

January 24,2025

Jennifer Wilson, Salt Lake County Mayor Kelly Colopy, Human Services Director Carolyn Hansen, Division Director

Salt Lake County Council Salt Lake County Department of Human Services 2001 S State Street, Suite N3-200 Salt Lake City, UT 84190-1000

Dear Salt Lake County Council:

The following Division of Youth Services employees have signed Disclosure of Private Business Interests statements:

Merit & Time Limited employees:

- Alexia Francis, Canyons School District
- Allen Cloar, Fathers and Families Coalition of Utah (FFCU)
- Andre Carter, JJYS
- Ben Ukoh-Eke, JJYS
- Beverly Shedden, Salt Lake County Aging Services (volunteer)
- Bianca Gonzalez, Disability Law Center
- Brielle Reichert, Church of Latter Day Saints
- Brielle Reichert, Healthy West Valley Coalition
- Carolyn Hansen, Juvenile Justice Oversight Committee
- Carolyn Hansen, Optavia
- Carolyn Hansen, Raise the Future
- Carolyn Hansen, Shelter Kids, Inc.
- Carolyn Hansen, UBJJ Board
- Charles Eubanks, The Wesley Bell Ringers
- Charlotte Marshall, Lighthouse Counseling Services
- Christopher Bereshnyi, Humane Society
- Christopher Bereshnyi, Ruff Haven
- Claudia Alvarado Murillo (Weir), First Step House
- Corylyn Ybarra, Beehive Science and Technology Academy
- Corylyn Ybarra, Child Welfare Improvement Council
- Corylyn Ybarra, Highland Springs Specialty Clinic
- Danielle Latta, Magna United Coalition
- Darla Scott, Granite School District
- David Cavazos, Utah Case Management LLC
- Dennis Sellis, Integrated Psychotherapy Services
- Desiree Steadman-Gallegos, MEHR Therapeutic Counseling Services PLLC
- Diana Johnson, Magna Kearns Youth Court

- Emeline Katoa, Youth Recourse Center
- Fransisco Bedolla, Fathers and Families Coalition of Utah (FFCU)
- German Ochoa, MyKearns Coalition
- German Ochoa, Utah State University
- German Ochoa, Weber Human Services
- James Hamell, Magna Coalition
- James Hamell, Pivotal Content, LLC
- James Weir, Utah Department of Corrections
- Julianna Potter, Caring Connections
- Julianna Potter, Catholic Community Services
- Julianna Potter, Healthy West Valley Coalition
- Julianna Potter, Murray Partners 4 Prevention
- Karen Dohle, Northrop Grumman
- Kelly Paluso, University of Utah Hospital
- Kira Coelho, Door Dash
- Kone Tevaga, Huntsman Mental Health Institute
- Margaret DeSpain, Magna United Coalition
- Margaret DeSpain, Salt Lake Afterschool Regional Network
- Marita Vi, AFSCME
- Mary Smith, Central 9th Youth Coalition
- Mary Smith, Magna United Youth Coalition
- Mary Smith, The Point Church
- Matai loane Jr, NOVVA
- Rolando Reboiro Jr, Giv.Care Inc.
- Saul Hernandez, David Gourley Elementary (Granite School District)
- Shannon Elite, Elite Consulting and Counseling PLLC
- Sharami Martinez, The Phoenix Recovery Center
- Tyra Armstrong, MyKearns Coalition

Temporary employees:

- Alethia Holmes, Chrysalis
- Alexus Averett, Maverik Center
- Alston Long, First Lego League
- Amelia Castro Gutierrez, Tradition Assisted Living
- Amy Staley, Granite School District
- Autumn Batta, Costco
- Candace Collins, Copper Hills Elementary (Granite School District)
- Carly Slaugh, St Marks Hospital
- Cassie Fish, Granite School District
- Catherine Jarvis, Jordan School District
- Cynthia Fowler, Granite School District
- Elisapeta So'oalo, Granite School District
- Elysia Adams, Utah State University

2001 South State Street Suite S2-600 PO Box 144575 Salt Lake City, UT 84114-4575 T 385-468-4117 F 385-468-4106 saltlakehealth.org Salt Lake County Health Department promotes and protects community and environmental health

- Erin Killpack, Granite School District
- Jaimie Haydock, Copper Hills Elementary (Granite School District)
- Jaimie Haydock, Western Governors University
- Jennianne Matautia Vaai, Pleasant Green Elementary (Granite School District)
- Jennifer Goble, Copper Hills Elementary (Granite School District)
- Jennifer Goble, PF Changes
- Jesse Kemp, Youth Coalition
- Julie Robertson, Granite School District
- Karen Hunt, Copper Hills Elementary (Granite School District)
- Kelly Price, B.A.C.A
- Kelly Price, Pleasant Green Elementary (Granite School District)
- Kylee Gordon, Granite School District
- Lisset Lopez, Granite School District
- Lynsie Nelson, Salt Lake Regional Afterschool Network
- Lynsie Nelson, Uber Eats
- Maria Mendez-Ceron, Horizonte Instruction and Training Center
- Mary Fasig, Granger Elementary
- Melissa Howard, Copper Hills Elementary (Granite School District)
- Natalie Dickey, Granite School District
- Shalea Tallis, Valley Behavioral Health
- Siu Ha Le, Copper Hills Elementary (Granite School District)
- Tiffany Adams, Pleasant Green Elementary (Granite School District)
- Wendy Timohy, Copper Hills Elementary (Granite School District)

Sincerely,

Carolyn Hansen, LCSW Director, Division of Youth Services

Kelly Colopy Digitally signed by Kelly Colopy Date: 2025.01.27 13:38:37 -07'00'

Michelle Hicks Digitally signed by Michelle Hicks Date: 2025.01.29 13:18:49 -07'00'

Department Director

Mayor's Office Designee

(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*.)

Alexia Francis	Ϋ́C	outh Services	385-468-4500
Covered Person I	osition, or County Division for which you are e	employed or volunteering	County/Volunteer's Phone
177 W Price Ave S	South Salt Lake, UT 84115		
Covered Person's County A	ddress/Volunteer's Address		
Canyons School E	Server all Society speechess		
Outside institution, entity, j is required in the above sec	private business or person in which the Covered	Person has a personal or bus	iness interest for which disclosure
Substitute Teache	r/ volunteer		
Covered person's status, re	ationship or commitment to the institution, enti	ty, business or person named	above
9361 S 300 E, Sa	าdy, Utah 84070		
Address and phone number	of the institution, entity, business or person nar	med above	
Select the category that a	plies to yourself and the outside institution, enti	ity, business or person identif	ied in subsection (B) above:
I receive or have agree	ed to receive compensation for assisting a person	n or business entity in a transa	ction involving Salt Lake County.
Lake County.	tor, agent, employee or the owner of a substantia		
	or, agent, employee or owner of a substantial in	terest in a business entity that	does or anticipates doing business
Salt Lake County.	or other financial interest that creates a potentia	l or actual conflict with my p	ublic duties.
I hold a personal inte	rest that creates a potential or actual conflict with	th my public duties.	
X None of the above ca	tegories apply.		
	n of the actual or potential conflicts of interest id County. Use more sheets if necessary. (<i>This dis</i>		
No actual or potential of	onflicts exist with Canyons School District		

Sandy, Utah

City or other location, and state or county

Alexia Francis

Printed Name	
Alexia Francis	
Alexia Francis (Jan 6, 2025 18:05 MST)	

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*.)

mployed or volunteering OF Utah Person has a personal or business y, business or person named above ITY, UT SUP hed above	
Person has a personal or business y, business or person named abov (TY, UT, SUI)	
ity, UT SUI) ned above	9
ty, business or person identified in	
erest in a business entity that does or actual conflict with my public h my public duties.	s or anticipates doing business w
I work with at risk teens and yo	oung adults. Most of our
	n or business entity in a transaction al interest in a business entity that erest in a business entity that does or actual conflict with my public h my public duties. entified above, i.e., the nature of the closure statement will not be accept I work with at risk teens and you

Signed on the 12 day of January , 2025 Date Month , Year , Salt Lake City at

City or other location, and state or county

Allen Cloar

Printed Name

Allen Cloar	
Allen Cloar (Jan 12, 2025 15:03 MST)	
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*.)

Andre Carter	Youth Services	385-468-4500
Covered Person Position, or County Division for which 177 W Price Ave South Salt Lake, UT 84115		County/Volunteer's Phone
Covered Person's County Address/Volunteer's Address 3. JJVS (Juvenile Justice and Outside institution, entity, private business or person in which the	Youth Services) e Covered Person has a personal or bu	siness interest for which disclosure
JJYS Lead Youth Developme Covered person's status, relationship or commitment to the institu 195 N · 1950 W. SLC, UT 8 Address and phone number of the institution, entity, business or p	ution, entity, business or person name 4116	d above
C. Select the category that applies to yourself and the outside instit	tution, entity, business or person ident	ified in subsection (B) above:
I receive or have agreed to receive compensation for assisting	ng a person or business entity in a trans	saction involving Salt Lake County.
I am an officer, director, agent, employee or the owner of a Lake County.	a substantial interest in a business entit	y that is subject to the regulation of Sa
I am an officer, director, agent, employee or owner of a sub- Salt Lake County. I hold an investment or other financial interest that creates I hold a personal interest that creates a potential or actual c	a potential or actual conflict with my	
None of the above categories apply.		
D. Give a detailed description of the actual or potential conflicts of entity or person with the County. Use more sheets if necessary. <i>is completed.</i>)	. (This disclosure statement will not be	e accepted as valid unless this section
Maintain safety & Secu	unity & Teach	life skins
I declare under criminal penalty under the law of Utah that the foreg	joing is true and correct.	
Signed on the $\frac{11}{Date}$ day of $\frac{January}{Month}$, $\frac{2025}{Year}$,		

Andre Carter

Salt Lake City

Printed Name

	Carter an 11, 2025 03:47 MST)	
Andre Carter (Ja	an 11, 2025 03:47 MST)	

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.} Ben Ukoh-Eke	Youth Services	385-468-4500
	or which you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake, UT	84115	
Covered Person's County Address/Volunteer's Address		
B. Invenile Justice and	Youth services	
Outside institution, entity, private business or person in v	which the Covered Person has a personal or bus	iness interest for which disclosure
JJYS Lead Plan Mane	iger	
Covered person's status, relationship or commitment to t		above
<u>195 N 1950 W SLC, M</u> Address and phone number of the institution, entity, busi	ness or person named above	
C. Select the category that applies to yourself and the outsi		
I receive or have agreed to receive compensation fo		
I am an officer, director, agent, employee or the ow Lake County.	vner of a substantial interest in a business entity	that is subject to the regulation of Sal
I am an officer, director, agent, employee or owner	of a substantial interest in a business entity that	does or anticipates doing business with
Salt Lake County.		11. 1.2
I hold an investment or other financial interest that I hold a personal interest that creates a potential or		ublic dufies.
None of the above categories apply.		
D. Give a detailed description of the actual or potential con.	flicts of interact identified above i.e. the nature	of the relationship of each business
entity or person with the County. Use more sheets if ne		
is completed.)		
N/A	manlies	
N/A provide services for f		
I declare under criminal penalty under the law of Utah that the	he foregoing is true and correct.	
Signed on the $\frac{11}{2025}$ day of $\frac{1}{2025}$, $\frac{1}{2025}$		
Signed on the $\frac{11}{Date}$ day of $\frac{January}{Month}$, $\frac{2025}{Year}$,		

at _____

City or other location, and state or county

Ben Ukoh-Eke

Printed Name

Ben Ukoh- The	
Ben Ukoh-Eke (Jan 11, 2025 02:36 MST)	
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*.)

Beverly Shedden	Youth Services	385-468-4500
Covered Person Position, or County Division	1 for which you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake, U	Т 84115	
Covered Person's County Address/Volunteer's Addres	IS	
3. Salt Lake County Aging Services		
Outside institution, entity, private business or person in is required in the above section	n which the Covered Person has a personal or busi	ness interest for which disclosure
Volunteer		
Covered person's status, relationship or commitment to		above
2001 State St., Salt Lake City, UT 84	114	
Address and phone number of the institution, entity, b	usiness or person named above	
C. Select the category that applies to yourself and the ou	utside 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	ction involving Salt Lake County.
Lake County.	owner of a substantial interest in a business entity	
I am an officer, director, agent, employee or own Salt Lake County.	ter of a substantial interest in a business entity that	does of anticipates doing business with
	nat creates a potential or actual conflict with my po or actual conflict with my public duties.	ublic duties.
X None of the above categories apply.		
D. Give a detailed description of the actual or potential c entity or person with the County. Use more sheets if is completed.)	onflicts of interest identified above, i.e., the nature incessary. (This disclosure statement will not be	of the relationship of each business accepted as valid unless this section
I volunteer to deliver Meals on Wheels. I am filli The Disclosure Form guidelines are as follows:	ng out this form in accordance with these inst (PLEASE READ CAREFULLY)	ructions:
a. a disclosure form is required for all employe volunteer or sit on a board or commission. This etc. is. If there is no conflict, they do not need to files.	ees, volunteers, board, and commission mem year they are requiring it for everyone, regard b be included in the submittal to the departme	dless of what the second job,
I declare under criminal penalty under the law of Utah that	at the foregoing is true and correct.	
Signed on the $\frac{07}{Data}$ day of January , 2025		
Date Month , Year		

177 Price Ave, Salt Lake City, UT

City or other location, and state or county

Beverly Shedden

Printed Name Beverly Shedden

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	Bianca Gonzalez	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or voluntee	ring County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	
	Covered Person's County	Address/Volunteer's Address	

B. Disability Law Center

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

Full-time employee

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

960 S Main St. SLC UT 800-662-9080

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.

- X None of the above categories apply.
- D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

assist	w/legal	services	for law office

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

day of January	2025
Month	Year,
	_ day of <u>January</u> Month

City or other location, and state or county

Bianca Gonzalez

Printed Name

	Bianca Gonzalez	
3	ianca Gonzalez (Jan 12, 2025 07:30 MST)	
1	the second s	

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.	Brielle Reichert		Youth Services	385-468-4500
A.	Covered Person	Position, or County Division for which ye	ou are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115		
	Covered Person's County	Address/Volunteer's Address		
B.	Church of Jesus	Christ of Latter Day Saints		
D.	Outside institution, entity is required in the above s	, private business or person in which the C	overed Person has a personal or busi	ness interest for which disclosure
	50 E. North Tem	ple, Salt Lake City, Utah 841	50	
	Covered person's status,	relationship or commitment to the instituti	on, entity, business or person named	above
	Volunteer / Mem	ber		
	Address and phone numb	er of the institution, entity, business or per	son named above	
C.	Select the category that	applies to yourself and the outside institut	on, entity, business or person identif	ied in subsection (B) above:
	I receive or have ag	reed to receive compensation for assisting	a person or business entity in a transa	ction involving Salt Lake County.
	I am an officer, dir	ector, agent, employee or the owner of a su	bstantial 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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.)

Volunteer in personal community as a member of the church.

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

Signed on the $\frac{11}{Date}$ day of $\frac{January}{Month}$ 2025 Year

Salt Lake City, Utah at .

City or other location, and state or county

Brielle Reichert

Printed Name

Brielle Reichert	
rielle Reichert (Jan 11, 2025 10:34 MST)	24
0.	

Signature

F

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.

