

Jennifer WilsonSalt Lake County Mayor

Zachary Posner Chief Information Officer January 14, 2025

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.

- Ben Thompson, Anusara Holdings, LLC
- Ben Thompson, Elevated Technology Consulting, LLC
- Ben Thompson, Hangar 9, LLC
- Ben Thompson, Owner Produced Parts, LLC
- Brent Thompson, Tinc Shave, LLC
- Cherie Root, Traditions HOA
- Cindy Beck, Capital Theatre
- Cindy Beck, Eccles Theatre
- Cindy Beck, St. Paul's Episcopal Church
- LeAnne Hodges, The Tea Grotto
- Michael Welling, Home Depot
- Prem Narayanan, University of Utah
- Trevor Hebditch, Salt Lake Astronomical Society
- Valina Eckley, Cheer Salt Lake
- Zachary Posner, State of Utah Cyber Commission

Sincerely,

Zachary Posner Digitally signed by Zachary Posner Date: 2025.01.16 15:46:45 -07'00'

Zachary Posner Chief Information Officer Division Director

www.slco.org TTY: 7-1-1 Megan Hillyard Administrative Services Department Director

Mayor's Office

SALT LAKE COUNTY GOVERNMENT CENTER

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





(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 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.	Anusara Holdings, LLC				
(Outside institution, entity, private business or person in which the Covered Person has a personal or busins required in the above section	ess interest for which disclosure			
	Co-Owner				
(Covered person's status, relationship or commitment to the institution, entity, business or person named a	bove			
	6432 S 900 East Murray, UT 84121				
Ā	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 identifie	d in subsection (B) above:			
	I receive or have agreed to receive compensation for assisting a person or business entity in a transact				
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity the	•			
	Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that do	oes 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 pub. I hold a personal interest that creates a potential or actual conflict with my public duties.	lic duties.			
	None of the above categories apply.				
_		04 12 12 0 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 is completed.</i>)				
	Anusara Holdings, LLC owns and operates residential rental properties, none of which are pre-	sently within Salt Lake			
	County. My wife and I are co-owners of this company.				
I de	clare under criminal penalty under the law of Utah that the foregoing is true and correct.				
Sigr	ned on the 6th day of January , 2025 ,				
J	Date Month 'Year',				
at _	lurray, UT				
	ity or other location, and state or county				
	jamin Thompson				
Prin	ted Name Digitally signed by SLCOUNTY				
	BBThompson Date: 2025.01.06 22:54:38 -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.	Benjamin Thomp Senior SharePoint Developer	80664
. 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.	Elevated Technology Consulting, LLC	
	Outside institution, entity, private business or person in which the Covered Person has a personal or bus is required in the above section	iness interest for which disclosure
	Co-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 identif	ied 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 Lake County.	
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that Salt Lake County.	does or anticipates doing business with
	I hold an investment or other financial interest that creates a potential or actual conflict with my pullic linear that creates a potential or actual conflict with my public duties.	ablic 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>)	
	Elevated Technology Consulting offers IT consulting and contract programming to small to m within and outside of Salt Lake County. Other than being located in Salt Lake County, it does county (neither directly, nor indirectly), nor does it intend to. This entity is co-owned with my v	not do any business with the
I d	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.	
Sic	gned on the day of January , 2025 ,,	
عاد	Date Month , Year,	
ot	Murray, UT	
at _	City or other location, and state or county	
Ве	enjamin Thompson	
Pri	nted Name	
	Digitally signed by SLCOUNTY ABBThompson Date: 2025.01.06 22:54:07 -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.	Benjamin Thomp Senior SharePoint Developer	80664			
	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.	Hangar 9, LLC				
(Outside institution, entity, private business or person in which the Covered Person has a personal or busi is required in the above section	ness interest for which disclosure			
	Co-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	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 Lake County.	-			
	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 pull I hold a personal interest that creates a potential or actual conflict with my public duties.	blic 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>)				
	Hangar 9 purchases derelict aircraft and restores them to airworthy condition, as well as provimaintenance services.	iding other aircraft			
I da	along under original manufacture and an the laws of Hab that the foreseine is two and connect				
1 de	clare under criminal penalty under the law of Utah that the foregoing is true and correct. 1 6th 2. January 2025				
Sign	ned on the Gth Date day of Month, 2025 Year,				
at _	Лurray, UT				
	City or other location, and state or county				
	njamin Thompson				
Prin	ted Name Digitally signed by SLCOUNTY				
	BBThompson Date: 2025.01.06 22:55:12 -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 Benjamin T	homp Senior Sh	arePoint Develop	per	80664
Covered Person	Position, or Co	unty Division for which	you are employed or volunteering	County/Volunteer's Phone
2001 S Sta	te St. Suite S3-6	00 Salt Lake City	, UT 84114	
Covered Person's	County Address/Volun	teer's Address		
B. Owner Prod	luced Parts, LLC	· ·-		
		s or person in which the	Covered Person has a personal or busi	iness interest for which disclosure
Owner				
Covered person's	status, relationship or c	ommitment to the institut	tion, entity, business or person named	above
6432 S 900	East Murray, U	Г 84121		
Address and phor	ne number of the institut	ion, entity, business or pe	erson named above	
C. Select the category	ory that applies to yours	elf and the outside institu	tion, entity, business or person identifi	ied in subsection (B) above:
			g a person or business entity in a transa	• •
I am an offi	cer, director, agent, emp	-	•	that is subject to the regulation of Salt
Lake Count I am an offi Salt Lake C	cer, director, agent, emp	loyee or owner of a subst	antial interest in a business entity that	does or anticipates doing business wit
I hold an in	vestment or other finance		potential or actual conflict with my punflict with my public duties.	ıblic duties.
	above categories apply		• •	
			terest identified above, i.e., the nature (This disclosure statement will not be a	
			General Aviation aircraft. Other th does not anticipate doing so in the	
l declare under crimi		v of Utah that the foregoing	ng is true and correct.	
Signed on the Date	day of January Month	$,\frac{2025}{\text{Year}},$		
Murray, UT				
City or other loca	tion, and state or count			
Benjamin Thompso	on			
Printed Name	Digitally signed by SI			
	Date: 2025.01.06 22	53:22 -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*.)

