



# SALT LAKE COUNTY DISCLOSURE STATEMENT

**TO:** ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS AND EMPLOYEES (“covered persons”)  
**FROM:** THE SALT LAKE COUNTY DISTRICT ATTORNEY’S OFFICE  
**SUBJECT:** STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

All Salt Lake County covered persons must understand and follow a Utah law that prohibits, or requires disclosure of, certain actual or potential conflicts of interest between public duties and private interests. The County Officers and Employees Disclosure Act (§§ 17-16a-1, et seq., U.C.A., 1953 as amended) and Salt Lake Countywide Policy 1430 set the following requirements:

## PROHIBITED ACTS

A covered person may not:

1. Disclose confidential information acquired by reason of the covered person’s official position or use such information to secure special privileges or exemptions for the covered person or others;
2. Use or attempt to use the covered person’s official position to secure special privileges for the covered person or for others; or
3. Knowingly receive, accept, take, seek or solicit, directly or indirectly, any gift or loan for the covered person or for another, if the gift or loan tends to influence the covered person in the discharge of his/her official duties.

## DISCLOSURE REQUIRED

A covered person is required to make a disclosure if he or she:

- A. Receives or agrees to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County;
- B. Is 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;
- C. Is 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;
- D. Holds an investment or other financial interest that creates a potential or actual conflict between the interest and the covered person’s public duties; or
- E. Hold some personal interest that creates a potential or actual conflict between the interest and the covered person’s public duties.

All written disclosures must be sworn statements containing the information described above and be in a form similar to that on the reverse side of this document. All such statements are public records, open to public inspection. All disclosures must be made as follows: Orally in any meeting of a county agency, board or division where a transaction is discussed involving a matter in which the covered person has an interest, and in writing when the conflict first arises. The general written disclosure must also be filed in January of each year that the outside interest exists. The written disclosure is filed through the covered person’s chain of command to the immediate supervisor, volunteer or community liaison, division director, department head or elected official, and county council.

Violation of these provisions may subject the covered person to disciplinary action or criminal prosecution. Any violations will be thoroughly investigated and prosecuted. Please be aware that this document is a shortened and simplified statement of the legal requirements involved in this area. Additional requirements or exceptions may apply. **YOUR CONDUCT WILL BE GOVERNED BY THE LAW, NOT THIS SUMMARY.** Feel free to direct any questions regarding the law’s ethical and disclosure requirements to the Civil Division of the Office of the District Attorney.

**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. Jacob Young Planner 385-468-4859  
Covered Person Position, (or County Division for which you are employed or volunteering) County/Volunteer's Phone  
2001 State Street, Suite S2-100 SLC UT 84114  
Covered Person's County Address/Volunteer's Address

B. Citta Design & 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  
owner of 1 person consulting firm  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
home based  
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.

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.)

Mr. Young is the owner of a 1 person landscape architecture/planning firm. No projects take place in Salt Lake County & no work is done for Salt Lake County.

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

Signed on the 28 day of 01, 2020  
Date Month Year  
at Salt Lake City  
City or other location, and state or county  
Jacob Young  
Printed Name  
[Signature]  
Signature

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



## SALT LAKE COUNTY DISCLOSURE STATEMENT

**TO:** ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS AND EMPLOYEES (“covered persons”)  
**FROM:** THE SALT LAKE COUNTY DISTRICT ATTORNEY’S OFFICE  
**SUBJECT:** STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

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2. Use or attempt to use the covered person’s official position to secure special privileges for the covered person or for others; or
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**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. Michael Gallegos Divisioin Director , Housing and Community Develop. 84901  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 So. State St., S2-100, SLC, Utah 84190

Covered Person's County Address/Volunteer's Address

B. Rocky Mountain Community Reinvestment Corp.  
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

64 East Winchester St., Suite 230, SLC, UT. 84107 801-366-0400

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.

