, private business or person in which the Covered Person has a personal or business over section	ness interest for which disclosure				
wardrobe/dre	sser					
Covered person's st	Covered person's status, relationship or commitment to the institution, entity, business or person named above					
50 W 200 S S	Salt Lake City 84101					
Address and phone	number of the institution, entity, business or person named above					
. Select the category	that applies to yourself and the outside institution, entity, business or person identific	ed in subsection (B) above:				
I receive or ha	ve agreed to receive compensation for assisting a person or business entity in a transac	ction involving Salt Lake County.				
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 Sa 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 w 					
	nty. stment or other financial interest that creates a potential or actual conflict with my pu nal interest that creates a potential or actual conflict with my public duties.	blic duties.				
X None of the a	bove categories apply.					
	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)					
Dress the dance	rs/singers in their costumes.					
declare under crimina	penalty under the law of Utah that the foregoing is true and correct.					
igned on the Date	_ day of January , 2023 Month , Year ,					
A.F. 585.W	ATACALLA A MAR					

at ______Salt Lake County

City or other location, and state or county

Cindy Beck

Printed Name	
Cindy Beck	Digitally signed by Cindy Beck Date: 2023.01.05 09:46:11 -07'00'
All and the second s	

Signature

U.l.

(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 Employces 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	Cherie Root	Information Technology	385-468-0729
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	2001 S. State S	treet, S3-600 SLC, UT 84190	
13	Covered Person's Coun	ty Address/Volunteer's Address	
B.	Traditions HOA		
	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		
13	Treasurer		
1	Covered person's status	, relationship or commitment to the institution, entity, business or person named	above
	PO Box 571885 SLC, UT 84157 801-571-5597		
	Address and phone num	ber of the institution, entity, business or person named above	11/2 SEVA
C.	Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:		
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.		
	I am an officer, di	rector, agent, employee or the owner of a substantial interest in a business entity	NUMBER AND DESCRIPTION OF ALL PRODUCTS
	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 w 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		
D			of the relationship of each huviness
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)		
		Salt Lake County, so we (the HOA Board) are subject to County Ordinar	nce and regulations.
l de		alty under the law of Utah that the foregoing is true and correct.	
Sim	and on the 19th da	y of January 2023	
orgi	Date	Month , Year	
S	alt Lake City, UT		
at	ity or other location, an	nd state or county	
Che	rie Root		
Print	red Name	1 ash	
Sign	ature	and Vert	

(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*.)

Isaac Pawling	Assoc Software Eng	7179898119	
Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone	
2001 State St, S	Salt Lake City, UT 84190		
Covered Person's Coun	ty Address/Volunteer's Address		
Level Crossing	Brewing Co.		
Outside institution, enti is required in the above	ty, private business or person in which the Covered Person has a personal or bus section	iness interest for which disclosure	
Employee			
Covered person's status	overed person's status, relationship or commitment to the institution, entity, business or person named above		
2496 S. W. Ten	nple, South Salt Lake, UT 84115	(385) 375 - 7329	
Address and phone nun	ber of the institution, entity, business or person named above		
Select the category that	at applies to yourself and the outside institution, entity, business or person identit	fied in subsection (B) above:	
I receive or have a	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, d 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 Sa		
	rector, agent, employee or owner of a substantial interest in a business entity that	does or anticipates doing business w	
Salt Lake County	ent or other financial interest that creates a potential or actual conflict with my p	ublic duties.	
	interest that creates a potential or actual conflict with my public duties.		
None of the above	e categories apply.		
	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)		
I work part-time at L	evel Crossing Brewing Co., which is subject to Salt Lake County Health	Department regulations.	
eclare under criminal ne	nalty under the law of Utah that the foregoing is true and correct.		
gned on the $\frac{3}{\text{Date}}$ da	y of February ,2023 Month ,Year,		
ALC: 10.0 W	171711111		

at South Salt Lake, UT at City or other location, and state or county Isaac Pawling Printed Name Isaac Pawling Digitally signed by Isaac Pawling Date: 2023.02.03 09:58:21 -07'00'

Signature

1/4

(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 penaltics of perjury, make the following statement regarding my personal or business interest. (*Type or print all information*.)

A.	Mark Garrison	Project Manager, Information Services	385-468-7993	
<i>(</i>) ,	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone	
	2001 S State St	reet, Salt Lake City, UT 84114		
	Covered Person's Count	ty Address/Volunteer's Address		
B.	ReviewNet Corp	poration		
	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			
	Co-Owner			
	Covered person's status	, relationship or commitment to the institution, entity, business or person named	above	
	425 W 200 N Unit 360, Salt Lake City, UT 84103 215-572-9400			
	Address and phone num	ber of the institution, entity, business or person named above		
C.	Select the category that	t applies to yourself and the outside institution, entity, business or person identif	ied in subsection (B) above:	
	I receive or have a	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.		
	I am an officer, di	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.	rector, agent, employee or owner of a substantial interest in a business entity that	dose or anticipates doing business with	
	Salt Lake County.	0	ubes of anticipates doing business with	
	Recently 1	ent or other financial interest that creates a potential or actual conflict with my po	iblic duties.	
	Land Land	interest that creates a potential or actual conflict with my public duties.		
	None of the above	a: 16.4		
D.		tion of the actual or potential conflicts of interest identified above, i.e., the nature he County. Use more sheets if necessary. (<i>This disclosure statement will not be a</i>		
	There are no conflict and other IT staff. R	ts of interest. ReviewNet is a small company that produces IT skill tests f ReviewNet does have a contract with ICIMS, which Salt Lake has recently s part of the hiring process, and those tests may be using ReviewNet con	implemented. User of iCIMS	
		an agreement with Skill Check, a division of Symphony Talent to distribu k also has an agreement with iCIMS.	te ReviewNet tests under their	
	The volume of these ReviewNet and myse	e tests by Salt Lake County and the resulant revenue is likely to be neglig elf.	ble and is out of the control of	
10	lectare under criminal per	nalty under the law of Utah that the foregoing is true and correct.		
Si	gned on the $\frac{30}{\text{Date}}$ da	ay of January 2023		
		Month Year		
:11	Salt Lake City, UT			
	City or other location, a	and state or county		
M	ark Garrison			

Printed Name

Signature