

Jennifer WilsonSalt Lake County Mayor

Zachary Posner Chief Information Officer February 2, 2024

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 individuals submitting a Conflict-of-Interest form for Information Technology.

- 1. Ben Thompson, Anusara Holdings, LLC
- 2. Ben Thompson, Elevated Technology Consulting, LLC
- 3. Ben Thompson, Owner Produced Parts, LLC
- 4. Brent Thompson, Tinc Shave, LLC
- 5. Cherie Root, Traditions HOA
- 6. Cindy Beck, Capital Theatre
- 7. Cindy Beck, Eccles Theatre
- 8. Cindy Beck, St. Paul's Episcopal Church
- 9. LeAnne Hodges, The Tea Grotto
- 10. Michael Welling, Home Depot
- 11. Prem Narayanan, University of Utah
- 12. Trevor Hebditch, Salt Lake Astronomical Society
- 13. Valina Eckley, Cheer Salt Lake
- 14. Zachary Posner, Emigration Canyon Community Council

Sincerely,

Zachary Posner Digitally signed by Zachary Posner Date: 2024.02.01 14:18:09-07'00'

Zachary Posner Chief Information Officer Division Director

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

Megan Hillyard Administrative Services Department Director

Mayor's Office

(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		
Covered Person Position, or County Division for which you are employed or volun	teering 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.} Anusara Holdings, LLC			
Outside institution, entity, private business or person in which the Covered Person has a person is required in the above section	onal or business interest for which disclosure		
Co-Owner			
Covered person's status, relationship or commitment to the institution, entity, business or per	son named 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 per	eson identified in subsection (B) above:		
I receive or have agreed to receive compensation for assisting a person or business entity	* *		
I am an officer, director, agent, employee or the owner of a substantial interest in a business.			
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	5.		
None of the above categories apply.			
 Give a detailed description of the actual or potential conflicts of interest identified above, i.e., entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement vis completed.</i>) 			
Anusara Holdings, LLC owns and operates residential rental properties, none of wh County. My wife and I are co-owners of this company.	ich are presently within Salt Lake		
declare under criminal penalty under the law of Utah that the foregoing is true and correct.			
Signed on the Date day of Month , 2024 , Year			
Murray, UT			
City or other location, and state or county			
Benjamin Thompson			
rinted Name			
21 COLINITY\bothompson Digitally signed by SLCOUNTY\bbthompson	Zachary Digitally signed by Zachary Posner		
Signature	Posner Date: 2024.02.01 14:27:46 -07'00'		

(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. Ber	njamin Thom	p Senior SharePoin	t Developer	80664
	red Person	Position, or County Division	on for which you are employed or volunteering	County/Volunteer's Phone
200	1 S State St	. Suite S3-600 Salt I	_ake City, UT 84114	
Cove	red Person's Count	ty Address/Volunteer's Addre	ess	
B. Ele	vated Techno	ology Consulting, LL	.C	
Outsi	de institution, entit uired in the above		in which the Covered Person has a personal or but	siness interest for which disclosure
Co-	-Owner			
Cove	red person's status,	relationship or commitment	to the institution, entity, business or person named	d above
643	32 S 900 Eas	t Murray, UT 84121		
Addre	ess and phone num	ber of the institution, entity, l	ousiness or person named above	
C. Sele	ct the category that	t applies to yourself and the o	utside institution, entity, business or person identi	fied in subsection (B) above:
-		• •	n for assisting a person or business entity in a trans	* *
		_	owner of a substantial interest in a business entity	
	Lake County. I am an officer, dir		ner of a substantial interest in a business entity that	
			hat creates a potential or actual conflict with my p or actual conflict with my public duties.	public duties.
	None of the above	_	of actual commet with my public duties.	
D. Give	e a detailed descript	ion of the actual or potential	conflicts of interest identified above, i.e., the nature f necessary. (This disclosure statement will not be	
	mpleted.)	•		
with	in and outside of	Salt Lake County. Other to	ulting and contract programming to small to ment han being located in Salt Lake County, it does it intend to. This entity is co-owned with my be it intend to.	s not do any business with the
declare	-	•	at the foregoing is true and correct.	
igned or	the $\frac{30}{\text{Date}}$ day	$\sqrt{\text{of}} \frac{\text{January}}{\text{Month}}, \frac{2024}{\text{Year}},$		
Murra				
City or	other location, an	d state or county		
enjamir	n Thompson			
inted Na	ame			— Digitally signed
LCOU	NTY\bbthompsoi	Digitally signed by SLCOUNTY\bbthom Date: 2024.01.30 11:06:49 -07'00'	pson	Zachary by Zachary Posner Posner Date: 2024.02.01 14:27.07-0700