A. Brent Thompson Business Analyst	385-468-0710			
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, UT 84114				
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 a personal or b is required in the above section	business interest for which disclosure			
Owner				
Covered person's status, relationship or commitment to the institution, entity, business or person nam	ed above			
3096 S. Waterleaf Way WVC, UT 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 or person iden	atified in subsection (B) above:			
I receive or have agreed to receive compensation for assisting a person or business entity in a trar	• •			
I am an officer, director, agent, employee or the owner of a substantial interest in a business enti- Lake County.				
I am an officer, director, agent, employee or owner of a substantial interest in a business entity the Salt Lake County.	nat does or anticipates doing business wit			
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.	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 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 operated a business in Salt Lake County that requires a license from SLCO Health Depar	tment			
I declare under criminal penalty under the law of Utah that the foregoing is true and correct.				
7				
Signed on the Date day of Month, Year, Year,				
West Valley City, UT,				
City or other location, and state or county				
Brent Thompson				
Printed Name				
D A				
Signature				

Signature

REVIEWED By Ina Landry at 4:44 pm, Jan 23, 2025

30

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*.)

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	
Covered Person's Cour	nty Address/Volunteer's Address	
Traditions HOA		
Outside institution, ent is required in the above	ity, private business or person in which the Covered Person has a personal or businesection	ness interest for which disclosure
Treasurer		
Covered person's statu	s, relationship or commitment to the institution, entity, business or person named a	above
PO Box 571885	5 SLC, UT 84157 801-571-5597	
Address and phone nur	nber of the institution, entity, business or person named above	
Select the category the	at 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 transac	tion involving Salt Lake County.
	irector, agent, employee or the owner of a substantial interest in a business entity t	
I am an officer, d	rector, agent, employee or owner of a substantial interest in a business entity that d	loes or anticipates doing business v
Salt Lake County	ent or other financial interest that creates a potential or actual conflict with my pul	alia dutios
	interest that creates a potential or actual conflict with my public duties.	one duties.
None of the above	e categories apply.	
Give a detailed descripentity or person with tis completed.)	tion 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 actually in the county of	of the relationship of each business eccepted as valid unless this section
The location is withi	n Salt Lake County, so we (the HOA Board) are subject to County Ordinan	ce and regulations.
1		
1		
		i
clare under criminal per	nalty under the law of Utah that the foregoing is true and correct.	
ned on the Date da	$y \text{ of } \frac{\text{January}}{\text{Month}}, \frac{2025}{\text{Year}},$	
Salt Lake City, UT	· ·	
City or other location, a	nd state or county	
erie Root		
ned Name	BA	





(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*.)