(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.	Brielle Reichert		Youth Services	385-468-4500
-	Covered Person	Position, or County Division for which	you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	e South Salt Lake, UT 84115		
	Covered Person's Count	y Address/Volunteer's Address		
В.	Healthy West Va	alley Coalition		
	Outside institution, entit s required in the above s	y, private business or person in which the section	Covered Person has a personal or busi	ness interest for which disclosure
	Member of Coal	ition		
	Covered person's status,	, relationship or commitment to the institu	tion, entity, business or person named	above
	3600 Constitutio	on Blvd, West Valley City, UT	84119	
1	Address and phone num	ber of the institution, entity, business or p	erson named above	
C.	Select the category that	t applies to yourself and the outside institu	ition, entity, business or person identifi	ed in subsection (B) above:
	I receive or have a	greed to receive compensation for assistin	g a person or business entity in a transa	ction involving Salt Lake County.
	Lake County.	rector, agent, employee or the owner of a	-	
	I am an officer, dir Salt Lake County.	rector, agent, employee or owner of a subs	tantial interest in a business entity that	does or anticipates doing business wit
	Construction of the local data and the local data a	ent or other financial interest that creates a	potential or actual conflict with my pu	blic duties.
		nterest that creates a potential or actual co	· · · · · · · · · · · · · · · · · · ·	
	X None of the above	categories apply.		
D.	entity or person with th is completed.)	tion of the actual or potential conflicts of i he County. Use more sheets if necessary.	(This disclosure statement will not be a	accepted as valid unless this section
	As part of my role as	s a site coordinator in West Valley I sit	on the Healthy West Valley Coalitie	on.
I de	clare under criminal per	nalty under the law of Utah that the forego	ing is true and correct.	
		y of January ,2025		
Sig	ned on the $\frac{11}{Date}$ da	Month , Year		

at _____ Salt Lake City, Utah

City or other location, and state or county

Brielle Reichert

Printed Name

Brielle Reichert	
Brielle Reichert (Jan 11, 2025 10:30 MST)	
G'	

Signature

mRF

(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*.)

Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Juvenile Justice Oversight Committee Outside lustifution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Board member Covered person's status, relationship or commitment to the institution, entity, business or person named above State Capitol Complex Senate Building Suite 330 PO Box 142330 SLC UT 84114-2330 801-4 Address and phone number of the institution, entity, business or person named above Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive on 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 owner of a substantial interest in a business entity that is subject to the regulation of Si Lake Conty. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that is subject to the regulation of Si Lake Conty. I and an officer, director, agent, employee or owner of a substantial interest in a business entity that is subject to the regulation of Si Lake Conty. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a person 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>) No conflict I for or other location, and state or county Caroly Hansen Finted Name Support Caroly Hansen Supp	Carolyn Hansen	Youth Services	385-468-4500
Covered Person's County Address/Volunter's Address Jucurille Justice Oversight Committee Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Board member Covered person's status, relationship or commitment to the institution, entity, business or person named above State Capitol Complex Senate Building Suite 330 PO Box 142330 SLC UT 84114-2330 801-! Address and phone number of the 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 are an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Stat 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. I hold a personal interest that creates a 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>) No conflict No conflict Courdy during and state or county City or other loading a state or county City or other colonion, and state or county County during and phone memory County during and state or county County during and state or county County during and county during a state and correct. County during and the county county during a state or county County during and state or county County during and state or county County during and state or county County during a state or county City or other loading and state or	Covered Person Position, or County Division fo	r which you are employed or volunteering	County/Volunteer's Phone
Juvenile Justice Oversight Committee Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Board member Covered person's status, relationship or commitment to the institution, entity, business or person named above State Capitol Complex Senate Building Suite 330 PO Box 142330 SLC UT 84114-2330 801-4 Address and phose number of the institution, entity, business or person named above Covered person's status, relationship or commitment to the 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 owner of a substantial interest in a business entity that does or anticipates doing business with Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold an investment or other financial interest in a create a potential or actual conflict with my public duties. I hold an investment or other actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or parson with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>) No conflict	177 W Price Ave South Salt Lake, UT 8	34115	
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Board member Covered person's status, relationship or commitment to the institution, entity, business or person named above State Capitol Complex Senate Building Suite 330 PO Box 142330 SLC UT 84114-2330 801-! Address and phone number of the institution, entity, business or person named above Select the category that applies to yourself and the outside institution, entity, business or person 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 owner of a substantial interest in a business entity that does or anticipates doing business we satist face County. □ I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business we satist face 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 finatest 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>) No conflict	Covered Person's County Address/Volunteer's Address		
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section. Board member Covered person's status, relationship or commitment to the institution, entity, business or person named above State Capitol Complex Senate Building Suite 330 PO Box 142330 SLC UT 84114-2330 801-4 Address and phone number of the institution, entity, business or person named above Covered person's status, relationship or commitment to the institution, entity, business or person identified in subsection (B) above: Covered person's data applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: Covered person's data applies to yourself and the outside institution and or assisting a person or business entity that is subject to the regulation of Si Lake County. Law an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business we stalt take County. Salt Lake County. I hold a nivestment or other financial interest that creates a potential or actual conflict with my public duties. I hold a nivestment or other attra erates a 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>) No conflict Date Month Year	Juvenile Justice Oversight Committee		
Covered person's status, relationship or commitment to the institution, entity, business or person named above State Capitol Complex Senate Building Suite 330 PO Box 142330 SLC UT 84114-2330 801-{ Address and phone number of the institution, entity, business or person named above Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have a greed 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 does or anticipates doing business w Salt Lake County. I tam 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 tam 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 thold 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 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>) No conflict I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the The day of January 2025. Signed on the The day of January 2025. Correct Mannee County Carolyn Hansen Printed Name Cardyn Hansen Printed Name C	Outside institution, entity, private business or person in w is required in the above section	hich the Covered Person has a personal or bus	iness interest for which disclosure
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Signed on the $\frac{7 \text{th}}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$, at $\frac{\text{Salt Lake County}}{\text{City or other location, and state or county}}$ Carolyn Hansen Printed Name Carolyn Hansen			
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Signed on the 7th Date day of January , 2025 Year , at Salt Lake County City or other location, and state or county Carolyn Hansen Printed Name Carolyn Hensen			
Signed on the 7th Date day of January , 2025 Year , at Salt Lake County City or other location, and state or county Carolyn Hansen Printed Name Carolyn Hensen			
Signed on the $\frac{7 \text{th}}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$, at $\frac{\text{Salt Lake County}}{\text{City or other location, and state or county}}$ Carolyn Hansen Printed Name Carolyn Hansen	declare under criminal penalty under the law of Utah that th	e foregoing is true and correct.	
Date Month Year at Salt Lake County City or other location, and state or county Carolyn Hansen Printed Name Carolyn Hansen			
Carolyn Hansen Carolyn Hansen Carolyn Hansen	Date day of, Year,		
Carolyn Hansen Carolyn Hansen Carolyn Hansen	Salt Lake County		
Carolyn Hansen Printed Name Carolyn Hansen	City or other location, and state or county	.	
Carolyn Hansen	Carolyn Hansen		
		-	
Signature	Carolyn Hansen		
	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*.)

🗚 Carolyn Hansen	Youth Services	385-468-4500
Covered Person Position, or County	Division for which you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt La	ke, UT 84115	
Covered Person's County Address/Volunteer'	s Address	
_{B.} Optavia		
Outside institution, entity, private business or is required in the above section	person in which the Covered Person has a personal or bus	iness interest for which disclosure
Health Coach		
Covered person's status, relationship or comm	itment to the institution, entity, business or person named	above
100 International Dr, 18th Floor	Baltimore, Maryland 1-888-678-2842	
Address and phone number of the institution,	entity, business or person named above	
C. Select the category that applies to yourself an	nd the outside institution, entity, business or person identif	fied in subsection (B) above:
I receive or have agreed to receive comp	ensation for assisting a person or business entity in a transa	action involving Salt Lake County.
I am an officer, director, agent, employe Lake County.	e or the owner of a substantial interest in a business entity	that is subject to the regulation of Sal
I am an officer, director, agent, employe	e or owner of a substantial interest in a business entity that	does or anticipates doing business wit
Salt Lake County.	nterest that creates a potential or actual conflict with my p	ublic duties.
	potential or actual conflict with my public duties.	
X None of the above categories apply.		
entity or person with the County. Use more	tential conflicts of interest identified above, i.e., the nature sheets if necessary. (<i>This disclosure statement will not be</i>	
is completed.)	viduals wanting to lose weight or improve their nutriti	00
Fronde freatur coaching services to indi	viduals wanting to lose weight of improve their numb	on.
I declare under criminal penalty under the law of		
Signed on the $\frac{7\text{th}}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$,	2025 Year	
	i cai	
Salt Lake County		
City or other location, and state or county		
Carolyn Hansen		
Printed Name		
Carolyn Hansen		
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.)

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A.	Carolyn Hansen		Youth Services	385-468-4500
	Covered Person Pos	ition, or County Division for	which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave So	uth Salt Lake, UT 84	1115	
	Covered Person's County Add	lress/Volunteer's Address		
B.	Raise the Future			
	is required in the above section		ch the Covered Person has a personal or busi	ness interest for which disclosure
	Board member			
			institution, entity, business or person named	above
	7414 State St #101,			
	Address and phone number of	the institution, entity, busines	ss or person named above	
C.	Select the category that appli	es 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 a	ssisting a person or business entity in a transac	ction involving Salt Lake County.
	Lake County.		r of a substantial interest in a business entity a substantial interest in a business entity that o	
			eates a potential or actual conflict with my pu tual conflict with my public duties.	blic duties.
	None of the above categ	ories apply.		
D.			ets of interest identified above, i.e., the nature ssary. (<i>This disclosure statement will not be a</i>	
	No conflict			
•	L			
	leclare under criminal penalty u		foregoing is true and correct.	
Si	gned on the $\frac{7\text{th}}{\text{Date}}$ day of $\frac{J}{M}$	Ionth , 2025 Year		
at	Salt Lake County			
	City or other location, and sta	te or county		
С	arolyn Hansen			
D.,	inted Manag			

Printed Name

Carolyn Hansen

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.	Carolyn Hansen		Youth Services	385-468-4500
	Covered Person	Position, or County Division for	which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 8	4115	
	Covered Person's Count	y Address/Volunteer's Address		
B.	Shelter Kids, Inc			8
	Outside institution, entity is required in the above s		ich the Covered Person has a personal or busi	ness interest for which disclosure
	Board member			
	Covered person's status,	relationship or commitment to the	institution, entity, business or person named	above
	177 W Price Ave	e SLC, UT 84115 385-4	68-4500	
	Address and phone numb	per of the institution, entity, busine	ess or person named above	
C.	Select the category that	applies to yourself and the outside	e institution, entity, business or person identifi	ed in subsection (B) above:
	I receive or have ag	greed to receive compensation for a	assisting a person or business entity in a transa	ction involving Salt Lake County.
	I am an officer, dir Lake County.	ector, agent, employee or the own	er of a substantial interest in a business entity	that is subject to the regulation of Salt
	I am an officer, dir	ector, agent, employee or owner o	f a substantial interest in a business entity that	does or anticipates doing business with
	Salt Lake County.	nt or other financial interest that c	reates a potential or actual conflict with my pu	ublic duties
			ctual conflict with my public duties.	
	X None of the above	categories apply.		
D.			cts of interest identified above, i.e., the nature essary. (<i>This disclosure statement will not be a</i>	
	No conflict - board is		ity members. Shelter Kids provides donat SP, Milestone, FPSS programs.	ions for day to day needs of
Ιc	leclare under criminal pen	alty under the law of Utah that the	foregoing is true and correct.	
Si	gned on the 7th day	y of January ,2025 Month ,7207		
	Salt Lake County			
at	City or other location, an	nd state or county		
С	arolyn Hansen			
Pr	inted Name			
Ca	rolyn Hansen			
Si	gnature			

(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.	Carolyn Hansen		Youth Services	385-468-4500
	Covered Person	Position, or County Division for wh	ich you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	e South Salt Lake, UT 841	15	
	Covered Person's Count	y Address/Volunteer's Address		10
B.	UBJJ Board			
	Outside institution, entity is required in the above s		the Covered Person has a personal or busin	less interest for which disclosure
	Board member			
	Covered person's status,	relationship or commitment to the ins	titution, entity, business or person named a	above
	State Capitol Co	mplex Senate Building Su	iite 330 PO Box 142330 SLC	UT 84114-2330 801-{
	Address and phone number	per of the institution, entity, business of	or person named above	
C.	Select the category that	applies to yourself and the outside ins	stitution, entity, business or person identific	ed in subsection (B) above:
	I receive or have ag	greed to receive compensation for assis	sting a person or business entity in a transac	ction involving Salt Lake County.
	I am an officer, dir Lake County.	ector, agent, employee or the owner o	f a substantial interest in a business entity t	hat is subject to the regulation of Salt
	I am an officer, dir	ector, agent, employee or owner of a s	ubstantial interest in a business entity that c	loes or anticipates doing business with
	Salt Lake County.	nt or other financial interest that creat	es a potential or actual conflict with my pu	blic duties
		iterest that creates a potential or actua		one duties.
	X None of the above	categories apply.		
D.	entity or person with th is completed.)	e County. Use more sheets if necessa	of interest identified above, i.e., the nature ry. (<i>This disclosure statement will not be a</i>	
	No conflict - appointe	ed board member		
Ιc		alty under the law of Utah that the for	egoing is true and correct.	
Si	gned on the $\frac{7\text{th}}{\text{Date}}$ day	y of January , 2025 Month , Year ,		

Salt Lake County at

City or other location, and state or county

Carolyn Hansen

Printed Name

Carol	yn	Hansen	_
		n 7, 2025 16:36 MST)	1
C:			

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.)

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ou are employed or volunteering	County/Volunteer's Phone
overed Person has a personal or busi	ness interest for which disclosure
overed Person has a personal or busi	ness interest for which disclosure
overed Person has a personal or busi	ness interest for which disclosure
overed Person has a personal or busi	ness interest for which disclosure
on, entity, business or person named	above
109	
son named above	
on, entity, business or person identifi	ed in subsection (B) above:
a person or business entity in a transa	ction involving Salt Lake County.
ntial interest in a business entity that potential or actual conflict with my pu	does or anticipates doing business w
This disclosure statement will not be a	accepted as valid unless this section
	on, entity, business or person named 109 son named above on, entity, business or person identifi a person or business entity in a transact bstantial interest in a business entity ntial interest in a business entity that botential or actual conflict with my pu- flict with my public duties. erest identified above, i.e., the nature <i>This disclosure statement will not be a</i> Wesley Bell Ringers, hosted by C

Signed on the $\frac{1}{Date}$ day of $\frac{January}{Month}$, $\frac{2025}{Year}$,

Salt Lake City, Utah

City or other location, and state or county

Charles Eubanks

Printed Name

Charles Eubanks
Charles Eubanks (Jan 13, 2025 11:04 MST)

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. Charlotte Marshall	Youth Services	385-468-4500
	r which you are employed or volunteering	County/Volunteer's Phone
Covered Person's County Address/Volunteer's Address	54115	
B. Lighthouse Counseling Services		
Outside institution, entity, private business or person in w is required in the above section	hich the Covered Person has a personal or busi	ness interest for which disclosure
Employee (therapist		
Covered person's status, relationship or commitment to the	e institution, entity, business or person named	above
204 E Fort Union Blvd Suite 201 Midva	le, UT 84047	
Address and phone number of the institution, entity, busin	ness or person named above	
C. Select the category that applies to yourself and the outsid	le institution, entity, business or person identifi	ied in subsection (B) above:
I receive or have agreed to receive compensation for	assisting a person or business entity in a transa	ction involving Salt Lake County.
I am an officer, director, agent, employee or the own Lake County. I am an officer, director, agent, employee or owner of		
Salt Lake County.		
I hold an investment or other financial interest that I hold a personal interest that creates a potential or a		ıblic duties.
X None of the above categories apply.		
D. Give a detailed description of the actual or potential confi entity or person with the County. Use more sheets if neo <i>is completed.</i>)	cessary. (This disclosure statement will not be a	
I hold another position as a therapist. There is no	conflict of interest at this time.	
I declare under criminal penalty under the law of Utah that th	e foregoing is true and correct.	
Signed on the $\frac{01}{Date}$ day of $\frac{January}{Month}$, $\frac{2025}{Year}$,		

Salt Lake City

City or other location, and state or county

Charlotte K Marshall

Printed Name	
Charlotte K Marshall	
Charlotte K Marshall (Jan 12, 2025 14:52 MST)	

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*.)