(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 1.	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	
В.	Owner Produced Parts, LLC.	
Σ.	Outside institution, entity, private business or person in which the Covered Person has a personal or business required in the above section	iness interest for which disclosure
	Owner	
	Covered person's status, relationship or commitment to the institution, entity, business or person named	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 identifi	led in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a transa-	, ,
	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 that	does or anticipates doing business wit
	Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my pu	ablic duties
	I hold a personal interest that creates a potential or actual conflict with my public duties.	ione 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 entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be a is completed.</i>)	
	Owner Produced Parts salvages and resells parts for small General Aviation aircraft. Other th	
	County, it currently does no business with the county, and does not anticipate doing so in the	future.
I de	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.	
Sig	aned on the $\frac{30}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2024}{\text{Year}}$,	
N	Murray, UT	
at _	City or other location, and state or county	
	njamin Thompson	
	nted Name	
SLO	COUNTY\bbthompson Digitally signed by SLCOUNTY\bbthompson Date: 2024.01.30 11:08:02 -07'00'	Zachary Digitally signed by Zachary Pos Posner Date: 2024 02.2 Posner 14:26:29-9705

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*.)

A. Brent Thompson Business Analyst	385-468-0710
Covered Person Position, or County Division for which you are employed or	r volunteering County/Volunteer's Phone
2001 S. State Street Suite S3-600, Salt Lake City, UT 8411	14
Covered Person's County Address/Volunteer's Address	
B. Tinc Shave Ice LLC	
Outside institution, entity, private business or person in which the Covered Person has is required in the above section	a personal or business interest for which disclosure
Owner	
Covered person's status, relationship or commitment to the institution, entity, business	s or person named above
3096 S. Waterleaf Way WVC Utah 84128 - 801-867-9628	
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	s or person identified in subsection (B) above:
I receive or have agreed to receive compensation for assisting a person or business	• • • • • • • • • • • • • • • • • • • •
I am an officer, director, agent, employee or the owner of a substantial interest in Lake County.	a business entity that is subject to the regulation of Salt
I am an officer, director, agent, employee or owner of a substantial interest in a but Salt Lake County.	
I hold an investment or other financial interest that creates a potential or actual or I hold a personal interest that creates a potential or actual conflict with my public	* *
None of the above categories apply.	
D. Give a detailed description of the actual or potential conflicts of interest identified above entity or person with the County. Use more sheets if necessary. (<i>This disclosure state is completed.</i>)	
I operate a business that has a license with the SLCO Health Department.	
	,
	,
I declare under criminal penalty under the law of Utah that the foregoing is true and correct	t.
Signed on the 11 day of January 2024	
Date Month 'Year'	
West Valley City, Utah	
City or other location, and state or county	
Brent Thompson	
Printed Name Digitally signed by Brent K. Thompson	Zachary ^{Digitally} sig
Brent K. Thompson Date: 2024.01.11 09:07:14 -07'00'	Posner Posner 14:25:37-0:

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*.)