Δ	Cindy Beck	Office Coo	rdinator		385-468-0625
· · · (Covered Person	Position, or Cou	nty Division for which	you are employed or volunteering	County/Volunteer's Phone
	2001 S State St	S3-600 SLC	UT 84190		
(Covered Person's Coun	ty Address/Volunt	er's Address		_
В.	Capital Theatre				
(Outside institution, entires required in the above		or person in which the	Covered Person has a personal or busi	ness interest for which disclosure
	Wardrobe/Dress	ser			
(Covered person's status	, relationship or co	nmitment to the institut	ion, entity, business or person named	above
	50 W 200 S SLO	C Ut 84101			
_	Address and phone num	ber of the institution	n, entity, business or pe	rson named above	
C.	Select the category tha	t applies to vourse	f and the outside institu	ion, entity, business or person identifi	ed in subsection (B) above:
	_			a person or business entity in a transaction	• •
	_	_	-	-	that is subject to the regulation of Salt
			yee or owner of a substa	antial interest in a business entity that	does or anticipates doing business with
				potential or actual conflict with my purflict with my public duties.	blic duties.
	None of the above	e categories apply.			
D.				terest identified above, i.e., the nature This disclosure statement will not be a	
		ancers/talent at th	is venue (Ballet West	/Opera).	
			·	. ,	
I de	clare under criminal per	nalty under the law	of Utah that the foregoin	ng is true and correct.	
C:a.	ned on the 7 da	y of January	2025		
Sigi	Date da	Month	' Year' ,		
	alt Lake County				
at C	ity or other location, a	nd state or county			
Cin	dy Beck				
	ted Name	(0: 1 5 1		
Ci	ndy Beck	Digitally signed by Date: 2025.01.07			
	-	V	-		

Signature

REVIEWED By Ina Landry at 4:44 pm, Jan 23, 2025



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.} Cindy Beck	Office Coordinator		385-468-0625		
Covered Person	Position, or County Division to	For which you are employed or volunteering	County/Volunteer's Phone		
2001 S State St	S3-600 SLC UT 8419	0			
Covered Person's Coun	ty Address/Volunteer's Address		_		
Eccles Theatre					
		which the Covered Person has a personal or busi	ness interest for which disclosure		
Wardrobe/Dress	ser				
Covered person's status	, relationship or commitment to	the institution, entity, business or person named	above		
131 S Main St S	SLC UT 84111				
Address and phone num	ber of the institution, entity, bus	iness or person named above			
C. Select the category that	t applies to yourself and the outs	ide institution, entity, business or person identifi	ed in subsection (B) above:		
	**	or assisting a person or business entity in a transac	• •		
	•	where of a substantial interest in a business entity	•		
Lake County.		•	-		
I am an officer, di Salt Lake County		of a substantial interest in a business entity that of	does or anticipates doing business wi		
I hold an investme	I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.				
=	•	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>)				
	ancers/talent at this venue.				
declare under criminal per	nalty under the law of Utah that the	ne foregoing is true and correct.			
Signed on the $\frac{7}{}$ da	y of January , 2025 ,				
oighea on the aa	y 01 ,,				
Date	Month , Year,				
Date Salt Lake County	Month Year				
Date Salt Lake County	Month Year	_			
Date $t \frac{\text{Salt Lake County}}{\text{City or other location, a}}$	Month Year	_			
Date Salt Lake County	Month Year	_			

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*.)