Chris Bereshnyi		Youth Services	385-468-4500
Covered Person Pos	sition, or County Division for which y	ou are employed or volunteering	County/Volunteer's Phone
177 W Price Ave So	outh Salt Lake, UT 84115		
Covered Person's County Add	lress/Volunteer's Address		
Humane Society of	Utah (HSU)		
Outside institution, entity, privise required in the above section		Covered Person has a personal or busi	ness interest for which disclosure
Volunteer			
Covered person's status, relati	onship or commitment to the institut	ion, entity, business or person named	above
HSU 4343 S 300 W	(801) 261-2919	, •	
Address and phone number of	f the institution, entity, business or pe	rson named above	
Select the category that appli	ies to yourself and the outside institut	ion, 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 transac	ction involving Salt Lake County.
		ibstantial interest in a business entity	NA 1
	agent, employee or owner of a substa	intial interest in a business entity that o	does or anticipates doing business
Salt Lake County.	other financial interest that creates a 1	potential or actual conflict with my pu	ublic duties
	t that creates a potential or actual con		ione dattes.
X None of the above categ	ories apply.		
entity or person with the Cou is completed.)	unty. Use more sheets if necessary. (terest identified above, i.e., the nature This disclosure statement will not be a	of the relationship of each business accepted as valid unless this section
Walk dogs, clean kennels	, train new volunteers		
		,	
eclare under criminal penalty u	under the law of Utah that the foregoin	ng is true and correct.	•
med on the $\frac{15}{D}$ day of $\frac{1}{2}$	lanuary 2025		
med on the $\frac{15}{Date}$ day of $\frac{J}{N}$	fonth 'Year'		

Salt Lake City, Ut

City or other location, and state or county

Chris Bereshnyi

Printed Name

1	
ris Bereshnyi (Jan 15, 2025 11:40	MST

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.	Chris Bereshowy i Karth Services						
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone						
	177 W- Price Ave. SLC, UT 84115						
	Covered Person's County Address/Volunteer's Address						
B.	Kut Haven Ruff Haven						
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which							
	is required in the above section (1370 5- 400 W-						
	Covered person's status, relationship or commitment to the institution, entity, business or person named above						
	1320 5- 400 W-						
	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.	O. 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 second secon						
	Train Volunteers & Clean Catarea						
	V Juli						
Ic	leclare under criminal penalty under the law of Utah that the foregoing is true and correct.						
	Note and the second sec						
Si	gned on the $\frac{2-3}{\text{Date}}$ day of $\frac{1}{\text{Month}}$, $\frac{2.5}{\text{Year}}$,						
	$\leq 1 $						
at	City or other location, and state or county						
	City of other location, and state of county						

Chris Bereshyi

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*.)

laudia Alvarado Weir	Youth Services	385-468-4500			
vered Person Position, or Count	Division for which you are employed or volunteering	County/Volunteer's Phone			
77 W Price Ave South Salt La	ke, UT 84115				
vered Person's County Address/Volunteer	s Address				
B. First Step House					
tside institution, entity, private business or equired in the above section	person in which the Covered Person has a personal or bus	iness interest for which disclosure			
ull time employee					
vered person's status, relationship or com	nitment to the institution, entity, business or person named	above			
34s 500e SLC, UT 84611					
dress and phone number of the institution,	entity, business or person named above				
elect the category that applies to yourself a	nd the outside institution, entity, business or person identif	ied in subsection (B) above:			
I receive or have agreed to receive com	ensation for assisting a person or business entity in a transa	action involving Salt Lake County.			
I am an officer, director, agent, employ Lake County. I am an officer, director, agent, employ Salt Lake County.	obolitika a tokon uniteksi. So gardak eti bayeteksi katitik 🗨 kitakagiti tu keteksi sen ta				
	nterest that creates a potential or actual conflict with my p potential or actual conflict with my public duties.	ublic duties.			
None of the above categories apply.					
	otential conflicts of interest identified above, i.e., the nature sheets if necessary. (<i>This disclosure statement will not be</i>				
o conflict with my Current FT since I w	ork with vulnerable adults				

Signed on the $\frac{11}{Date}$ day of $\frac{January}{Month}$, $\frac{2025}{Year}$, at $\frac{SLC}{City \text{ or other location, and state or county}}$

Claudia A Weir

Printed Name

Claudia A	
laudia A Weir (Jan 11	, 2025 17:41 MST)

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*.)

4.	Corylyn Ybarra		Youth Services	385-468-4500
	Covered Person	Position, or County Division for which y	ou are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115		
	Covered Person's Count	y Address/Volunteer's Address		
3.		e and Technology Academy		
	Outside institution, entit is required in the above a	y, private business or person in which the G section	Covered Person has a personal or busi	ness interest for which disclosure
	Community Cou	ncil Chair		
	Covered person's status,	relationship or commitment to the institut	on, entity, business or person named	above
	2165 E 9400 S S	Sandy, Utah 84093		
	Address and phone num	ber of the institution, entity, business or pe	rson named above	
С.	Select the category that	applies to yourself and the outside institut	ion, 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 transa	ction involving Salt Lake County.
	I am an officer, die Lake County.	rector, agent, employee or the owner of a su	ibstantial interest in a business entity	that is subject to the regulation of Sa
		ector, agent, employee or owner of a substa	ntial interest in a business entity that	does or anticipates doing business wi
	Salt Lake County.	nt or other financial interest that creates a	potential or actual conflict with my pu	blic duties
		nterest that creates a potential or actual con		
	None of the above	categories apply.		
D.	Give a detailed descript entity or person with th is completed.)	ion of the actual or potential conflicts of in the County. Use more sheets if necessary. (erest identified above, i.e., the nature This disclosure statement will not be c	of the relationship of each business accepted as valid unless this section
		Chair- voting member for Lands and Tr	ust Funds dollars.	
Тd	eclare under criminal per	alty under the law of Utah that the foregoin	is true and correct	
	ectare under criminal per	-	ig is true and correct.	

Signed on the $\frac{17}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$,

at _____

City or other location, and state or county

Corylyn Ybarra

Printed Name

Corylyn Gbarsa

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*.)

Corylyn Ybarra	Youth Services	385-468-4500
Covered Person Position, or County Division f 177 W Price Ave South Salt Lake, UT	for which you are employed or volunteering 84115	County/Volunteer's Phone
Covered Person's County Address/Volunteer's Address		
Child Welfare Improvement Council		
Outside institution, entity, private business or person in vis required in the above section	which the Covered Person has a personal or busi	iness interest for which disclosure
Council Member		
Covered person's status, relationship or commitment to DHHS	the institution, entity, business or person named	above
Address and phone number of the institution, entity, bus	iness or person named above	
2. Select the category that applies to yourself and the outs	ide institution, entity, business or person identif	ied in subsection (B) above:
I receive or have agreed to receive compensation for	or assisting a person or business entity in a transa	ction involving Salt Lake County.
 I am an officer, director, agent, employee or the ov Lake County. I am an officer, director, agent, employee or owner Salt Lake County. I hold an investment or other financial interest that I hold a personal interest that creates a potential or None of the above categories apply. 	of a substantial interest in a business entity that t creates a potential or actual conflict with my p	does or anticipates doing business with
 Give a detailed description of the actual or potential con- entity or person with the County. Use more sheets if m is completed.) 	flicts of interest identified above, i.e., the nature ecessary. (<i>This disclosure statement will not be</i>	e of the relationship of each business accepted as valid unless this section
Voting member for the CWIC council.		
I declare under criminal penalty under the law of Utah that	the foregoing is true and correct.	
Signed on the ¹⁷ day of January , 2025		
Signed on the $\frac{17}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$,		

Salt Lake County

City or other location, and state or county

Corylyn Ybarra

Printed Name

Corylyn Gbarra

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*.)

Corylyn Ybarra	Youth Services	385 - 468-4500
	tich you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake, UT 841	15	
Covered Person's County Address/Volunteer's Address		
Highland Springs Specialty Clinic		
Outside institution, entity, private business or person in which is required in the above section	the Covered Person has a personal or busi	ness interest for which disclosure
Therapist		
Covered person's status, relationship or commitment to the in-	stitution, entity, business or person named	above
4460 S Highland Drive Suite 100n SLC, U	ltah 84124	
Address and phone number of the institution, entity, business	or person named above	
Select the category that applies to yourself and the outside in	stitution, entity, business or person identifi	ed in subsection (B) above:
I receive or have agreed to receive compensation for assi	sting a person or business entity in a transa	ction involving Salt Lake County.
I am an officer, director, agent, employee or the owner of Lake County.	of a substantial interest in a business entity	that is subject to the regulation of Sal
I am an officer, director, agent, employee or owner of a s	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 creat	tes a potential or actual conflict with my pu	blic duties.
I hold a personal interest that creates a potential or actua		
None of the above categories apply.		
Give a detailed description of the actual or potential conflicts entity or person with the County. Use more sheets if necessa is completed.)		
Provide therapeutic services on a contractual basis for	non-Medicaid clients.	
declare under criminal penalty under the law of Utah that the for	regoing is true and correct.	
-		
igned on the $\frac{13}{Date}$ day of $\frac{January}{Month}$, $\frac{2025}{Year}$,		

at _______City or other location, and state or county

Corylyn Ybarra

Salt Lake County

Printed Name

Corylyn Gbarra

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,	Danielle Latta		Youth Services	385-468-4500			
	Covered Person	Position, or County Division for which		County/Volunteer's Phone			
		e South Salt Lake, UT 8411	5	. <u> </u>			
Covered Person's County Address/Volunteer's Address							
B.	Manga United C						
	Outside institution, enti is required in the above	ty, private business or person in which th section	e Covered Person has a personal or bus	iness interest for which disclosure			
	Board Memebe	r					
	Covered person's status	, relationship or commitment to the instit	tution, entity, business or person named	above			
	8952 W Magna	Main					
	Address and phone num	ber of the institution, entity, business or	person named above				
C.	Select the category that	at applies to yourself and the outside insti	tution, entity, business or person identif	ied in subsection (B) above:			
	I receive or have a	agreed to receive compensation for assisti	ng a person or business entity in a transa	ction involving Salt Lake County.			
	I am an officer, di Lake County.	irector, agent, employee or the owner of a	a substantial interest in a business entity	that is subject to the regulation of Salt			
		rector, agent, employee or owner of a sub	stantial interest in a business entity that	does or anticipates doing business with			
	Salt Lake County	ent or other financial interest that creates	a potential or actual conflict with my p	ublic duties.			
		interest that creates a potential or actual c					
	None of the above	e categories apply.					
D,	entity or person with t is completed.)	otion of the actual or potential conflicts of he County. Use more sheets if necessary					
	voting board member	er as part of my job.					
Ιċ	leclare under criminal pe	nalty under the law of Utah that the foreg	oing is true and correct.				
Si	gned on the 9 date date	ay of January , 2025 Month , Year ,					

South Salt Lake City at ____

City or other location, and state or county

Danielle Latta

Printed Name

Danielle Latta

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 refiled every January, as long as the potential conflict exists. l

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

Under the provisions of the County Officers and 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.)

Darla Scott	Youth Services	385-468-4500
Covered Person Positio	n, or County Division for which you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave Sout	n Salt Lake, UT 84115	
Covered Person's County Addres	s/Volunteer's Address	
Granite School District		
	business or person in which the Covered Person has a personal or bus	siness interest for which disclosure
Lunch Manager		
Covered person's status, relations	hip or commitment to the institution, entity, business or person named	1 above
Silver Hills Elementary	⁷ 5770 W 5100 S West Valley Utah 84218	
Address and phone number of the	institution, entity, business or person named above	
Select the category that applies t	o yourself and the outside institution, entity, business or person identi	fied in subsection (B) above:
I am an officer, director, ag		-
I am an officer, director, age	ent, employee or owner of a substantial interest in a business entity that	t does or anticipates doing business wi
	ar financial interact that creates a notantial or actual conflict with my r	uplic dution
		duties.
X None of the above categorie	es apply.	
Give a detailed description of the entity or person with the County <i>is completed.</i>)	actual or potential conflicts of interest identified above, i.e., the nature. Use more sheets if necessary. (<i>This disclosure statement will not be</i>	e of the relationship of each business accepted as valid unless this section
There is no Conflict of interes	st.	
s		
(i	177 W Price Ave South Covered Person's County Address Granite School District Outside institution, entity, private is required in the above section Lunch Manager Covered person's status, relations Silver Hills Elementary Address and phone number of the Select the category that applies the □ I receive or have agreed to r □ Lake County. □ I am an officer, director, age Salt Lake County. □ I hold an investment or othe □ hold a personal interest the ○ Silver detailed description of the □ of the above categorie ○ Give a detailed description of the □ of the above categorie	177 W Price Ave South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Granite School District Outside institution, entity, private business or person in which the Covered Person has a personal or busis required in the above section Lunch Manager Covered person's status, relationship or commitment to the institution, entity, business or person named Silver Hills Elementary 5770 W 5100 S West Valley Utah 84218 Address and phone number of the institution, entity, business or person identi □ I receive or have agreed to receive compensation for assisting a person or business entity in a trans □ I am an officer, director, agent, employee or owner of a substantial interest in a business entity tha Salt Lake County. □ I am an officer, director, agent, employee or owner of a substantial interest in a business entity tha 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. □ I hold a personal interest that creates a potential or actual conflict with my public duties. □ I hold a personal interest that creates a 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</i>

Signed on the $\frac{14}{Date}$ ___ day of _____ Month 2025 Year Magna Utah at

City or other location, and state or county

Darla Scott

Printed Name

·Andasit	
Darla Scott (Jan 1	4, 2025 21:17 MST)

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.	David Cavazos		Youth Services	385-468-4500	
	Covered Person	Position, or County Division f	or which you are employed or volunteering	County/Volunteer's Phone	
	177 W Price Ave	South Salt Lake, UT	84115		
ī	Covered Person's County	y Address/Volunteer's Address			
B.	Utah Case Mana	igement LLC			
(Outside institution, entity is required in the above s	, private business or person in v ection	which the Covered Person has a personal or busin	ess interest for which disclosure	
	Part Time Certifie	ed Case Manger			
Ō	Covered person's status,	relationship or commitment to t	he institution, entity, business or person named a	bove	
	13691 S Brown	Farm Lane Draper, U	tah 84020 (801) 755-5028		
2	Address and phone numb	per of the institution, entity, busi	ness or person named above		
C.	Select the category that	applies to yourself and the outsi	ide institution, entity, business or person identifie	ed in subsection (B) above:	
	279.0 Z	e.e. (5)	r assisting a person or business entity in a transac		
	I am an officer, dir	ector, agent, employee or the ow	mer of a substantial interest in a business entity t	hat is subject to the regulation of Salt	
	Lake County.		-		
	Salt Lake County.	ector, agent, employee or owner	of a substantial interest in a business entity that d	oes or anticipates doing business wit	
	I hold an investment	I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.			
		old a personal interest that creates a potential or actual conflict with my public duties.			
	X None of the above				
D.	Give a detailed description entity or person with the <i>is completed.</i>)	ion of the actual or potential con e County. Use more sheets if ne	flicts of interest identified above, i.e., the nature of ecessary. (<i>This disclosure statement will not be a</i>	of the relationship of each business accepted as valid unless this section	
	living services to Med	dicaid members experiencing na. Complete intake process,	RSS) in the form of tenancy support, commu homelessness, food insecurity, transportatio documentation, scan documents and comp	on insecurity, interpersonal	
I de	clare under criminal pen	alty under the law of Utah that th	he foregoing is true and correct.		
Sig	ned on the $\frac{07}{Date}$ day	$v \text{ of } \frac{\text{January}}{\text{Month}}, \frac{2025}{\text{Year}},$			
	Salt Lake City, Utah				
at	City or other location, an	nd state or county	_		
Da	vid Cavazos				
	ited Name		_		
-	avid Cavazos				
David	Cavazos (Jan 8, 2025 14:30 MST)		-		

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.	Dennis Sellis		Youth Services	385-468-4500
	Covered Person	Position, or County Division for whi	ch you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 841	15	
	Covered Person's County	y Address/Volunteer's Address		
B.	Integrated Psycl	hotherapy Services		
	Outside institution, entity is required in the above s		he Covered Person has a personal or busi	ness interest for which disclosure
	Therapist			
	Covered person's status,	relationship or commitment to the inst	itution, entity, business or person named	above
	4885 S 900 E #2	207, Salt Lake City, UT 84	117. (801) 309-6980	
	Address and phone numb	per of the institution, entity, business o	r person named above	
C.	Select the category that	applies to yourself and the outside ins	titution, entity, business or person identif	ied in subsection (B) above:
	I receive or have ag	greed to receive compensation for assis	ting a person or business entity in a transa	ction involving Salt Lake County.
	I am an officer, dire Lake County.	ector, 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, dire Salt Lake County.	ector, agent, employee or owner of a su	bstantial interest in a business entity that	does or anticipates doing business with
	I hold an investmen	nt or other financial interest that create aterest that creates a potential or actual	s a potential or actual conflict with my pu	ablic duties.
	None of the above		connet with my public duties.	
 D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the re entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted is completed.</i>) 		accepted as valid unless this section		
	Integrated Psycother	apy Services is a Private Practice i	n which I work solely with Adults. I do	o not see Youth.