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	Street, S3-600 SLC, UT 84190	
	nty Address/Volunteer's Address	
B. Traditions HOA		
is required in the abov	tity, private business or person in which the Covered Person has a personal or busi e section	ness interest for which disclosure
Treasurer		
	is, relationship or commitment to the institution, entity, business or person named	above
PO Box 57188	5 SLC, UT 84157 801-571-5597	
Address and phone nu	mber of the institution, entity, business or person named above	
C. Select the category th	at applies to yourself and the outside institution, entity, business or person identification.	ed in subsection (B) above:
I receive or have	agreed to receive compensation for assisting a person or business entity in a transact	tion involving Salt Lake County.
I am an officer, o	lirector, agent, employee or the owner of a substantial interest in a business entity t	hat is subject to the regulation of Sa
Lake County. I am an officer, d	irector, agent, employee or owner of a substantial interest in a business entity that d	loes or anticipates doing business wi
Salt Lake County	<i>1.</i>	
I hold a personal	nent or other financial interest that creates a potential or actual conflict with my pul interest that creates a potential or actual conflict with my public duties.	blic duties.
Revenue de la companya del companya de la companya della companya	e categories apply.	
D. Give a detailed descri	otion of the actual or potential conflicts of interest identified above, i.e., the nature of	of the relationship of each business
entity or person with is completed.)	the County. Use more sheets if necessary. (This disclosure statement will not be accepted to the county.)	ccepted as valid unless this section
	n Salt Lake County, so we (the HOA Board) are subject to County Ordinan	ce and regulations.
	, , , , , , , , , , , , , , , , , , , ,	
declare under criminal per	nalty under the law of Utah that the foregoing is true and correct.	
Signed on the Date	y of Month, 2024, Year	
Salt Lake City, UT		
City or other location, a	nd state or county	
Cherie Root	•	
rinted Name		

This statement is a public document. It must be filed with the covered person's immediate supervisor, volunteer or community liaison, division director, department director or elected official, and the County Council. It must be filed when the potential conflict arises and refiled every January, as long as the potential conflict exists.

Zachary Digitally signed by Zachary Posner Date: 2024.02.01 14:24:44 -07'00'

(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.	CINDA RECK	OFFICE COORDINATOR	385-468-0625		
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone		
		ST S3-600 SLC UT 84190			
		ty Address/Volunteer's Address			
В.	CAPITAL THEA	TRE			
	is required in the above		ness interest for which disclosure		
	WARDROBE/DE	RESSER			
	Covered person's status.	relationship or commitment to the institution, entity, business or person named	above		
	50 W 200 S SLC	CUT 84101			
	Address and phone num	ber 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 identification.	ed in subsection (B) above:		
	I receive or have a	greed to receive compensation for assisting a person or business entity in a transact	ction involving Salt Lake County.		
	I am an officer, die Lake County.	rector, agent, employee or the owner of a substantial interest in a business entity	that is subject to the regulation of Salt		
	I am an officer, dir 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			
		nt or other financial interest that creates a potential or actual conflict with my puriterest that creates a potential or actual conflict with my public duties.	blic duties.		
	None of the above				
D.	Give a detailed descript entity or person with the is completed.)	ion of the actual or potential conflicts of interest identified above, i.e., the nature of the County. Use more sheets if necessary. (This disclosure statement will not be a	of the relationship of each business ccepted as valid unless this section		
		OR DANCERS/TALENT FOR THIS VENUE. (BALLET/OPERA)			
		,			
I de		alty under the law of Utah that the foregoing is true and correct.			
Sig	ned on the 12 day	of January , 2024			
	Date	Month Year			
	SALT LAKE COUNTY				
at _	City or other location, an	d state or county			
CIN	IDY BECK				
Prin	ted Name	D Oc	— Digitally signed		
(may	Dell.	Zacnary by Zachary Posner Posner Date: 2024.02.0		
Sign	nature		14:24:08 -07'00		