Δ	Cindy Beck	Office Coordina	tor	385-468-0625
. 1.	Covered Person	Position, or County Div	ision for which you are employed or volunteering	County/Volunteer's Phone
	2001 S State St S	3-600 SLC UT 8	34190	
	Covered Person's County	Address/Volunteer's Ad	ldress	
В.	St. Paul's Episcop	oal Church		
Ь.	Outside institution, entity, is required in the above see		on in which the Covered Person has a personal or bus	iness interest for which disclosure
	Scheduler (Acolyt	tes)		
	Covered person's status, re	elationship or commitme	ent to the institution, entity, business or person named	above
	261 S 900 E SLC	84102 801-322	2-5869	
	Address and phone number	er of the institution, entit	y, business or person named above	
C.	Select the category that a	applies to yourself and th	e outside institution, entity, business or person identif	ied in subsection (B) above:
	_		tion for assisting a person or business entity in a transa	• •
		_	the owner of a substantial interest in a business entity	
		ctor, agent, employee or	owner of a substantial interest in a business entity that	does or anticipates doing business with
			est that creates a potential or actual conflict with my putial or actual conflict with my public duties.	ablic duties.
	None of the above ca	ategories apply.		
D.			al conflicts of interest identified above, i.e., the nature its if necessary. (<i>This disclosure statement will not be a</i>	
		lles for the year and fo	or special holiday services.	
I d	eclare under criminal penal	ty under the law of Utah	that the foregoing is true and correct.	
Sic	gned on the $\frac{7}{}$ day of	of January , 202	5	
S15	Date Date	Month ' $\frac{1}{\text{Year}}$		
	Salt Lake County			
at _	City or other location, and	state or county		
	ndy Beck			
	nted Name	Digitally signed by Circle 5		
C	indy Beck	Digitally signed by Cindy B Date: 2025.01.07 13:49:08		

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 Con	tent Special	ist - Information Technology	385-468-0700
11.	Covered Person	Position, or Co	ounty Division for	r which you are employed or volunteering	County/Volunteer's Phone
	2001 South State	e St, Ste S	3-600 Salt L	ake City, Utah 84190	
	Covered Person's County	Address/Volur	iteer's Address		
В.	The Tea Grotto				
٠.	Outside institution, entity is required in the above se		ss or person in wl	nich the Covered Person has a personal or busi	iness interest for which disclosure
	Part-time employ	ee			
	Covered person's status,	relationship or c	commitment to the	e institution, entity, business or person named	above
	401 E 900 S UNI	T B, Salt L	ake City, U⅂	「84111; Phone: (801) 466-8255	5
	Address and phone numb	er of the institut	ion, entity, busin	ess or person named above	
C.	Select the category that	applies to yours	elf and the outsid	e institution, entity, business or person identifi	ied in subsection (B) above:
	I receive or have ag	reed to receive o	compensation for	assisting a person or business entity in a transa	ction involving Salt Lake County.
	I am an officer, dire	ector, agent, emp	oloyee or the own	er of a substantial interest in a business entity	that is subject to the regulation of Salt
		ector, agent, emp	oloyee or owner o	f a substantial interest in a business entity that	does or anticipates doing business with
	I hold an investmen			reates a potential or actual conflict with my pu ctual conflict with my public duties.	ablic duties.
	None of the above of		-		
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>)				
	I occasionally work wi	ith The Tea Gr	otto either bagg	ing tea to sell to customers or editing their	new tea menu.
I d	eclare under criminal pena	lty under the lav	w of Utah that the	foregoing is true and correct.	
Si	gned on the 03 day	of January	2025		
~ ~ 7	Date	Month	Year,		
at .	Salt Lake City, Utah				
	City or other location, and	d state or count	y		
Le	Anne Hodges				
	nted Name	0			
L	eanne Hodges	Digitally signed	by Leanne Hodges 3 11:12:40 -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. Michael Welling	Service Desk Lead	Technician	385-468-0718		
Covered Person I	Position, or County Division	for which you are employed or volunteering	County/Volunteer's Phone		
2001 S. State Stre	et, Suite S3-600 S	alt Lake City, Utah 84190			
Covered Person's County A	Address/Volunteer's Address	S			
3. Home Depot					
		which the Covered Person has a personal or busi	ness interest for which disclosure		
Part Time - Unload	d Team Lead				
Covered person's status, re	lationship or commitment to	the institution, entity, business or person named	above		
1226 N Exchange	Dr, Saratoga Sprin	gs, Utah 84045 385-993-6100			
Address and phone number	of the institution, entity, bus	siness or person named above			
C. Select the category that ap	plies to yourself and the out	side institution, entity, business or person identifi	ed in subsection (B) above:		
	*	For assisting a person or business entity in a transaction	` '		
I am an officer, direct	•	wner of a substantial interest in a business entity	•		
Lake County. I am an officer, direct Salt Lake County.	or, agent, employee or owne	r of a substantial interest in a business entity that	does or anticipates doing business wit		
I hold an investment		at creates a potential or actual conflict with my pur actual conflict with my public duties.	blic duties.		
None of the above car					
	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>)				
Home Depot has busine	esses in Salt Lake County	, but I work at the Saratoga Springs location	in Utah County.		
•		the foregoing is true and correct.			
Signed on the 3rd day of	January , 2025 ,,				
Date	Month 'Year'				
Salt Lake County Governi	ment Center				
City or other location, and	state or county				
Aichael Welling					
Printed Name		_			
Michael Welling	Digitally signed by Michael Wellir	ng n'			