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

Signed on the 16	day of	2025
Date	Month	Year
Orem, UT		
	on, and state or count	y

filed every January, as long as the potential conflict exists.

Dennis Sellis

Printed Name	
AND	
Dennis Sellis (Jan 16, 2025 10:13 MST)	
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-

(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.	Desiree Steadman-Gallegos	Youth Services	385-468-4500
	Covered Person Position, or County Division for which y 177 W Price Ave South Salt Lake, UT 84115	ou are employed or volunteering	County/Volunteer's Phone
В.	Covered Person's County Address/Volunteer's Address MEHR Thera Peyfic Counseling	Services, P.L.L.C.	
	Dutside institution, entity, private business or person in which the C is required in the above section OWNEX + MERCY SF	Covered Person has a personal or busin	ness interest for which disclosure
	Covered person's status, relationship or commitment to the instituti $262 E \cdot 3900 S_1 \text{ Swite # 115},$	Millcreek, UT	above
	Address and phone number of the institution, entity, business or per		No.46 (N - 20 - 20050), 135
C.	Select the category that applies to yourself and the outside instituti		
	 I receive or have agreed to receive compensation for assisting I am an officer, director, agent, employee or the owner of a su Lake County. 	• • • • • • • • • • • • • • • • • • •	ξ ,
	 I am an officer, director, agent, employee or owner of a substational Salt Lake County. I hold an investment or other financial interest that creates a potential or actual control of the substational interest that creates a potential or actual control of the substational substationextrationa substationa substatione substational substatione s	potential or actual conflict with my pu	
	None of the above categories apply.		
D.	Give a detailed description of the actual or potential conflicts of int entity or person with the County. Use more sheets if necessary. (<i>is completed.</i>) I have a Private Practice in which I am a therapist working w	This disclosure statement will not be a	accepted as valid unless this section
	the practice accepts their insurance, all non-Medicaid.		
			×1
	clare under criminal penalty under the law of Utah that the foregoir	ig is true and correct.	
Sig	ned on the $\frac{15}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$,		
at _	/lillcreek, Utah		
	City or other location, and state or county		

Desiree Steadman-Gallegis

Printed Name

Sold .

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.	Diana Johnson			Youth Services	385-468-4500
	Covered Person	Position, or Cou	nty Division for which yo	ou are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt	Lake, UT 84115		
	Covered Person's County	Address/Volunte	er's Address		
В.	Magna Kearns Y	outh Court			
	Outside institution, entity is required in the above se		or person in which the C	overed Person has a personal or bus	iness interest for which disclosure
	Assistant Program	m Coordinat	or		
Covered person's status, relationship or commitment to the institution, entity, business or person named above					
	8950 W. Magna I	Main Street	Magna, UT 8404	4 (no phone at this time) (
	Address and phone numb	er of the institution	n, entity, business or per	son named above	
C.	Select the category that	applies to yoursel	f and the outside institution	on, entity, business or person identif	ied in subsection (B) above:
	I receive or have ag	reed to receive co	mpensation for assisting a	person or business entity in a transa	ction involving Salt Lake County.
	I am an officer, dire Lake County.	ctor, agent, empl	oyee or the owner of a su	bstantial interest in a business entity	that is subject to the regulation of Salt
		ctor, agent, empl	oyee or owner of a substan	ntial interest in a business entity that	does or anticipates doing business with
	Salt Lake County.	t or other financi	al interest that creates a p	otential or actual conflict with my p	ablic duties.
	I hold a personal in	terest that creates	a potential or actual conf	lict with my public duties.	
	None of the above of	ategories apply.			
D.	Give a detailed descriptic entity or person with the <i>is completed.</i>)	on of the actual of County. Use me	potential conflicts of into ore sheets if necessary. (7	crest identified above, i.e., the nature this disclosure statement will not be a	of the relationship of each business accepted as valid unless this section
	I will be compensated once I sign the contra	up to 20 hours ct.	for the time spent on ta	asks related to the Magna Kearns	Youth Court. This will happen
I d	leclare under criminal pena	lty under the law	of Utah that the foregoin	g is true and correct.	
	-	January	2025	-	
51	Date Date	Month	'Year',		

Salt Lake County Youth Services, SLC, UT

City or other location, and state or county

Diana M, Johnson

Printed Name

Diana	M.	Johnson
-------	----	---------

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 refiled every January, as long as the potential conflict exists.

(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.} Emeline Katoa	Youth Services	385-468-4500
	n for which you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake, U	T 84115	
Covered "erson's County Address/Volunteer's Address	35	
B. Youth Recourse Cen	Her	
Outside institution, entity, private business or person i is required in the above section MEMHOV	n which the Covered Person has a personal or busi	
Covered person's status, relationship or commitment t 888 S 400 W	o the institution, entity, business or person named	above
Address and phone number of the institution, entity, b	usiness or person named above	
C. Select the category that applies to yourself and the ou	itside institution, entity, business or person identifi	ed in subsection (B) above:
	for assisting a person or business entity in a transa	
I am an officer, director, agent, employee or the Lake County.	owner of a substantial interest in a business entity	that is subject to the regulation of Sal
I am an officer, director, agent, employee or own Salt Lake County.	her of a substantial interest in a business entity that	does or anticipates doing business wi
I hold an investment or other financial interest th	nat creates a potential or actual conflict with my pu	ıblic duties.
I hold a personal interest that creates a potential	or actual conflict with my public duties.	
X None of the above categories apply.		
 D. Give a detailed description of the actual or potential control of the entity or person with the County. Use more sheets if <i>is completed.</i>) 		
Working with Homeless youth who are 18-23		
n		
I declare under criminal penalty under the law of Utah tha	t the foregoing is true and correct.	
Signed on the $\frac{16}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$,		
Utah		
City or other location, and state or county		

Emeline Katoa

Printed Name

mille 14:01 MST)

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 refiled every January, as long as the potential conflict exists.

CI.

(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*.)

Fransisco Bedolla	Youth Services	385-468-4500
Construction (Construction) and Construction (Construction) (Co	for which you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake, UT	84115	
Covered Person's County Address/Volunteer's Address		1
3. Fathers and families	Coalition of Utah	/FFC4
Outside institution, entity, private business or person in is required in the above section	which the Covered Person has a personal or bu	siness interest for which disclosure
FFCU Board Chair		
Covered person's status, relationship or commitment to	the institution, entity, business or person name	d above
$\frac{1455}{\text{Address and phone number of the institution, entity, bus}$	est valley City,	nt \$4119
Address and phone number 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 identi	fied in subsection (B) above:
I receive or have agreed to receive compensation for	or assisting a person or business entity in a trans	action involving Salt Lake County.
I am an officer, director, agent, employee or the ov	wher of a substantial interest in a business entity	y 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 tha	t does or anticipates doing business wi
Salt Lake County.		
I hold an investment or other financial interest that I hold a personal interest that creates a potential or	t creates a potential or actual conflict with my p	public duties.
None of the above categories apply.	actual connet with my public duties.	
	~	
 Give a detailed description of the actual or potential com entity or person with the County. Use more sheets if ne is completed.) 	illicts of interest identified above, i.e., the nature ecessary. (<i>This disclosure statement will not be</i>	e of the relationship of each business accepted as valid unless this section
Chair of Fathers & Families Coalition of Utah Boa	rd of Directors.	
I declare under criminal penalty under the law of Utah that t	he foregoing is true and correct	
Signed on the $\frac{13}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$,		
Salt Lake County		

City or other location, and state or county

Frank Bedolla

Printed Name

at

Frank Bedolla Frank Bedolla (Jan 13, 2025 12:31 MST)

Signature

C 11

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.	German Ochoa		Youth Services	385-468-4500
	Covered Person	Position, or County Division for which y	ou are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	e South Salt Lake, UT 84115		
	Covered Person's Count	y Address/Volunteer's Address		
B.	My Kearns Coali	ition		
	is required in the above s	y, private business or person in which the C section	Covered Person has a personal or busin	ness interest for which disclosure
	volunteer			
		relationship or commitment to the instituti	on, entity, business or person named a	above
		o physical address.		
	Address and phone numb	ber of the institution, entity, business or per	rson named above	
C.	Select the category that	applies to yourself and the outside institut	ion, entity, business or person identified	ed in subsection (B) above:
	I receive or have ag	greed to receive compensation for assisting	a person or business entity in a transac	ction involving Salt Lake County.
		rector, agent, employee or the owner of a su	ubstantial interest in a business entity t	that is subject to the regulation of Salt
	Lake County.	ector, agent, employee or owner of a substa	untial interest in a business entity that of	loes or anticipates doing business with
	Salt Lake County.			
		nt or other financial interest that creates a p nterest that creates a potential or actual con		blic duties.
	None of the above		51	
D.	Give a detailed descript entity or person with th <i>is completed.)</i>	ion of the actual or potential conflicts of int the County. Use more sheets if necessary. (2)	terest identified above, i.e., the nature This disclosure statement will not be a	of the relationship of each business accepted as valid unless this section
	I am a volunteer in t	he coalition		
	- 2			
I d	eclare under criminal pen	alty under the law of Utah that the foregoir	ng is true and correct.	

Signed on the $\frac{8}{Date}$ day of $\frac{January}{Month}$, $\frac{2025}{Year}$, Salt Lake City Utah

German Ochoa

Printed Name	
German Ochoa (Jan 8, 2025 06:29 MST)	
Signatura	

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.	German Ochoa	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	

Covered Person's County Address/Volunteer's Address

B. Utah State University

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 employee

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

2001 State St S1-300 Salt Lake 84190 (385)468-4820

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 work part time as a group facilitator teaching parenting programs.

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

Signed on the	7	day of January	2025
	Date	Month	, Year,

Salt Lake City Utah

City or other location, and state or county

German Ochoa

Printed Name	
German Ochoa (Jan 7, 2025 12:05 MST)	
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.	German Ochoa	Youth Services	385-468-4500	
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone	
	177 W Price Ave South Salt Lake, UT 84115			

Covered Person's County Address/Volunteer's Address

B. Weber Human Services

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 employee

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

237 26th St, Ogden UT 84401 (801)625-3700

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 work as part time facilitator teaching parenting programs.

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

Signed on the 7	day of January	2025
Date	e Month	Year,

Salt Lake City Utah

City or other location, and state or county

German Ochoa

Printed Name	
German Ochoa (Jan 7, 2025 12:10 MST)	
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.	James Hamell	Utah	8019038329
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	8201 W 2700 S		
	Covered Person's County	/ Address/Volunteer's Address	
B.	Magna Coalition		
	Outside institution, entity is required in the above s	y, private business or person in which the Covered Person has a personal or bus	siness interest for which disclosure
	Coalition member	r	
	Covered person's status,	relationship or commitment to the institution, entity, business or person named	
	https://magnauni	tedctc.com/contact/ 8952 W Main	Margner, MT
	Address and phone numb	er of the institution, entity, business or person named above	0
C.	Select the category that	applies to yourself and the outside institution, entity, business or person identi-	fied in subsection (B) above:
	I receive or have ag	reed to receive compensation for assisting a person or business entity in a trans	action involving Salt Lake County.
	I am an officer, dire	ector, 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, dire	ector, agent, employee or owner of a substantial interest in a business entity that	t does or anticipates doing business with
	Salt Lake County.	nt or other financial interest that creates a potential or actual conflict with my p	whice duties
		terest that creates a potential or actual conflict with my public duties.	dutie duties.
	X None of the above	categories apply.	
D.	Give a detailed description	on 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</i>	e of the relationship of each business
	is completed.)	county. Use more sneets in necessary. (This disclosure statement will not be	accepted as valia unless this section
		ber who take part in the Magna community though this coalition and wo	orking in Magna at Pleasant
	Green Elementary So	,0001.	
Ιc	leclare under criminal pena	alty under the law of Utah that the foregoing is true and correct.	
Si	gned on the 13 day	of January 2025	
	Date Date	Month 'Year',	

Magna _____

City or other location, and state or county

Miranda Lavallee

Printed Name

Miranda Lavallee

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.	James Hamell	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave		

Covered Person's County Address/Volunteer's Address

B. Pivotal Content, 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

Managing Partner

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

715 East 3900 South, Millcreek, UT 84107

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

Managing Partner of a Media Consultancy Agency

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

Signed on the 14	day of January	2025
Date	day of Month	- ' Year '

Magna, UT - Salt Lake County

City or other location, and state or county

James Hamell

Printed Name

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*.)

James Weir	Youth Services	385-468-4500			
Covered Person Position, or County Division for which		County/Volunteer's Phone			
177 W Price Ave South Salt Lake, UT 8411	15				
Covered Person's County Address/Volunteer's Address Utah Dept. of correction	ZNG				
Outside institution, entity, private business or person in which t		ness interest for which disclosure			
is required in the above section	•	mess interest for which disclosure			
Utah Department of Corrections Case					
Covered person's status, relationship or commitment to the inst		above			
1480 N 8000 W, SLC, UT	T 84116				
Address and phone number of the institution, entity, business of	r person named above				
Select the category that applies to yourself and the outside inst	titution, entity, business or person identif	ied in subsection (B) above:			
I receive or have agreed to receive compensation for assist	ting a person or business entity in a transa	ction involving Salt Lake County.			
I am an officer, director, agent, employee or the owner of Lake County.	a substantial interest in a business entity	that is subject to the regulation of Sa			
I am an officer, director, agent, employee or owner of a su	bstantial interest in a business entity that	does or anticipates doing business w			
Salt Lake County.	s a potential or actual conflict with my pu	ublic dutios			
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 o entity or person with the County. Use more sheets if necessaries completed.)					
I won't have any conflicts because I work with adults at t	the DOC but I thought it better to be s	afe and disclose.			
eclare under criminal penalty under the law of Utah that the fore	going is true and correct.				

Signed on the $\frac{06}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{25}{\text{Year}}$,

Salt Lake City

City or other location, and state or county

James Weir

Printed Name

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.	Julianna Potter	Youth Services	385-468-4500			
	Covered Person Position, or County Divisi	ion for which you are employed or volunteering	County/Volunteer's Phone			
	177 W Price Ave South Salt Lake, I	JT 84115				
	Covered Person's County Address/Volunteer's Ad	ress				
B.	Caring Connections					
	Outside institution, entity, private business or person is required in the above section	n in which the Covered Person has a personal or busin	ness interest for which disclosure			
	Volunteer					
	Covered person's status, relationship or commitment	t to the institution, entity, business or person named a	ibove			
	10 South 2000 East Salt Lake City,	Utah 84112 801-581-3414				
	Address and phone number of the institution, entity,	business or person named above				
C.	Select the category that applies to yourself and the	outside institution, entity, business or person identified	ed in subsection (B) above:			
	I receive or have agreed to receive compensation	on for assisting a person or business entity in a transac	tion involving Salt Lake County.			
	I am an officer, director, agent, employee or th Lake County.	e owner of a substantial interest in a business entity t	hat is subject to the regulation of Salt			
	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.	that creates a potential or actual conflict with my pu	blic duties.			
	I hold a personal interest that creates a potentia	al or actual conflict with my public duties.				
	None of the above categories apply.					
D.		conflicts of interest identified above, i.e., the nature if necessary. (This disclosure statement will not be a				
	No conflict known					
			· · · · · · · · · · · · · · · · · · ·			
I	declare under criminal penalty under the law of Utah t	hat the foregoing is true and correct.				
Si	igned on the $\frac{10}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$	_,				

South Salt Lake

City or other location, and state or county

Julianna Potter

Printed Name

Julianna	Potter
1	-

Signature

€ ****4

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.	Julianna Potter		Youth Services	385-468-4500
	Covered Person	Position, or County Division f	or which you are employed or volunteering	County/Volunteer's Phone

177 W Price Ave South Salt Lake, UT 84115

Covered Person's County Address/Volunteer's Address

B. Catholic Community Services

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

Employee - part-time therapist

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

3350 S Main, South Salt Lake, UT 84115 801-977-9119

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.