(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
Λ.	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	
В.	ECCLES THEAT	ΓRE	
	Outside institution, entit is required in the above	y, private business or person in which the Covered Person has a personal or busi section	ness interest for which disclosure
	WARDROBE/DF	RESSER	
		relationship or commitment to the institution, entity, business or person named	above
	131 S MAIN ST	SLC UT 84111	
	Address and phone num	ber 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 identification.	ed in subsection (B) above:
	I receive or have a	greed to receive compensation for assisting a person or business entity in a transact	ction 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 Sal
		ector, agent, employee or owner of a substantial interest in a business entity that of	does or anticipates doing business wit
	Salt Lake County. I hold an investme	nt or other financial interest that creates a potential or actual conflict with my pu	blic duties.
		nterest 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 e County. Use more sheets if necessary. (<i>This disclosure statement will not be a</i>	
		OR DANCERS/TALENT FOR THIS VENUE.	
I de	eclare under criminal pena	alty under the law of Utah that the foregoing is true and correct.	
Sig	ned on the 12 Date day	of January , 2024 , Year ,	
	SALT LAKE COUNTY		
at	City or other location, an	d state or county	
CIN	NDY BECK		
rir	ited Name	ρ	
	11111	Reclis	Zachary

This statement is a public document. It must be filed with the covered person's immediate supervisor, volunteer or community liaison, division director, department director or elected official, and the County Council. It must be filed when the potential conflict arises and refiled every January, as long as the potential conflict exists.

Posner Date: 2024.02.01 14:23:37 -07'00'

(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 COORDINA	TOR	385-468-0625
	Covered Person	Position, or County Division fo	r which you are employed or volunteering	County/Volunteer's Phone
	2001 S STATE \$	ST S3-600 SLC UT 841	90	
	Covered Person's Count	ty Address/Volunteer's Address		
В.	ST PAUL'S EPIS	SCOPAL CHURCH		
	is required in the above		hich the Covered Person has a personal or busi	ness interest for which disclosure
	SCHEDULER			
		•	e institution, entity, business or person named	above
		C UT 84102 801-322-5		
	Address and phone num	ber of the institution, entity, busin	ess or person named above	
C.	Select the category that	t applies to yourself and the outsid	e institution, entity, business or person identifi	ed in subsection (B) above:
	I receive or have a	greed to receive compensation for	assisting a person or business entity in a transact	ction involving Salt Lake County.
		rector, agent, employee or the owr	er of a substantial interest in a business entity	that is subject to the regulation of Salt
	Lake County. I am an officer, dir Salt Lake County.		f a substantial interest in a business entity that of	does or anticipates doing business with
	I hold an investme	ent or other financial interest that c	reates a potential or actual conflict with my pu	blic duties.
	I hold a personal in	nterest that creates a potential or a	ctual conflict with my public duties.	
	X None of the above	categories apply.		
D.			icts of interest identified above, i.e., the nature essary. (This disclosure statement will not be a	
	CREATE QUARTER	RLY SCHEDULES, TRAIN, LAU	INDER VESTEMENTS FOR ACOLYTES (OF THE CHURCH.
de		alty under the law of Utah that the	foregoing is true and correct.	
Sigr	ned on the $\frac{16}{\text{Date}}$ day	of January , 2024 Month , Year		
S	ALT LAKE COUNTY			
t _ C	ity or other location, an	nd state or county		
ZIN	DY BECK			
rin	ted Name			Zo cho pro Digitally signed
Ci	ndy Beck	Digitally signed by Cindy Beck Date: 2024.01.16 10:05:09 -07'00'		Zachary by Zachary Posner Posner Date: 2024.02.0

Signature

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*.)