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	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 84114				
Covered Person's County Address/Volunteer's Address				
_{B.} University Of Utah				
Outside institution, entity, private business or person in which the Covered Person has a personal or b is required in the above section	usiness interest for which disclosure			
Adjunct Instructor/PhD Research Statistician				
Covered person's status, relationship or commitment to the institution, entity, business or person name	ed 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 iden	tified in subsection (R) above:			
I receive or have agreed to receive compensation for assisting a person or business entity in a trar	• •			
I am an officer, director, agent, employee or the owner of a substantial interest in a business entity				
Lake County.				
I am an officer, director, agent, employee or owner of a substantial interest in a business entity the Salt Lake County.	at does or anticipates doing business with			
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.				
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>)				
PhD Researcher/Associate Instructor at University of Utah in the Department of Family and	Consumer Studies.			
https://faculty.utah.edu/u0755115-PREMKUMAR_NARAYANAN/teaching/index.hml				
Intps://lacuity.utan.edu/do/33113-11/EMINOMAIN_IVATATATATATATATATATATATATATATATATATATAT				
I declare under criminal penalty under the law of Utah that the foregoing is true and correct.				
Signed on the day of January , 2025 ,				
Date Month , Year,				
Salt Lake City, UT				
City or other location, and state or county				
PREM NARAYANAN				
Printed Name				
Prem Narayanan Digitally signed by Prem Narayanan Date: 2025.01.06 16:51:56 -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*.)

$_{ m A.}$ Trevor Hebditch $$ Assoc. Dir. Enterprise Architecture - Inform	nation Service 3854680656
Covered Person Position, or County Division for which you are employed or vo	olunteering County/Volunteer's Phone
2001 South State St, Ste S3-600 Salt Lake City, Utah 84190	0
Covered Person's County Address/Volunteer's Address	
_{B.} Salt Lake Astronomical Society	
Outside institution, entity, private business or person in which the Covered Person has a p is required in the above section	personal or business interest for which disclosure
President	
Covered person's status, relationship or commitment to the institution, entity, business or	r person named above
SLAS Secretary, 2137 E Eagle Crest Drive, Draper, Utah 84	4020
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	n name identified in subsection (D) shows
I receive or have agreed to receive compensation for assisting a person or business e	
I am an officer, director, agent, employee or the owner of a substantial interest in a Lake County.	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 busin Salt Lake County.	ness entity that does or anticipates doing business wit
I hold an investment or other financial interest that creates a potential or actual conf	
I hold a personal interest that creates a potential or actual conflict with my public d	uties.
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 statem is completed.</i>)	
Salt Lake Astronomical Society occasionally applies for a ZAP Grant. Thus as F sponsor of the request, though it is applied for and managed by other board me myself from any dealings in it.	
I declare under criminal penalty under the law of Utah that the foregoing is true and correct.	
Signed on the $\frac{6}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$,	
Murray, Utah	
City or other location, and state or county	
Trevor Hebditch	
Printed Name	
THIREU INAINE	