X None of the above categories apply.

No conflict known

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.*)

L						
т 1 .		1. 1. 1	1 0770-1-4			
I deci	lare under criminal	penalty under the	e law of Utan tha	t the foregoing	is true and correct.	

Signed on the 10 Date	_ day of Month	, 2025 , Year,				
at						
City or other locatio	City or other location, and state or county					

Julianna Potter

Printed Name

Qulianna Potter

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*.)

\ . '	Julianna Potter	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteerin	ag County/Volunteer's Phone
	177 W Price Ave	e South Salt Lake, UT 84115	
ō	Covered Person's County	y Address/Volunteer's Address	
3.	Healthy West Va	alley Coalition	
Ō	Dutside institution, entity s required in the above s	y, private business or person in which the Covered Person has a personal c	or business interest for which disclosure
l	Board member		
Ō	Covered person's status,	relationship or commitment to the institution, entity, business or person n	amed above
	3600 South Con	stitution Boulevard West Valley City, UT 84119 80	01-966-3600
Ā	Address and phone numb	ber of the institution, entity, business or person named above	·
с.	Select the category that	applies to yourself and the outside institution, entity, business or person is	dentified in subsection (B) above:
	I receive or have ag	greed to receive compensation for assisting a person or business entity in a	transaction involving Salt Lake County.
		rector, agent, employee or the owner of a substantial interest in a business	entity that is subject to the regulation of Sa
	Lake County.	ector, agent, employee or owner of a substantial interest in a business entit	y that does or anticipates doing business w
	Salt Lake County.		
		nt or other financial interest that creates a potential or actual conflict with nterest that creates a potential or actual conflict with my public duties.	my public duties.
	None of the above		
D.	Give a detailed descript	ion of the actual or potential conflicts of interest identified above, i.e., the new County. Use more sheets if necessary. (<i>This disclosure statement will n</i>	
	No known conflict		
	L		
l de	clare under criminal pen	alty under the law of Utah that the foregoing is true and correct.	

Signed on the ¹⁰	day of January	2025
Date	Month	Year '

at _____

City or other location, and state or county

Julianna Potter

Printed Name

Julianna Pottar

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 refiled every January, as long as the potential conflict exists.

(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.	Julianna Potter	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	

Covered Person's County Address/Volunteer's Address

B. Murray Partners 4 Prevention

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

No known conflict

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

5102 S Commerce Drive Murray, UT 84107 (801) 264-7400

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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	declare under	criminal	penalty	under the law	of Utah that the	foregoing	is true and correct.

Si	gned on the 10 Date	_ day of January Month	$\frac{2025}{\text{Year}}$,
at	Internet Search		
at	City or other locatio	n, and state or county	

Julianna Potter

Printed Name

9	ulianna	Pottar
U		

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.	Karen Dohle		Youth Services	385-468-4500
	Covered Person	Position, or County Division for which y	ou are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115		
	Covered Person's County	Address/Volunteer's Address		
B.	Northrop	grumman		
	Outside institution, entity is required in the above s	r, private business or person in which the C	overed Person has a personal or busi	ness interest for which disclosure
	Northrop Grumm	an		
	Covered person's status,	relationship or commitment to the instituti	on, entity, business or person named	above
	8710 Freeport Pl	wy #200, Irving, TX 75063 8	55-737-8364	
	Address and phone numb	er of the institution, entity, business or per	son named above	
C.	Select the category that	applies to yourself and the outside instituti	on, entity, business or person identifi	ed in subsection (B) above:
	I receive or have ag	reed to receive compensation for assisting	a person or business entity in a transa	ction involving Salt Lake County.
	I am an officer, dire Lake County.	ector, agent, employee or the owner of a su	bstantial interest in a business entity	that is subject to the regulation of Salt
	I am an officer, dire Salt Lake County.	ector, agent, employee or owner of a substa	ntial interest in a business entity that o	does or anticipates doing business with
	The second se	nt or other financial interest that creates a p	otential or actual conflict with my pu	blic duties.
	I hold a personal in	terest that creates a potential or actual con	lict with my public duties.	
	X None of the above	categories apply.		
D.		on of the actual or potential conflicts of int e County. Use more sheets if necessary. (2		

is completed.)

There are no potential conflicts of interest between Northrop Grumman and Salt Lake County- Youth services

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

Signed on the $\frac{1}{\overline{D}}$	11	day of January	2025
	Date	Month	'Year'

at _____

City or other location, and state or county

Karen Dohle

Printed Name

Karen Dohle			
Karen Dohle	Jan 11, 2025 16:51 MST)		

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.)

C 11

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*.)

0.00

A. <u>Religing aluso</u> <u>Covered Person</u> <u>Position, or County Division for which you are employed or volunteering</u> <u>177 W Price Ave South Salt Lake, UT 84115</u> <u>Covered Person's County Address/Volunteer's Address</u> <u>B.</u> <u>WWEVSITY OF UTAH HOSPITAL</u> <u>Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for whis required in the above section</u> <u>UNIVERSITY OF UTAH HOSPITAL</u> <u>Covered person's status, relationship or commitment to the institution, entity, business or person named above</u> <u>50 Medical</u> D(N, SUC, WT 84132	
Covered Person's County Address/Volunteer's Address B. <u>WWVEVSITY of Utah Hospital</u> Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for while is required in the above section UNIVERSITY OF UTAH HOSPITAL 1 Therapist Covered person's status, relationship or commitment to the institution, entity, business or person named above	hich disclosure
B. <u>UNIVERSITY OF UTAH HOSPITAL</u> Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for while is required in the above section UNIVERSITY OF UTAH HOSPITAL 1 Therapist Covered person's status, relationship or commitment to the institution, entity, business or person named above	hich disclosure
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for while is required in the above section UNIVERSITY OF UTAH HOSPITAL 1 Therapist Covered person's status, relationship or commitment to the institution, entity, business or person named above	hich disclosure
Covered person's status, relationship or commitment to the institution, entity, business or person named above	
I BILOD	
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 (E	B) above:
I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Sal	It 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	ne 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 Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. 	doing business with
I hold a personal interest that creates a potential or actual conflict with my public duties.	
X None of the above categories apply.	
D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid u is completed.</i>)	
No Conflict	
I declare under criminal penalty under the law of Utah that the foregoing is true and correct.	
Signed on the $\frac{13}{Date}$ day of $\frac{January}{Month}$, $\frac{2025}{Year}$,	
SALT LAKE CITY	
City or other location, and state or county	
STELLA STENCER	
Printed Name	

KELLY PALUSO	
(ELLY PALUSO (Jan 13, 2025 11:16 MST)	
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.)

CI

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.	Kira Coelho	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	
	Covered Person's County	Address/Volunteer's Address	

B. Door Dash

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

Food Driver and Delivery

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

Headquartered in San Francisco, 303 2nd Street, United States

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

Employee of Door Dash that picks up food order and delivers.

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

Signed on the 16	day of January	2025
Date	day of Month	'Year'

177 W Price Ave South Salt Lake, UT 84115

City or other location, and state or county

Kira Coelho

Printed Name Kale 2025 18:36 MST)

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*.)

Kone Tevaga	Youth Services	385-468-4500	
Covered Person Position, or County Division for wh	ich you are employed or volunteering	County/Volunteer's Phone	
177 W Price Ave South Salt Lake, UT 841	15		
Covered Person's County Address/Volunteer's Address			
B. <u>'HUNTS MAN Mental</u> Outside institution, entity, private business or person in which	Health Institute	2	
Outside institution, entity, private business or person in which is required in the above section	the Covered Person has a personal or busi	ness interest for which disclosure	
Huntsman Mental Health Institute / PSU			
Covered person's status, relationship or commitment to the in-		above	
501 Chipeta Way S			
Address and phone number of the institution, entity, business	or person named above		
2. Select the category that applies to yourself and the outside in	stitution, entity, business or person identifi	ied in subsection (B) above:	
I receive or have agreed to receive compensation for assi	sting a person or business entity in a transa	ction involving Salt Lake County.	
I am an officer, director, agent, employee or the owner of	of a substantial interest in a business entity	that is subject to the regulation of Sa	
Lake County. I am an officer, director, agent, employee or owner of a s	ubstantial interact in a business entity that	does or anticipates doing business wi	
Salt Lake County.	distantial interest in a business entity that	does of anticipates doing business wi	
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 actua	il conflict with my public duties.		
None of the above categories apply.			
 Give a detailed description of the actual or potential conflicts entity or person with the County. Use more sheets if necessa is completed.) 			
N/A psychiatric tech For	patients.	14	
(dealars under ariminal papality under the law of Litch that the fa	maning is true and somest		
declare under criminal penalty under the law of Utah that the for	egoing is true and correct.		
Signed on the $\frac{11}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$,			

at _______City or other location, and state or county

Kone Tevaga

Salt Lake City

Printed Name

Kone Tevaga	
one Tevaga (Jan 11, 2025 23:16 MST)	
Cimentano	

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*.)

. .

....

Margaret Despain	Youth Services	385-468-4500
Covered Person Position, or County Division for wh	ich you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake, UT 841	15	
Covered Person's County Address/Volunteer's Address		
Magna United Coalition		
Outside institution, entity, private business or person in which is required in the above section	the Covered Person has a personal or busi	ness interest for which disclosure
Member		
Covered person's status, relationship or commitment to the ins N/A <u>NHPS: //MAGNAUMFed CH</u> Address and phone number of the institution, entity, business of		above 952 W Main Magna, M
Select the category that applies to yourself and the outside ins		
I receive or have agreed to receive compensation for assis		
 I am an officer, director, agent, employee or the owner of Lake County. I am an officer, director, agent, employee or owner of a s Salt Lake County. I hold an investment or other financial interest that creater I hold a personal interest that creates a potential or actual None of the above categories apply. 	ubstantial interest in a business entity that es a potential or actual conflict with my pu	does or anticipates doing business
Give a detailed description of the actual or potential conflicts entity or person with the County. Use more sheets if necessa <i>is completed.</i>) Member of Magna United Coalition.		
eclare under criminal penalty under the law of Utah that the for	egoing is true and correct.	
gned on the $\frac{13}{12}$ day of $\frac{13}{12}$, $\frac{2025}{12}$, $\frac{13}{12}$		
Date day of <u>Year</u> ,		

Maggie DeSpain

Magna, UT

Printed Name 09-42 MST Marg

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. Margaret Despair	Youth Services	385-468-4500
Covered Person Position, or County Divisi	on for which you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake, L		
Covered Person's County Address/Volunteer's Addr	ess	
B. Salt Lake Afterschool Regional Net	work	
Outside institution, entity, private business or person is required in the above section	in which the Covered Person has a personal or bus	iness interest for which disclosure
Member		
	200, SLL, UT 84102	above
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	on for assisting a person or business entity in a transa	ction involving Salt Lake County.
Lake County. I am an officer, director, agent, employee or ov Salt Lake County. I hold an investment or other financial interest	e owner of a substantial interest in a business entity vner of a substantial interest in a business entity that that creates a potential or actual conflict with my p	does or anticipates doing business with
I hold a personal interest that creates a potentia	al or actual conflict with my public duties.	
None of the above categories apply.		
D. Give a detailed description of the actual or potential entity or person with the County. Use more sheets <i>is completed.</i>)	conflicts of interest identified above, i.e., the nature if necessary. (<i>This disclosure statement will not be</i>	
Member of the salt lake afterschool regional n	etwork.	
I declare under criminal penalty under the law of Utah t	hat the foregoing is true and correct	
	hat the folegoing is the and context.	
Signed on the $\frac{13}{Date}$ day of $\frac{January}{Month}$, $\frac{2025}{Year}$	_,	
Magna, UT at		
City or other location, and state or county		

Maggie DeSpain

Printed Name	
Well Di	
Margaret DeSpain (Jan 13, 2025 09:43 MST)	
01	

Signature

CI

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.	Marita Vi	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	
	Covered Person's County	Address/Volunteer's Address	

B. AFSCME

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

Steward

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

2261 S Redwood Rd. West Valley, Utah 84119 8017264613

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 a steward for the AFSCME Union. I speak with other union members out side of my work hours. I document conversations and move them forward to the VIce President of the Union if help can be given.

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

Signed on the 13	day of January	2025
Date	day of Month	, Year,

Salt Lake City, Utah

City or other location, and state or county

Marita Vi

Printed Name

<u>Marita Vi</u> Marita Vi (Jan 13, 2025 22:55 MST)

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*.)

Mary Smith		Youth Services	385-468-4500
Covered Person	Position, or County Division for which y	ou are employed or volunteering	County/Volunteer's Phone
177 W Price Av	e South Salt Lake, UT 84115		
Covered Person's Cour	ty Address/Volunteer's Address		
_{3.} Central 9th You	th Coalition		
	ty, private business or person in which the esction	Covered Person has a personal or bu	siness interest for which disclosure
Board Member			
Covered person's statu	s, relationship or commitment to the institut	ion, entity, business or person name	labove
208 West Harve	ey Milk Blvd, Salt Lake City, U	T 84101	
Address and phone nur	ber of the institution, entity, business or pe	erson named above	
C. Select the category the	at applies to yourself and the outside institut	tion, entity, business or person identi	fied in subsection (B) above:
I receive or have	agreed to receive compensation for assisting	a person or business entity in a trans	action involving Salt Lake County.
I am an officer, d Lake County.	irector, agent, employee or the owner of a se	ubstantial interest in a business entity	v that is subject to the regulation of Sal
I am an officer, d	rector, agent, employee or owner of a substa	antial interest in a business entity tha	t does or anticipates doing business wi
Salt Lake County		potential or actual conflict with my r	mblic duties
	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 abov	e categories apply.		
	otion of the actual or potential conflicts of in the County. Use more sheets if necessary. (
	delivery and program oversight, compe nsiderations in advocacy.	ating priorities and time commitme	ents, relationship between the
	· · · · · · · · ·		
I declare under criminal pe	nalty under the law of Utah that the foregoin	ng is true and correct.	
-		0	
Signed on the 10 d	ay of, 2025		

at _____

City or other location, and state or county

Mary Smith

Printed Name

Mary 3	Smah
--------	------

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 refiled every January, as long as the potential conflict exists.

(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.	Mary Smith	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	

Covered Person's County Address/Volunteer's Address

B. Magna United Youth Coalition

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

Youth Council Advisor

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

8952 W Magna Main St, Magna, UT 84044

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.*)

Dual role of service delivery and program oversight, competing priorities and time commitments, relationship between the two entities, considerations in advocacy

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

Signed on the ¹⁰	day of January	2025
Signed on the		_ ,,
Date	Month	Year

Salt Lake City, Utah

City or other location, and state or county

Mary Smith

Printed Name

Mary Smith

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.	Mary Smith	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	

Covered Person's County Address/Volunteer's Address

B. The Point Church

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

Youth and Young Adult Director

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

5133 Heath Ave, Salt Lake City, UT 84118

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.*)

Potential conflicting missions and priorities as well as influence on program development and partnerships. Establish clear boundaries between my work at SLCYS and my role at the church. Ensure that I'm acting in a professional, secular capacity when working for the county and avoid mixing religious activities with my work responsibilities.

