

March 7, 2023

Karen Crompton, Director
Salt Lake County Human Services
2001 S. State Street, Suite N3-200
Salt Lake City, UT 84190

Dear Karen:

The Salt Lake County Health Department submits the following County Disclosure forms for review:

EMPLOYEES:

- Dorothy D Vilven, Zest Kitchen & Bar
- Nicholas Rupp, MRJ Studio, LLC

If you have any questions, please do not hesitate to contact me.

Sincerely,



Angela C. Dunn, MD MPH
Executive Director

Karen
Crompton
Department Director

Digitally signed by Karen
Crompton
Date: 2023.03.10
15:57:40 -07'00'

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. Dorothy D Vilven Health Department - Medical Division 801-520-6321
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
610 S 200 E, Salt Lake City 84111

Covered Person's County Address/Volunteer's Address

B. Zest Kitchen & Bar
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 as a prep-cook

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

275 S 200 W, Salt Lake City, UT 84101

Address and phone number of the institution, entity, business or person named above

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.
- None of the above categories apply.

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

This is a business in Salt Lake County, it is a business that serves food and is permitted by Salt Lake County to do so. For my job at Salt Lake County I investigate food borne illness outbreaks. There may be a potential conflict of interest if there was ever a food borne illness outbreak at this business. In the event that this might happen, I would not like to be part of that investigation.

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

Signed on the 21 day of February, 2023
Date Month Year

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

Dorothy D Vilven
Printed Name

Dede Vilven Digitally signed by Dede Vilven
Date: 2023.02.21 16:07:15 -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.

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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. Nicholas Rupp Health Department 385-468-4130
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State Street, Suite S2-600; Salt Lake City, UT 84190
Covered Person's County Address/Volunteer's Address

B. MRJ Studio, 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
Officer of the LLC
Covered person's status, relationship or commitment to the institution, entity, business or person named above
3459 W 3800 S, West Valley, 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.
 - None of the above categories apply.

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

I am an officer of the above-named LLC and the LLC plans to submit a bid to offer web hosting services to a multi-county coalition, of which Salt Lake County is a member.

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

Signed on the 07 day of March, 2023
Date Month Year

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

Nicholas Rupp
Printed Name
Nicholas Rupp Digitally signed by Nicholas Rupp
Date: 2023.03.07 12:39:00 -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.