A.	LeAnne Hodges Web Content Specialist - Information Technology	385-468-0700
2 1.	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	2001 South State St, Ste S3-600 Salt Lake City, Utah 84190	
	Covered Person's County Address/Volunteer's Address	-
В.	The Tea Grotto	
Б.	Outside institution, entity, private business or person in which the Covered Person has a personal or business is required in the above section	ess interest for which disclosure
	Part-time employee	
	Covered person's status, relationship or commitment to the institution, entity, business or person named about	oove
	401 E 900 S UNIT B, Salt Lake City, UT 84111; Phone: (801) 466-8255	
	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	l in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a transacti	
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity th	at 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 do	es 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 publ	ic duties
	I hold a personal interest that creates a potential or actual conflict with my public duties.	io datios.
	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 accis completed.</i>)	
	I am a part-time employee for 10 hours a week at The Tea Grotto. I bag and blend tea to sell to	customers.
I de	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.	
Sig	ned on the day of,,,	
~-8	Date Month , Year	
	Cottonwood Heights, Utah	
at _	City or other location, and state or county	
Le/	Anne Hodges	
	nted Name	
Le	eanne Hodges Digitally signed by Leanne Hodges Date: 2024.01.23 09:23:56 -07'00'	Zachary Digitally signed by Zachary Posner Posner Date: 2024.02.01 1421:25 0700'

(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.) Service Desk Lead Technician Michael Welling 385-468-0718 Position, or County Division for which you are employed or volunteering Covered Person County/Volunteer's Phone 2001 S. State Street, Suite S3-600 Salt Lake City, Utah 84190 Covered Person's County Address/Volunteer's Address Home Depot 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 - Unload Team Lead Covered person's status, relationship or commitment to the institution, entity, business or person named above 1226 N Exchange Dr, Saratoga Springs, Utah 84045 385-993-6100 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 Home Depot has businesses in Salt Lake County, but I work at the Saratoga Springs location in Utah County. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. day of January Signed on the 30th Salt Lake County Government Center City or other location, and state or county Michael Welling Printed Name Zachary Posner

This statement is a public document. It must be filed with the covered person's immediate supervisor, volunteer or community liaison, division director, department director or elected official, and the County Council. It must be filed when the potential conflict arises and refiled every January, as long as the potential conflict exists.

Signature

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*.)

A.	Prem Narayanan Principal Data Engineer/IT	(385) 468-0737	
7 1.	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 84114		
	Covered Person's County Address/Volunteer's Address		
В.	University of Utah		
Б.	Outside institution, entity, private business or person in which the Covered Person has a personal or busing 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	above	
	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 identific	ed in subsection (B) above:	
	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 t	hat 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 of	loos or enticipates deine business with	
	Salt Lake County.	ioes or anticipates doing business with	
	I hold an investment 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. None of the above categories apply.		
D		64 14 1 6 11 1	
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</i>		
	is completed.)		
	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		
T 1			
	clare under criminal penalty under the law of Utah that the foregoing is true and correct.		
Sig	ned on the $\frac{29}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2024}{\text{Year}}$,		
,			
at _	Salt Lake City UT		
(City or other location, and state or county		
	EM NARAYANAN		
	ted Name	Zachary Digitally signed by Zachary	
Pr	em Narayanan Date: 2024.01.29 16:20:12 -07'00'	Posner Posner Date: 2024.02.01	

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.)

	nder the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)			
A.	Trevor Hebditch Assoc. Dir. Enterprise Architecture - Information Techno 385 468 0565			
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone			
	Salt Lake County Government Center, 2001 S. State Street, Suite S3-600, Salt Lake City, Uta			
	Covered Person's County Address/Volunteer's Address			
В.	Salt Lake Astronomical Society			
	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 at Large and Equipment Loan Officer			
	Covered person's status, relationship or commitment to the institution, entity, business or person named above			
	Salt Lake Astronomical Society, 170 Orchard Pines Loop, Bountiful, 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 Sala 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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)			
	The Salt Lake Astronomical Society works with the County Libraries in supporting their telescope loan program. There should be no conflicts of interest.			
I de	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.			
Sig	aned on the $\frac{10}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2024}{\text{Year}}$,			
ſ	Murray, UT			
at $_{-}$	City or other location, and state or county			
Tre	evor John Hebditch			
Prir	nted Name			
Tr	evor J. Hebditch Digitally signed by Trevor J. Hebditch Date: 2024.01.10 14:47:49 -07'00' Zachary by Zachary			