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

Signed on the ¹⁰	day of January	2025
	uay or	
Date	Month	Year

Salt Lake City, Utah

City or other location, and state or county

Mary Smith

Printed Name

Mary Smäh

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.)

c 11

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.	Matai Ioane		Youth Services	385-468-4500	
	Covered Person	Position, or County Division for which you ar	e employed or volunteering	County/Volunteer's Phone	
	177 W Price Ave	South Salt Lake, UT 84115			
	Covered Person's County	Address/Volunteer's Address			
B.	NOVVA				
	Outside institution, entity is required in the above s	, private business or person in which the Cover ection	ed Person has a personal or busin	ness interest for which disclosure	
	Employee				
	Covered person's status,	Covered person's status, relationship or commitment to the institution, entity, business or person named above			
	6477 Wells Park	Rd, West Jordan, Utah 888	-668-8232		
	Address and phone numb	er of the institution, entity, business or person	named above		
C.	Select the category that	applies to yourself and the outside institution, e	ntity, business or person identifie	ed in subsection (B) above:	
	I receive or have ag	reed to receive compensation for assisting a per	son or business entity in a transac	tion involving Salt Lake County.	
	I am an officer, dire Lake County.	ector, agent, employee or the owner of a substan	ntial interest in a business entity t	hat is subject to the regulation of Salt	
	I am an officer, dire Salt Lake County.	ector, agent, employee or owner of a substantial	interest in a business entity that d	oes or anticipates doing business with	
		nt or other financial interest that creates a poten terest that creates a potential or actual conflict		blic duties.	
	X None of the above	categories apply.			

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

No relationship between the two companies, totally different kind of business.

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

Signed on the 12	day of January	2025
Date	Month	Year,

South Salt Lake, Utah, Salt Lake County

City or other location, and state or county

Matai Ioane

at

Printed Name	
--------------	--

1.			
Matai loane	(Jan 12,	2025 00:17	MST)

Signature

A

(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*.)

Rolando Reboiro	Youth Services	385-468-4500
Covered Person Position, or County Division fo	or which you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake, UT &	34115	
Covered Person's County Address/Volunteer's Address		
Giv.Care Inc.		
Outside institution, entity, private business or person in w is required in the above section	hich the Covered Person has a personal or busi	ness interest for which disclosure
Employee		
Covered person's status, relationship or commitment to the		above
7659 S. Main Street Midvale, UT 8404	7 323-448-2273	
Address and phone number of the institution, entity, busin	ness or person named above	
Select the category that applies to yourself and the outsic	de 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 transa	ction involving Salt Lake County.
I am an officer, director, agent, employee or the own Lake County.	ner of a substantial interest in a business entity	that is subject to the regulation of Sa
I am an officer, director, agent, employee or owner of	of a substantial interest in a business entity that	does or anticipates doing business w
Salt Lake County.		11: 1.4:
I hold an investment or other financial interest that of I hold a personal interest that creates a potential or a		ione duties.
X None of the above categories apply.		
Give a detailed description of the actual or potential confi entity or person with the County. Use more sheets if nec is completed.)	licts of interest identified above, i.e., the nature cessary. (<i>This disclosure statement will not be a</i>	of the relationship of each business accepted as valid unless this section
I am a caregiver to my daughter through DSPD. I g	get paid through Giv.Care.	
leclare under criminal penalty under the law of Utah that the	e foregoing is true and correct.	
$\frac{1}{2}$ $\frac{1}$		
med on the day of		

Signed on the $\frac{22}{Date}$ day of $\frac{January}{Month}$, $\frac{2025}{Year}$,

at _____ Salt Lake City, UT

City or other location, and state or county

Rolando Reboiro

Printed Name	
Boland Celoria	
Rolando Reboiro (Jan 2	2, 2025 11:09 MST)

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.	Saul Hernandez		Youth Services	385-468-4500
11.	Covered Person	Position, or County Division for which yo	u are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115		
	Covered Person's County	Address/Volunteer's Address		
B.	David Gourley El	lementary		
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclos is required in the above section				ss interest for which disclosure
	Parent Liaison			
	Covered person's status,	relationship or commitment to the institutio	n, entity, business or person named ab	ove
	4905 S 4300 W I	Kearns, UT 84118		
	Address and phone numb	per of the institution, entity, business or pers	on named above	
C.	Select the category that	applies to yourself and the outside institutio	n, entity, business or person identified	l in subsection (B) above:
	I receive or have ag	greed to receive compensation for assisting a	person or business entity in a transacti	on 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 reg				at is subject to the regulation of Salt
	I am an officer, dire Salt Lake County.	ector, agent, employee or owner of a substan	tial interest in a business entity that do	es or anticipates doing business with
		nt or other financial interest that creates a po	tential or actual conflict with my publ	ic duties.

I hold a personal interest that creates a potential or actual conflict with my public duties.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

Work in a school where potential clients that have been in Youth Services have been seen. Work with registration, enrollment, and delegating resources to the community.

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

Signed on the 14	day of	2025
Date	Month	Year
Salt Lake City		

City or other location, and state or county

Saul Hernandez

Printed Name	
Saul Hernandez	
Juni Termannel	
Saul Hernandez (Jan 14, 2025 01:33 MST)	

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.	Shannon Elite	Youth Services	385-468-4500
11.	Covered Person Position, or County Division for which yo	ou are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave South Salt Lake, UT 84115		
	Covered Person's County Address/Volunteer's Address		
B.	Elite Consulting and Counseling PLLC		
	Outside institution, entity, private business or person in which the C is required in the above section	overed Person has a personal or busir	less interest for which disclosure
	Therapist, Consult Advisor		
	Covered person's status, relationship or commitment to the institution	on, entity, business or person named a	lbove
	915 S Dietsel Rd, SLC UT 84105		
	Address and phone number of the institution, entity, business or per	son named above	
C.	Select the category that applies to yourself and the outside instituti	on, entity, business or person identifie	ed in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a	a person or business entity in a transac	tion involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a su Lake County.	bstantial interest in a business entity t	hat is subject to the regulation of Salt
	I am an officer, director, agent, employee or owner of a substa	ntial interest in a business entity that c	loes or anticipates doing business with
	Salt Lake County. I hold an investment or other financial interest that creates a p	otential or actual conflict with my pu	blic duties.
	I hold a personal interest that creates a potential or actual cont		
	None of the above categories apply.		
D.	Give a detailed description of the actual or potential conflicts of int entity or person with the County. Use more sheets if necessary. (<i>i is completed.</i>)		
	Divorce and custody counseling and consulting with attorne services for divorce cases.	ys related to juvenile court and div	vorce issues. Mediation
I	declare under criminal penalty under the law of Utah that the foregoir	ng is true and correct.	9
	13 January 2025	1.24	
S	igned on the $\frac{10}{\text{Date}}$ day of $\frac{10}{\text{Month}}$, $\frac{1020}{\text{Year}}$,		

Millcreek

City or other location, and state or county

Shannon Elite

Printed	Name	
C/	S	-1:1-

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 Sharami Martinez	Youth Services	385-468-4500
Covered Person Position,	or County Division for which you are employed or volunt	eering County/Volunteer's Phone
177 W Price Ave South	Salt Lake, UT 84115	
Covered Person's County Address/	Volunteer's Address	
B. The Phoenix Recovery	Center	
Outside institution, entity, private b is required in the above section	usiness or person in which the Covered Person has a perso	nal or business interest for which disclosure
Employee		
Covered person's status, relationsh	p or commitment to the institution, entity, business or pers	son named above
489 South Jordan Park	vay 400 South Jordan Utah 84095 801-4	438-3185
Address and phone number of the i	astitution, entity, business or person named above	
C. Select the category that applies to	yourself and the outside institution, entity, business or pers	son identified in subsection (B) above:
I receive or have agreed to rec	eive compensation for assisting a person or business entity	in a transaction involving Salt Lake County.
Lake County. I am an officer, director, agen Salt Lake County. I hold an investment or other	t, employee or the owner of a substantial interest in a busin t, employee or owner of a substantial interest in a business financial interest that creates a potential or actual conflict creates a potential or actual conflict with my public duties.	entity that does or anticipates doing business wit with my public duties.
None of the above categories	apply.	
entity or person with the County. <i>is completed.</i>)	ctual or potential conflicts of interest identified above, i.e., Use more sheets if necessary. (<i>This disclosure statement w</i>	vill not be accepted as valid unless this section
Residential recovery assist. W those who struggle with menta	e provide floor support for those struggling with addic l illness.	tion to either alcohol or drugs, and
I declare under criminal penalty under	the law of Utah that the foregoing is true and correct.	
Signed on the 16 day of	ry 2025	
Date Month	, Year,	

Salt Lake City, Utah Salt Lake County

City or other location, and state or county

Sharami Martinez

Printed Name

	Shar	ami N	larti	nez.	
Sharami Martinez (Jan 16, 2025 15:11 MST)					

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.	Tyra Armstrong	Youth Services	385-468-4500
	Covered Person Position, or County Division for which yo	ou are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave South Salt Lake, UT 84115		
	Covered Person's County Address/Volunteer's Address		
B.	my kearns Coalition		
	Outside institution, entity, private business or person in which the C is required in the above section	overed Person has a personal or busine	ess interest for which disclosure
	Board member of MyKearns Coalition		
	Covered person's status, relationship or commitment to the institution		oove
	No physical address 385 - Address and phone number of the institution, entity, business or personal statements of the institution of the instituti	226-1808	
	Address and phone number of the institution, entity, business or per-	son named above	
C.	Select the category that applies to yourself and the outside institution	on, entity, business or person identified	d in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a	person or business entity in a transact	ion involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a sul Lake County.	ostantial interest in a business entity th	at is subject to the regulation of Salt
	I am an officer, director, agent, employee or owner of a substan	ntial interest in a business entity that do	bes or anticipates doing business with
	Salt Lake County. I hold an investment or other financial interest that creates a p	otential or actual conflict with my pub	lic duties.
	I hold a personal interest that creates a potential or actual conf		
	X None of the above categories apply.		
D.	Give a detailed description of the actual or potential conflicts of interentity or person with the County. Use more sheets if necessary. (<i>T is completed.</i>)		
	I am employed by the Salt Lake County Division of Youth Se Family Resource Coordinator. In this role, I collaborate with resource initiatives and enrichment events. Furthermore, I a	Kearns Junior High School to enha	ance the school's family
L	Leclare under criminal penalty under the law of Utah that the foregoin	a is true and correct	
		g is true and correct.	
Si	gned on the $\frac{10}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$,		

Salt Lake City, Utah

City or other location, and state or county

Tyra Armstrong

Printed Name

Tyra Armstrong

Signature

at

(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.	Alethia Holmes	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	
	0 10 10		

Covered Person's County Address/Volunteer's Address

B. Chrysalis

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

Residential Direct Support Professional

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

448 E Winchester St #200, Murray, UT 84107 (801)280-0413

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

No conflicts with county job, I just hold a second occupation.

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

Signed on the 15	day of January	2025
Da		Year,

Salt Lake City, UT

City or other location, and state or county

Alethia Holmes

Printed Name <u>Alethia Holmes</u> Alethia Holmes (Jan 15, 2025 14:18 MST)

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 Alexus Averett	youth services	3852266154
	ounty Division for which you are employed or volunteering	County/Volunteer's Phone
177 W Price	AVE. SLC, UT 84115	
Covered Person's County Address/Volum		
B. Mavenk Cente)(
is required in the above section	ss or person in which the Covered Person has a personal or	business interest for which disclosure
Maverik Center, guest servi		
	commitment to the institution, entity, business or person nar	med above
3200 Decker Lake Dr, West	Valley, UT 84119 801-988-8800	
Address and phone number of the institut	ion, entity, business or person named above	
C. Select the category that applies to yours	elf and the outside institution, entity, business or person ide	entified in subsection (B) above:
I receive or have agreed to receive of	compensation for assisting a person or business entity in a tra	ansaction involving Salt Lake County.
	ployee or the owner of a substantial interest in a business er	ntity that is subject to the regulation of Salt
Lake County.	ployee or owner of a substantial interest in a business entity	that does or anticipates doing husiness with
Salt Lake County.	hoyee of owner of a substantial interest in a business entry	that does of anticipates doing business with
	cial interest that creates a potential or actual conflict with m	y public duties.
	es a potential or actual conflict with my public duties.	
X None of the above categories apply		
	or potential conflicts of interest identified above, i.e., the na nore sheets if necessary. (<i>This disclosure statement will not</i>	
	job. I may just have to leave early once or twice. I ma	inly work this job on the weekends
from 5- whenever the event ends.		
I declare under criminal penalty under the la	w of Utah that the foregoing is true and correct.	
Signed on the 13 day of January	2025	
Date Month	, Year,	
West Valley		

at _______City or other location, and state or county

Alexus Averett

Printed Name	
alesi	
Alexus Averet: (Jun 13, 2025 19:59 MST)	
Alexus Averett (Jan 13, 2025 19:59 MST)	

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.	Alston Long	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	

Covered Person's County Address/Volunteer's Address

B FIRST Lego League

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

Volunteer

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

200 Bedford street manchester newhampshire

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

Volenteering to reset lego league tables

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

Signed on the 09	day of	2025
Date	Month	Year,
Magna		
10 10 10 10 10 10 10 10 10 10 10 10 10 1	on, and state or count	у
Alston Long		
Printed Name		
OCIN .	-	

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 periury, make the following statement regarding my personal or business interest. (Type or print all information)

Amelia Castro Gutierrez	Youth Services	385-468-4500
Covered Person Position, or County Div	vision for which you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake,	, UT 84115	
Covered Person's County Address/Volunteer's Ad	ldress	
Tradition Assisted Living		
Outside institution, entity, private business or pers is required in the above section	son in which the Covered Person has a personal or bus	iness interest for which disclosure
CNA/Med Tech		
Covered person's status, relationship or commitme	ent to the institution, entity, business or person named	above
2938 S Redwood Rd, West Valley	/ City, UT 84119, 801-978-2424	
Address and phone number of the institution, entit	ty, business or person named above	
Select the category that applies to yourself and the	ne outside institution, entity, business or person identif	ied in subsection (B) above:
I receive or have agreed to receive compensa	tion for assisting a person or business entity in a transa	ction involving Salt Lake County.
Lake County.	the owner of a substantial interest in a business entity	
Salt Lake County.	owner of a substantial interest in a business entity that	does or anticipates doing business
	est that creates a potential or actual conflict with my putial or actual conflict with my public duties.	ublic duties.
X None of the above categories apply.		
Give a detailed description of the actual or potenti entity or person with the County. Use more shee <i>is completed.</i>)	ial conflicts of interest identified above, i.e., the nature tts if necessary. (<i>This disclosure statement will not be</i>	of the relationship of each busines accepted as valid unless this section
CNA at Tradition Assisted Living		

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

Signed on the 16	day of	2025
Date	Month	Year
Magna, Utah		
City or other loca	tion, and state or count	v

Amelia Castro Gutierrez

Printed Name

Ameli	ia Ca.	stro	Gutic	errez	
Amelia Castro	Gutierrez	(Jan 16,	2025 14:44	MST)	

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.	Amy Staley	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave		

Covered Person's County Address/Volunteer's Address

B. Granite School District

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

Teacher

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

2500 South State SLC, UT 84115 385- 646-5000

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

Teacher at Copper Hills Elementary

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

Si	gned on the 16 Date	day of <u>January</u> Month	$,\frac{2025}{\text{Year}},$
at	Magna, UT		
aı	City or other location	n, and state or county	

Amy Staley

Printed Name

Amy Staley	
Amy Starey (Jan 16, 2075 15:09 MST)	
Signature	

Signature

	DISCLOSURE OF	FPERSONAL	OR FINANCIAL	INTEREST
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(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. Autumn Batta Youth Services 385-468-4500 Position, or County Division for which you are employed or volunteering Covered Person County/Volunteer's Phone 177 W Price Ave SLC, UT 84115

Covered Person's County Address/Volunteer's Address

Costco wholesale R

> 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

Stocker/merchant

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

Bangerter Highway, 11400 south

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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 declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Signed on the Jan 13, 2025 day of January 2025 Date Year Month

City or other location, and state or county

Autumn Batta

No conflicts

Printed Name

(Ab 25 17:00 MS 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.	Candace Collins	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	

Covered Person's County Address/Volunteer's Address

B. Copper Hills Elementary

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

Teacher

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

7635 West 3715 South Magna, Utah 84044

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

Teacher at Copper Hills Elementary

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

Signed on the 14	day of January	2025
Date		······································

Magna, Utah 84044

City or other location, and state or county

Candace Collins

Printed Name

Candace Collin

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.	Carly Slaugh	Youth Services	385-468-4500
	Covered Person Position, or County Div	vision for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave South Salt Lake	, UT 84115	
	Covered Person's County Address/Volunteer's Ad	ddress	
B.	St. Marks Hospital		
	Outside institution, entity, private business or pers is required in the above section	son in which the Covered Person has a personal or busi	ness interest for which disclosure
	Patient Safety Attendant		
	Covered person's status, relationship or commitme	ent to the institution, entity, business or person named	above
	1200 E 3900 S Millcreek UT 8412	24 United States, +1 (801) 509-8403	
	Address and phone number of the institution, entit	ty, business or person named above	
C.	Select the category that applies to yourself and the	he outside institution, entity, business or person identifi	ed in subsection (B) above:
	I receive or have agreed to receive compensation	ation for assisting a person or business entity in a transac	ction involving Salt Lake County.
	I am an officer, director, agent, employee or Lake County.	the owner of a substantial interest in a business entity	that is subject to the regulation of Salt
		owner of a substantial interest in a business entity that a	does or anticipates doing business with
	I hold an investment or other financial interest	est that creates a potential or actual conflict with my pu	blic duties.
		ntial or actual conflict with my public duties.	
	X None of the above categories apply.		
D.		ial conflicts of interest identified above, i.e., the nature ets if necessary. (<i>This disclosure statement will not be a</i>	
	Patient safety attendant at St Marks Hospita	al	
I d	leclare under criminal penalty under the law of Utal	h that the foregoing is true and correct.	