Signature

REVIEWED

By Ina Landry at 4:44 pm, Jan 23, 2025



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.	Valina Eckley	Web Deve	loper - Info	ormation Services	385-468-0714
~1.	Covered Person	Position, or Cou	nty Division fo	r which you are employed or volunteering	County/Volunteer's Phone
	2001 South State	e St S3-600			
	Covered Person's County	Address/Volunto	eer's Address		
В.	Cheer Salt Lake				
	Outside institution, entity is required in the above so		or person in w	hich the Covered Person has a personal or bu	isiness interest for which disclosure
	Director				
	Covered person's status,	relationship or co	mmitment to th	e institution, entity, business or person name	ed above
	3556 S 5600 W #	‡1-752 Salt	Lake City l	JT, 84120	
	Address and phone numb	er of the institution	on, entity, busin	ess or person named above	
C.	Select the category that	applies to yoursel	f and the outsid	le institution, entity, business or person ident	ified in subsection (B) above:
	_			assisting a person or business entity in a trans	
	_		-	ner of a substantial interest in a business entit	-
		ector, agent, emplo	oyee or owner o	of a substantial interest in a business entity that	nt does or anticipates doing business with
				creates a potential or actual conflict with my public duties.	public duties.
	None of the above of	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>)				
	foresee us ever doing	business with t	he county. bu	We've never received any compensatio at I fill out this disclosure every year as a compensated, and as a non profit we'd rei	precaution. If we were to ever
I do			of Utah that the	e foregoing is true and correct.	
Sig	gned on the $\frac{6}{\text{Date}}$ day	of Month	$,\frac{2025}{\text{Year}},$		
	Salt Lake City				
at _	City or other location, and	d state or county			
Va	lina Eckley				
	nted Name	Digitally signed by	/ Valina Eckloy		
۷	alina Eckley	Date: 2025.01.06	•		

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. Covered Person Position, or County Division for which you are employed or volunteer	3854680649
Covered reison rosmon, or County Division for which you are employed or volunteer	ring County/Volunteer's Phone
2001 S State Street	
Covered Person's County Address/Volunteer's Address	
B. State of Utah Cyber Commission	
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
Member of Commission	
Covered person's status, relationship or commitment to the institution, entity, business or person	named above
Utah State Capital	
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	• •
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 ent Salt Lake County.	ity that does or anticipates doing business w
I hold an investment or other financial interest that creates a potential or actual conflict wit	h 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.	
O. 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</i>	
is completed.)	
is completed.) I represent Salt Lake County on the State of Utah Governors Cyber Commission and s direction for Cyber Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations.	
I represent Salt Lake County on the State of Utah Governors Cyber Commission and s direction for Cyber Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations.	
I represent Salt Lake County on the State of Utah Governors Cyber Commission and s direction for Cyber Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. gnature:	
I represent Salt Lake County on the State of Utah Governors Cyber Commission and s direction for Cyber Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations.	
I represent Salt Lake County on the State of Utah Governors Cyber Commission and s direction for Cyber Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. **The committees are working groups that provide recommendations.** **The committees are working groups that provide recommendations.**	
I represent Salt Lake County on the State of Utah Governors Cyber Commission and sub-cotion for Cyber Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. gnature:	
I represent Salt Lake County on the State of Utah Governors Cyber Commission and sub-commission for Cyber Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. I grature:	
I represent Salt Lake County on the State of Utah Governors Cyber Commission and so direction for Cyber Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. nature:	
I represent Salt Lake County on the State of Utah Governors Cyber Commission and sidirection for Cyber Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. Inature: Jackey Posner (Jan 14, 2025 13:05 MST) Email: zposner@saltlakecounty.gov declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the 3/Date day of Month , 2025/Year,	
I represent Salt Lake County on the State of Utah Governors Cyber Commission and sidirection for Cyber Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. Inature: Jackey Pose Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. Inature: Jackey Pose Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. Inature: Jackey Pose Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. Inature: Jackey Pose Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. Inature: Jackey Pose Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. Inature: Jackey Pose Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. Inature: Jackey Pose Strategies and recommendations for state cyber secure and sub-committees are working groups that provide recommendations. Inature: Jackey Pose Strategies and recommendations for state cyber securations for state cyber securations.	
I represent Salt Lake County on the State of Utah Governors Cyber Commission and sidirection for Cyber Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. Inature: Jackey Posner (Jan 14, 2025 13:05 MST) Email: zposner@saltlakecounty.gov declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the 3/Date day of Month , 2025/Year, Salt Lake County	
I represent Salt Lake County on the State of Utah Governors Cyber Commission and sub-cition for Cyber Strategies and recommend budget allocations for state cyber secur and sub-committees are working groups that provide recommendations. gnature:	

Signature