nmunity liaison,

(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.	Valina Eckley	Software Engineer I	II, IT	8-0714	
2 1.	Covered Person	Position, or County Division	for which you are employed or volunteering	County/Volunteer's Phone	
	2001 S State St.	S3-600			
	Covered Person's County	y Address/Volunteer's Address			
В.	Cheer Salt Lake				
٥.	Outside institution, entity is required in the above se		which the Covered Person has a personal or bus	siness interest for which disclosure	
	Director, Founde	er			
	Covered person's status,	relationship or commitment to	the institution, entity, business or person named	above	
	3556 S 5600 W #	#1-752 Salt Lake City	UT, 84120 385-455-8212		
	Address and phone numb	per of the institution, entity, bus	iness or person named above		
C.	Select the category that	applies to yourself and the outs	ide institution, entity, business or person identifi	fied in subsection (B) above:	
			or assisting a person or business entity in a transa	* *	
			vner of a substantial interest in a business entity		
	Lake County.		•		
	I am an officer, dire Salt Lake County.	ector, agent, employee or owner	of a substantial interest in a business entity that	does or anticipates doing business with	
	I hold an investmen		creates a potential or actual conflict with my p	ublic duties.	
			actual conflict with my public duties.		
	X None of the above of	categories apply.			
D.			flicts of interest identified above, i.e., the nature excessary. (<i>This disclosure statement will not be</i>		
	I am the founder and	a board director of the organ	ization, which is a non profit under 501(c)3		
	We have never done	husiness with Salt Lake Cou	nty, nor have we ever received any compa	nsation from the county But I	
		We have never done business with Salt Lake County, nor have we ever received any compensation from the county. But I always like fill this out every year just to be safe.			
I de	clare under criminal pena	lty under the law of Utah that th	ne foregoing is true and correct.		
Sig	ned on the day	of January 2024			
515	Date	Month 'Year'			
	Salt Lake City Utah				
at _	City or other location, and	d state or county	_		
Val	ina Eckley				
Prin	ted Name		-	7 L Digitally signed	
Va	alina Eckley	Digitally signed by Valina Eckley Date: 2024.01.10 14:07:17 -07'00'		Zachary by Zachary Posner Posner 0ate: 2024.02.01 14:17:25-07:00	

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*.)

A. Zachary Posn	er CIO / Dir	Information Technology	3854680649	
Covered Person	Position, or C	County Division for which you are employed or volunteering	g County/Volunteer's Phone	
2001 S State S	Street, SLC,	UT 84118		
Covered Person's Co	inty Address/Volu	inteer's Address		
3. Emigration Ca	nyon Comm	unity Council		
	tity, private busin e section	ess or person in which the Covered Person has a personal or	r business interest for which disclosure	
Council Memb	er			
Covered person's stat	us, relationship or	commitment to the institution, entity, business or person na	amed above	
5025 Emigration	on Canyon R	d, Salt Lake City, UT 84108		
Address and phone nu	mber of the institu	ation, entity, business or person named above		
C. Select the category t	nat applies to your	self and the outside institution, entity, business or person id-	entified in subsection (B) above:	
		compensation for assisting a person or business entity in a tr		
	_	aployee or the owner of a substantial interest in a business en		
Lake County.				
Salt Lake Count		ployee or owner of a substantial interest in a business entity	that does or anticipates doing business w	
I hold an investi	nent or other finar	icial interest that creates a potential or actual conflict with n	ny public duties.	
		es a potential or actual conflict with my public duties.		
None of the abo	ve categories appl	y.		
	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each busine 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 am an elected me	mber of the Em	gration Canyon Community Council. This is an unpaid	d position.	
		events, provides voice to residents, and provides advi er of the Salt Lake County Municipal Services district.	ice to the Emigration Canyon	
declare under criminal n	enalty under the la	w of Utah that the foregoing is true and correct.		
-		2024		
igned on the Date	ay of Month			
Salt Lake City				
City or other location,	and state or coun	ty.		
		-		
achary Posner rinted Name				
achary Posn	Digitally signed	by Zachary Posner		

Signature