Signed on the 17 day of January 7025, Year, at Magna City or other location, and state or county Carly Slaugh Printed Name

17, 2025 12:02 MST Carly S 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 refiled every January, as long as the potential conflict exists.

CH

(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.	Cassie Fish	Youth Services	385-468-4500
	Covered Person Position, or County Division for which y	ou are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave South Salt Lake, UT 84115		
	Covered Person's County Address/Volunteer's Address		
B.	granite school District		
	Outside institution, entity, private business or person in which the O is required in the above section	Covered Person has a personal or busin	ness interest for which disclosure
	Teacher for Granite School District		
	Covered person's status, relationship or commitment to the institut	ion, entity, business or person named a	ibove
	2500 S State Street Salt Lak City, UT		
	Address and phone number of the institution, entity, business or pe	rson named above	
C.	Select the category that applies to yourself and the outside institut	ion, entity, business or person identifie	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.
	I am an officer, director, agent, employee or the owner of a su Lake County.	ubstantial interest in a business entity t	hat is subject to the regulation of Salt
	I am an officer, director, agent, employee or owner of a substa	antial interest in a business entity that c	loes 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 pu	blic duties.
	I hold a personal interest that creates a potential or actual con		
	X None of the above categories apply.		
D.	Give a detailed description of the actual or potential conflicts of in entity or person with the County. Use more sheets if necessary. (<i>is completed.</i>)		
	I teach in the Salt Lake County After School Program while	also working full time as a teacher	for Granite School District.
Ιċ	leclare under criminal penalty under the law of Utah that the foregoin	ng is true and correct.	
Si	gned on the $\frac{13}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$,		

Magna _____

City or other location, and state or county

Cassie Fish

Printed Name

Cassie Fish	
Cassie Fish (Jan 13, 2025 08:04 MST)	

Signature

CI

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.	Catherine Jarvis	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave South Salt Lake, UT 84115		

Covered Person's County Address/Volunteer's Address

B Jordan school district

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

Employed as a teacher

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

7387 S. Campus View Drive | West Jordan, UT 84084 | 801-567-8100

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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 do not think I have any conflicts of interest. I work as a teacher for Jordan school district and just pick up shifts as a EH for youth services as I am able to.

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

Signed on the $\frac{16}{Date}$	_ day of February Month	_ ,2025 _ , <u>Year</u> ,
UT at		
	on, and state or county	1
Catherine Jarvis		
Printed Name		

Catherine Jarvis (Jan 16, 2025 22:07 MST
--

(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 Cynthia Fowler	Youth Services	385-468-4500
Covered Person Position, or County Division f	or which you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake, UT	84115	
Covered Person's County Address/Volunteer's Address		
granite school Dist	nict	
Outside institution, entity, private business or person in v is required in the above section	which the Covered Person has a personal or busi	ness interest for which disclosure
Para educator		
Covered person's status, relationship or commitment to t	he institution, entity, business or person named	above
2500 South State Street, Salt Lake Cit	y, Utah 385-646-5000	
Address and phone number of the institution, entity, busi	ness or person named above	
C. Select the category that applies to yourself and the outsi	ide institution, entity, business or person identif	ied in subsection (B) above:
I receive or have agreed to receive compensation fo	r assisting a person or business entity in a transa	ction involving Salt Lake County.
I am an officer, director, agent, employee or the ow Lake County.	vner of a substantial interest in 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 business entity that	does or anticipates doing business wit
Salt Lake County.	creates a potential or actual conflict with my pu	iblic duties.
I hold a personal interest that creates a potential or		
None of the above categories apply.		
D. Give a detailed description of the actual or potential con entity or person with the County. Use more sheets if ne		
<i>is completed.)</i> I work as a para educator at Pleasant Green Elem	nentary in Magna, Utah.	
alah umbuk 1996, kesi basara penangkanan tina di Menangkanan ing kesi dalah penangkanan.		
I declare under criminal penalty under the law of Utah that the	he foregoing is true and correct.	
14	5 5	
Signed on the $\frac{14}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{25}{\text{Year}}$,		
West Valley City, Utah		
City or other location, and state or county	_	

Cynthia Fowler

Printed Name OGul Cynthia Felvler (J 2025 07:13 MST)

Signature

C /1

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.	Elisapeta So'oalo	0	Youth Services	385-267-3188
	Covered Person	Position, or County Division for which	Position, or County Division for which you are employed or volunteering	
	4740 W Eskesen Dr, UT 84120			
	Covered Person's County Address/Volunteer's Address			

B. Granite School District

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

Teacher

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

Pleasant Green Elementary 8201 W 2700 S, Magna, UT 84044 385-646-4972

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.*)

Full-time employee of Granite School District. Part-time ASP employee for Salt Lake County

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

Signed on the 01	_ day of	2025
Date	Month	Year
Magna, UT at		
	on, and state or count	у
Elisapeta So'oalo		
Printed Name		
Elisapeta So'oalo	r	
Elisapeta So ⁶ oalo (Jan 9, 2025 17:49	MST)	

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.)

e ll

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*.)

Elysia A	\dams		Youth Services	385-468-4500	
Covered Per	rson	Position, or County Division	for which you are employed or volunteering	County/Volunteer's Phone	
177 W I	Price Ave	e South Salt Lake, UT	84115		
Covered Pe	rson's Count	ty Address/Volunteer's Address			
Utah St	ate Univ	ersity			
	titution, entit in the above		which the Covered Person has a personal or busir	less interest for which disclosure	
Prevent	tion Instr	uctor			
Covered per	rson's status	, relationship or commitment to	the institution, entity, business or person named a	ibove	
2001 So	outh Stat	te Street Salt Lake, U⊺	Т 84190		
Address and	d phone num	ber of the institution, entity, bus	siness or person named above		
. Select the	category tha	t applies to yourself and the outs	side institution, entity, business or person identific	ed in subsection (B) above:	
I rece	ive or have a	greed to receive compensation for	or assisting a person or business entity in a transac	tion involving Salt Lake County.	
Lake	County.		wner of a substantial interest in a business entity t		
I am a	n officer, di ake County.	rector, agent, employee or owner	r of a substantial interest in a business entity that d	loes or anticipates doing business wi	
20000000000000000000000000000000000000			t creates a potential or actual conflict with my pu	blic duties.	
I hold	l a personal i	interest that creates a potential or	r actual conflict with my public duties.		
🗙 None	of the above	e categories apply.			
entity or p	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 teach th preventic	ne students on program	that participate in Pleasant G that is funded through USU o	Green's Afterschool Program through Utah Sta called Too Good For Drugs.	ate University. I teach them a	
ـــــــــــــــــــــــــــــــــــــ					
	-		the foregoing is true and correct.		
signed on the	09 Date da	$y \text{ of } \frac{\text{January}}{\text{Month}}, \frac{2025}{\text{Year}},$			
1	Jais	ivionin i car			

at __________City or other location, and state or county

Elysia Adams

Magna, UT

Printed Name

Elysia Adams

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 refiled every January, as long as the potential conflict exists.

(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.)

CH

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.	Erin Killpack		Youth Services	385-468-4500				
	Covered Person	Position, or County Division for w	hich you are employed or volunteering	County/Volunteer's Phone				
	Covered Person's Count							
B.	Granite School I	District						
	Outside institution, entit is required in the above		h the Covered Person has a personal or busir	ness interest for which disclosure				
	Teacher							
Covered person's status, relationship or commitment to the institution, entity, business or person named above								
2500 S State St Salt Lake City, UT 84115 (385) 646-5000								
	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 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 Cou								
	I am an officer, di Lake County.	that is subject to the regulation of Salt						
	I am an officer, di		substantial interest in a business entity that c	loes or anticipates doing business with				
	Salt Lake County.		ates a potential or actual conflict with my pu	blic duties				
		interest that creates a potential or actu		one duties.				
	None of the above	e categories apply.						
D.			s of interest identified above, i.e., the nature ary. (<i>This disclosure statement will not be a</i>					
I work for Granite School District as a teacher.								
Ιc		nalty under the law of Utah that the fo	pregoing is true and correct.					
Si	gned on the $\frac{9}{Date}$ da	ay of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$,						

Magna, UT at_____

City or other location, and state or county

Erin Killpack

Printed Name

Signature

C //

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*.)

Jaimie Haydock	Youth Services	385-468-4500
Covered Person Position, or County Division for which ye	ou are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake, UT 84115		
Covered Person's County Address/Volunteer's Address		
Granite School District Copper Hills Elementa	ary	
Outside institution, entity, private business or person in which the C is required in the above section	overed Person has a personal or busi	ness interest for which disclosure
Teacher		
Covered person's status, relationship or commitment to the institution	on, entity, business or person named	above
2500 south State Salt Lake City Utah 84115	385-646-4792	
Address and phone number of the institution, entity, business or per	son named above	
Select the category that applies to yourself and the outside instituti	on, entity, business or person identifi	ed in subsection (B) above:
I receive or have agreed to receive compensation for assisting a	a person or business entity in a transa	ction involving Salt Lake County.
I am an officer, director, agent, employee or the owner of a su Lake County.	bstantial interest in a business entity	that is subject to the regulation of Sa
I am an officer, director, agent, employee or owner of a substat	ntial interest in a business entity that	does or anticipates doing business w
I hold an investment or other financial interest that creates a p	otential or actual conflict with my pu	iblic duties.
I hold a personal interest that creates a potential or actual conf		
X None of the above categories apply.		
Give a detailed description of the actual or potential conflicts of interentity or person with the County. Use more sheets if necessary. (<i>T is completed.</i>)	erest identified above, i.e., the nature This disclosure statement will not be a	of the relationship of each business accepted as valid unless this section
I work as a literacy coach for at Copper Hills Elementary in	Magna UT.	
leclare under criminal penalty under the law of Utah that the foregoin	g is true and correct.	
gned on the 14 day of January , 25		

Magna Utah at _____

Month

Year

City or other location, and state or county

Jaimie Haydock

Printed Name

Jaimie Haydoc

Date

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.	Jaimie Haydock	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone

177 W Price Ave South Salt Lake, UT 84115

Covered Person's County Address/Volunteer's Address

B. Western Governors University

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

4001 S 700 E #300, Millcreek, UT 84107

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

Evaluator

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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 have been working for WGU for 15 years as an online evaluator for the teachers college.

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

Signed on the 14	day of January	25
Date	Month	'Year'

Magna, Utah 84044

City or other location, and state or county

Jaimie Haydock

Printed Name	
Jaimie Ha	adorle
Jamie Ia	JAUCH
laimie Havdock (Jan 14	2025 14:40 MST)

Signature

at

CN

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.	Jennianne	Mutautia Vaai	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you	u are employed or volunteering	County/Volunteer's Phone

177 W Price Ave South Salt Lake, UT 84115

. .

Covered Person's County Address/Volunteer's Address

10015

^B Pleasant Green Elementary

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

Teacher

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

8201 West 2700 South, Magna, UT 84044

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.

- X None of the above categories apply.
- D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

Signed on the $\frac{9}{Date}$	_ day of Month	, <mark>2025</mark> _, ,
Magna, UT		
at City or other location	n, and state or county	Y
Jennianne Matautia V	/aai	

Printed Name

N/A

Jennianne	Mar	aute	a Vaai	
mianne Matautia Vaai ((Jan 9, 2	2025 17:4	6 MST)	

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.	Jennifer Goble	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone

177 W Price Ave South Salt Lake, UT 84115

Covered Person's County Address/Volunteer's Address

B. Copper Hills Elementary School

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

Teacher

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

7635 W. 3715 S., Magna, UT

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

Teacher at Copper Hills Elementary

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

Signed on the $\frac{14}{Date}$	day of Month	, 2025 , Year,
Magna. Utah		
	tion, and state or count	y
Jennifer Goble		
Printed Name		

enniter Goble

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.	Jennifer Goble	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	
	Covered Person's County	Address/Walunteer's Address	

Covered Person's County Address/Volunteer's Address

_B PF Changs

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

Server

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

6277 S. State Street, Murray, UT

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.

X None of the above categories apply.

Server at PF Changs.

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 declare under criminal	penalty under the law	of Utah that the f	foregoing is true and o	correct.
--------------------------	-----------------------	--------------------	-------------------------	----------

Signed on the $\frac{14}{2}$	_ day of	, 2025
Date Magna. Utah at	Month	Year

City or other location, and state or county

Jennifer Goble

Printed N	ame
Jouni-	fer Goble
Denny	ler quoie
Jennifer Goble	(Jan 14, 2025 15:26 MST)

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.	Jesse Kemp	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	

Covered Person's County Address/Volunteer's Address

B. Youth Coalition

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

Coalition Member

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

3358 S Montclair Street, Magna, UT 84044

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

There are no conflicts with my County position and Youth Co. The coalition occurs every Tuesday each week. This does not effect my job.

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

Signed on the 16	day of January	2025
Date	Month	Year,
Magna, Utah 84044		

City or other location, and state or county

Jesse Kemp

Printed Name Jesse Kemp 025 16:52 MST)

Signature

CII

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*.)

Julie Robertson	Youth Services	801-599-3022
Covered Person Position, or County Division for wh	ich you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake, UT 841	15	
Covered Person's County Address/Volunteer's Address		
granite school District		
Outside institution, entity, private business or person in which is required in the above section		iness interest for which disclosure
Granite School District Literacy Co		
Covered person's status, relationship or commitment to the inst	•	above
2500 S State St, SL	L, UT	
Address and phone number of the institution, entity, business	or person named above	
Select the category that applies to yourself and the outside in	stitution, entity, business or person identif	ied in subsection (B) above:
I receive or have agreed to receive compensation for assi	sting a person or business entity in a transa	ction involving Salt Lake County.
I am an officer, director, agent, employee or the owner of Lake County.		
I am an officer, director, agent, employee or owner of a s Salt Lake County.	ubstantial interest in a business entity that	does or anticipates doing business wit
I hold an investment or other financial interest that creat	es a potential or actual conflict with my pu	ublic duties.
I hold a personal interest that creates a potential or actua	l conflict with my public duties.	
None of the above categories apply.		
 Give a detailed description of the actual or potential conflicts entity or person with the County. Use more sheets if necessa is completed.) 		
I am a teacher at Pleasant Green Elementray.		
declare under criminal penalty under the law of Utah that the for	egoing is true and correct.	
Signed on the 13 day of January 2025		
Signed on the $\frac{13}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2025}{\text{Year}}$,		

Magna

City or other location, and state or county

Julie Robertson

Printed Name	
Julie Robertson	
Julie Robertson (Jan 13, 2025 13:59 MST)	

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.	Karen Hunt	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	
	Covered Person's County	Address/Volunteer's Address	
B.	Copper Hills Elementary		
	Outside institution, entity is required in the above so	, private business or person in which the Covered Person has a personal or bus	iness interest for which disclosure

Teacher

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

7635 West Washington Road Magna, Utah 385-646-4792

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

Teacher at Copper Hills Elementary

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

Signed on the 14	day of January	2025
Date	Month	Year,
1000 - 1000 - 10		

Magna, Utah

City or other location, and state or county

Karen Hunt

Printed Name

Karen Hunt	
Karen Hunt (Jan 14, 2025 15:16 MST)	
Signature	

C11

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.	Kelly Price	Y	outh Services	385-468-4500
	Covered Person	Position, or County Division for which you are	employed or volunteering	County/Volunteer's Phone
	177 W Price Ave South Salt Lake, UT 84115			
	Covered Person's Count	y Address/Volunteer's Address		
B	Bikers Against C	hild Abuse		

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

Member

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

1-866-71-ABUSE (1-866-712-2873)

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

Bikers Against Child Abuse, Inc. (B.A.C.A.) creates a safer environment for abused children. We exist as a body of Bikers to empower children to not feel afraid of the world in which they live.

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

Signed on the 14	day of January	2025
Date	Month	Year
l ltala		

Utah at

City or other location, and state or county

Kelly Price

Printed Name	
Kelly Price	
Kelly Price (Jan 14, 2025 17:01 MST)	-

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.	Kelly Price	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	

Covered Person's County Address/Volunteer's Address

^B Pleasant Green Elementary

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

Fourth Grade Teacher

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

2500 South State Street South Salt Lake City, Ut. 84115, 385-646-5000

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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 have previously taught some of the students.

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

Signed on the	14	day of January	2025
	Date	day of Month	— ' Year '

Magna, Utah

City or other location, and state or county

Kelly Price

Printed Name

Kelly price Kelly price (Jan 14, 2025 16:56 MST)

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.	Kylee Gordon		Youth Services	385-468-4500	
	Covered Person	Position, or County Division for which yo	ou are employed or volunteering	County/Volunteer's Phone	
B.	177 W Price Ave	South Salt Lake, UT 84115			
	Covered Person's County	Address/Volunteer's Address			
	Granite school district				
	Outside institution, entity is required in the above s	, private business or person in which the C ection	overed Person has a personal or busin	ness interest for which disclosure	
	Teacher				
	Covered person's status, relationship or commitment to the institution, entity, business or person named above				
	2500 S State Street Salt Lake City, UT 84115				
	Address and phone numb	per of the institution, entity, business or per-	son 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 ag	reed to receive compensation for assisting a	person or business entity in a transac	tion involving Salt Lake County.	
	I am an officer, dire	ector, agent, employee or the owner of a su	ostantial interest in a business entity t	hat is subject to the regulation of Salt	
		ector, agent, employee or owner of a substan	ntial interest in a business entity that c	oes or anticipates doing business with	
		nt or other financial interest that creates a p aterest that creates a potential or actual conf		olic duties.	
	X None of the above	categories apply.			
D.	Give a detailed descripti	ion of the actual or potential conflicts of inte	erest 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 a first grade teacher with Granite School District.

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

Signed on the 13	day of	2025
Date	Month	Year,
Magna, UT at		

City or other location, and state or county

Kylee Gordon

ited Name	
Que	
Gorion (Jan 13, 2025 17:18 MST)	

Signature

CH

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.	Lisset Lopez	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave South Salt Lake, UT 84115		
	Covered Person's County	Address/Volunteer's Address	

Covered Terson's County Address/ volumeer's Ad

B Granite School District

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

School Counselor

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

3650 Montclair St, Magna, UT 84044

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.

- X None of the above categories apply.
- D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

There are no conflicts. This is a 2nd job that I hold.

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

Si	igned on the 16	_ day of	2025	
	Date	Month	'Year'	!
at	Magna, UT 84044			
au	City or other locatio	n, and state or county		

Lisset Lopez

Printed Name

set Lopez (Jan 16, 2025 17:17 MST

Signature

C (1

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.	Lynsie Nelson		Youth Services	385-468-4500		
	Covered Person	Position, or County Division for which	ch you are employed or volunteering	County/Volunteer's Phone		
	177 W Price Ave	South Salt Lake, UT 8411	5			
	Covered Person's County	y Address/Volunteer's Address				
B.	Salt Lake Regior	nal Afterschool Network				
	Outside institution, entity is required in the above s		he Covered Person has a personal or busi	ness interest for which disclosure		
	Participant					
	Covered person's status,	relationship or commitment to the inst	itution, entity, business or person named	above		
	855 W California	Ave, Salt Lake City, UT 84	4104			
	Address and phone numb	per of the institution, entity, business or	person named above			
C.	Select the category that	applies to yourself and the outside inst	itution, entity, business or person identif	ied in subsection (B) above:		
	I receive or have ag	reed to receive compensation for assist	ing a person or business entity in a transa	ction involving Salt Lake County.		
	I am an officer, dire Lake County.	ector, agent, employee or the owner of	a substantial interest in a business entity	that is subject to the regulation of Salt		
		ector, agent, employee or owner of a su	bstantial interest in a business entity that	does or anticipates doing business with		
	Salt Lake County.	nt an athan finan ial internat that marks		11: 1.4:		
		iterest that creates a potential or actual	s a potential or actual conflict with my pu conflict with my public duties.	iblic duties.		
D.			finterest identified above i.e. the nature	of the relationship of each business		
D.	entity or person with th	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.)					
	Participation in bi-mo	nthly networking meetings with Sal	t Lake Afterschool Regional Network	·		
Ιc	leclare under criminal pen	alty under the law of Utah that the fore	going is true and correct.			
Si	gned on the 17 day	$\sqrt{100} \frac{\text{January}}{\text{Month}}, \frac{2025}{\text{Year}},$				

at _____

City or other location, and state or county

Lynsie Nelson

Printed Name

unie Nelson (Jan 17, 2025 11:55 MST)

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.	Lynsie Nelson	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	
	0 10 10	1 1 1 / / / / / / / / / / / / / / / / /	

Covered Person's County Address/Volunteer's Address

B. Uber Eats

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

Freelance Delivery Driver

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

1455 Market St #400, San Francisco, CA 94103

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.*)

Occasional freelance driving for delivery.

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

Signed on the $\frac{17}{17}$	_ day of	, <u>2025</u> ,
Date	Month	Year,
Salt Lake City		
	on, and state or count	у
Lynsie Nelson		
Printed Name		
1 molecter		

Signature

Lynsie Nelson (Jan 17, 2025 11:42 MST)

(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.	Maria Mendez-Ceron	Youth Se	ervices	385-468-4500
	Covered Person Position, or County Division for wh	ich you are employed	or volunteering	County/Volunteer's Phone
	177 W Price Ave South Salt Lake, UT 841	15		
	Covered Person's County Address/Volunteer's Address		6 - Z	
B.	Horizonte Instruction and			
	Outside institution, entity, private business or person in which is required in the above section	the Covered Person h	as a personal or busine	ess interest for which disclosure
	Horizonte Instruction and Training Center,			
	Covered person's status, relationship or commitment to the ins	38 5 6565	ess or person named al	oove
	1234 South Main Street, Salt Lake City, U	tah 84101		
	Address and phone number of the institution, entity, business of	or person named abov	e	
C.	Select the category that applies to yourself and the outside ins	stitution, entity, busin	ess or person identified	d in subsection (B) above:
	I receive or have agreed to receive compensation for assis	sting a person or busir	less entity in a transact	ion involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of Lake County.	f a substantial interes	t in a business entity th	at is subject to the regulation of Salt
	I am an officer, director, agent, employee or owner of a s	ubstantial interest in a	business entity that do	bes or anticipates doing business with
	Salt Lake County. I hold an investment or other financial interest that create	es a potential or actua	l conflict with my pub	lic duties
	I hold a personal interest that creates a potential or actua			no dutto.
	None of the above categories apply.			
D.	Give a detailed description of the actual or potential conflicts entity or person with the County. Use more sheets if necessar is completed.)	of interest identified a ry. (<i>This disclosure s</i>	bove, i.e., the nature o tatement will not be ac	f the relationship of each business cepted as valid unless this section
	I am currently employed by the Salt Lake City School D and Training Center.	District. I work at the	alternative high sch	ool, Horizonte Instruction
I d	eclare under criminal penalty under the law of Utah that the for	egoing is true and cor	rect.	
	and on the $\frac{16}{Data}$ day of $\frac{January}{January}$, $\frac{2025}{Vare}$,			
51	Date day of <u>Year</u> ,			

at City or other location, and state or county

Maria Mendez Ceron

Salt Lake City

Printed Name	
anilyi	
Maria Mendez Ceron (Jan 16, 2025 22:46 MST)	

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. Mary Fasig	Youth Services	385-468-4500
	n for which you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake, U		
Covered Person's County Address/Volunteer's Addres	35	
B. Granger Elementary		
Outside institution, entity, private business or person in is required in the above section	n which the Covered Person has a personal or bus	iness interest for which disclosure
Granger Elementary (Princi Pal	Secretary	
Covered person's status, relationship or commitment to		above
3700 S 1950 W, West	- Valley City. UT	84119
Address and phone number of the institution, entity, but	usiness or person named above	
C. Select the category that applies to yourself and the ou	itside 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	action 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 own	er of a substantial interest in a business entity that	does or anticipates doing business wit
Salt Lake County.		n na serie de la construir de la constru
I hold an investment or other financial interest the I hold a personal interest that creates a potential	nat creates a potential or actual conflict with my p or actual conflict with my public duties	ublic duties.
None of the above categories apply.		
 D. Give a detailed description of the actual or potential co 	onflicts of interest identified above i.e. the nature	a of the relationship of each business
entity or person with the County. Use more sheets if		
<i>is completed.)</i> I work in an elementary school. Sometimes, stud	dents from my school are clients of Youth Se	rvices
I declare under criminal penalty under the law of Utah that	t the foregoing is true and correct	
Signed on the $\frac{15}{Date}$ day of $\frac{January}{Month}$, $\frac{25}{Year}$,		

at _____

City or other location, and state or county

Mary Fasig

Printed Name

	y Fas		
Mary Fasig	Jan 15, 20.	25 09:58 MST)	

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.)

C

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.	Melissa Howard	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	

Covered Person's County Address/Volunteer's Address

B. Copper Hills Elementary

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

Teacher

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

7635 West 3715 South Magna, UT

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.

- X None of the above categories apply.
- D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.*)

Teacher at Copper Hills Elementary

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

Si	gned on the 14 Date	_ day of Month	, 2025 , Year	,
at	Magna, UT			
	City or other location	on, and state or county		
Μ	elissa Howard			
Pr	inted Name			

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.	Natalie Dickey	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	5817 S Lakeside	Dr Murray, Ut 84121	С.

Covered Person's County Address/Volunteer's Address

Granite School District B.

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

Substitute teacher

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

2500 S State St South Salt Lake, Ut 85115

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.)

NA

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

Signed on the 19	day of January	2025
Date	Month	'Year'
Murray		

City or other location, and state or county

Natalie Dickey

Printed Name Signature

CW

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*.)

Shalea Tallis		Youth Services	385-468-4500
Covered Person	Position, or County Division for v	which you are employed or volunteering	County/Volunteer's Phone
177 W Price Av	ve South Salt Lake, UT 84	1115	
Covered Person's Cou	inty Address/Volunteer's Address		
Valley Behavio	ral Health		
	tity, private business or person in white e section	ch the Covered Person has a personal or busi	ness interest for which disclosure
Employee			
Covered person's statu	is, relationship or commitment to the	institution, entity, business or person named	above
3809 W 6200 S	S Kearns, UT 84118		
Address and phone nu	mber of the institution, entity, busines	ss or person named above	
Select the category th	nat 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 as	ssisting a person or business entity in a transa	ction involving Salt Lake County.
Lake County.	director, agent, employee or owner of a	r of a substantial interest in a business entity a substantial interest in a business entity that	
I hold an investr	nent or other financial interest that cre l interest that creates a potential or act	eates a potential or actual conflict with my pu ual conflict with my public duties.	ıblic duties.
X None of the abo	ve categories apply.		
		ts of interest identified above, i.e., the nature ssary. (<i>This disclosure statement will not be a</i>	
l am a case manag	ger for Valley Behavioral Health, pr	rogram EPIC.	
leclare under criminal p	enalty under the law of Utah that the f	foregoing is true and correct.	
•	day of January ,2025		
Date Date	Month 'Year'		

at _____

City or other location, and state or county

Shalea Tallis

Printed Name

Safler Shalea Tallis (Jan 16, 2025 00:25 MST) Signature

11

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.	Siu Ha Lee	Youth Services	385-468-4500
	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	South Salt Lake, UT 84115	
	Covered Person's County	v Address/Volunteer's Address	
B.	Copper Hills Eler	nentary	
	Outside institution, entity is required in the above se	, private business or person in which the Covered Person has a personal or bus	iness interest for which disclosure
	Teacher		
	Covered person's status,	relationship or commitment to the institution, entity, business or person named	l above
	7635 w 3715s M	agna Utah	
	Address and phone numb	er of the institution, entity, business or person named above	
C.	provide and a second	applies to yourself and the outside institution, entity, business or person identi reed to receive compensation for assisting a person or business entity in a trans	

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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.)

Teacher at Copper Hills Elementary

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

Signed on the 16	day of January	2025
	day of	,
Date	Month	Year

Magna, Utah at

City or other location, and state or county

Siu Ha Lee

Printed Name

~~ Siu Hallee (... 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.)

Tiffany Adams	Youth Services	385-468-4500
Covered Person Position, or County Division	n for which you are employed or volunteering	County/Volunteer's Phone
177 W Price Ave South Salt Lake, U	er Beg 31 AC WINESS	
Covered Person's County Address/Volunteer's Addres		
Pleasant green Ele		
Outside institution, entity, private business or person in is required in the above section	n which the Covered Person has a personal or busi	ness interest for which disclosure
employee SPED Dep	+.	
Covered person's status, relationship or commitment to	o the institution, entity, business or person named	above
2500 S State St Address and phone number of the institution, entity, bu	SLC, UT	
Address and phone number of the institution, entity, bu	usiness or person named above	
Select the category that applies to yourself and the ou	tside 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	ction involving Salt Lake County.
I am an officer, director, agent, employee or the a Lake County.	owner of a substantial interest in a business entity	that is subject to the regulation of
I am an officer, director, agent, employee or own	er of a substantial interest in a business entity that	does or anticipates doing business
Salt Lake County.	nat creates a potential or actual conflict with my pu	ublic duties
I hold a personal interest that creates a potential		ione duties.
None of the above categories apply.		
Give a detailed description of the actual or potential co entity or person with the County. Use more sheets if <i>is completed.</i>)		
I am a employee of Granite school district. I we However I do not work directly with any of the sa		day, In the SPED department.
However I do not work directly with any of the sa	ame students that attend ASP.	

day of January 25 Signed on the ¹⁰ Date Year Month

Magna, Utah at

City or other location, and state or county

Tiffany Adams

Printed Name Tiffany Adams

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*.)

468-4500
Volunteer's Phone

Covered Person's County Address/Volunteer's Address

B Copper Hills Elementary

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

Special Ed. Teacher

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

7635 W. 3715 S. Magna, UT 84044

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.

X None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the 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 a Special Education teacher at Copper Hills Elementary.

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

Signed on the 14	day of	2025
Date	Month	Year
Magna, UT		
City or other loca	ation, and state or count	v

Wendy Timothy

Printed Name

when	Timely
Wendy Timothy	Jan 14, 2025 14:50 MST)
Signatura	

Signature