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 have personal interest however I would like to establish record that there are and potentially in the future housing developers who have received and will seek financial loans from the Salt Lake County HOME Program and the Rocky Mountain Community Reinvestment Corp (RMCRC) for the same housing projects. These loans are not tied to one another. Salt Lake County's loan is part of the funding stack of the housing project and RMCRC generally is a construction, bridge or permanent financing. The Board does not approve the RMCRC loans. The RMCRC performs the underwriting and presents to the loan committee that is independent of the Board. The Board function is oversight and develops the policies of the organization.

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

Signed on the 27 day of January, 2020  
Date Month Year

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

Michael Gallegos  
Printed Name

Michael Gallegos Digitally signed by Michael Gallegos  
Date: 2020.01.27 12:56:20 -07'00'

Signature

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



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A. Michael Gallegos Division Director, Housing and Community Developer 84901  
Covered Person                      Position, or County Division for which you are employed or volunteering                      County/Volunteer's Phone  
2001 So. State St., S2-100, SLC, Utah 84190

Covered Person's County Address/Volunteer's Address

B. State of Utah - Commission on Housing Affordability  
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

Commission Member

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

State Depart Workforce Services, 1385 So. State, SLC

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:

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No personal interest involved. The Commission recommends legislation to advocate for affordable housing. Doing so by assessing the barriers and making recommending legislation to alleviate the barriers and create strategies encouraging the development of affordable housing and preservation of existing affordable housing in addition to recommending funding.

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

Signed on the 27 day of January, 2020  
Date                      Month                      Year

Salt Lake County  
at \_\_\_\_\_  
City or other location, and state or county

Michael Gallegos  
Printed Name

Michael Gallegos                      Digitally signed by Michael Gallegos  
Date: 2020.01.27 13:45:25 -07'00'

Signature

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## SALT LAKE COUNTY DISCLOSURE STATEMENT

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Covered Person                      Position, or County Division for which you are employed or volunteering                      County/Volunteer's Phone  
2001 So. State St., S2-100, SLC, Utah 84190

Covered Person's County Address/Volunteer's Address

B. SLCC Workforce and Economic Development Advisory Board  
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 representing government and diverse communities

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

Workforce and Training Center, Westpoint. workforce@slcc.edu or call 801-957-2223

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:

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No personal interest exists. This is an advisory role only on business and community needs on workforce training and advocate for the needs of training and be a link to the communities.

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

Signed on the 27 day of January, 2020  
Date                      Month                      Year

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

Michael Gallegos

Printed Name

Michael Gallegos Digitally signed by Michael Gallegos  
Date: 2020.01.27 13:58:58 -07'00'

Signature

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A. Michael Gallegos Division Director, Housing and Community Developmer 84901  
Covered Person                      Position, or County Division for which you are employed or volunteering                      County/Volunteer's Phone  
2001 So. State St., S2-100, SLC, Utah 84190

Covered Person's County Address/Volunteer's Address

B. National Association of Housing and Redevelopment Officials - Utah Chapter Board NAHRO  
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 representing community development professionals - Professional Assn.

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

3595 So. Main Street, SLC

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

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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 personal interest. Develops and provides capacity building opportunities for public and private housing and community development professionals. Advocates and educates on the need for affordable housing and housing stability at the local, state and national levels.

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

Signed on the 27 day of January, 2020  
Date                      Month                      Year

Salt Lake County  
at \_\_\_\_\_  
City or other location, and state or county

Michael Gallegos  
Printed Name

Michael Gallegos Digitally signed by Michael Gallegos  
Date: 2020.01.27 14:08:16 -07'00'

Signature

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A. Kerry Steadman Housing and Community Development 385-468-4902  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street S2-100 Salt Lake City, Utah 84119  
Covered Person's County Address/Volunteer's Address

B. Department of Workforce 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  
I am a member of the partnership committee  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
5735 South Redwood Road Salt Lake City, Utah 84123  
Address and phone number of the institution, entity, business or person named above

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- 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.

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 personally interested in this organization because of the services they provide to the residents of Salt Lake County in helping them to become more economically self-sufficient and stable in their personal and family lives. This committee meets 4-5 times a year with the purpose of sharing information about activities and programs that benefit individuals and families who are looking to better their lives.

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

Signed on the 28 day of January, 2020  
Date Month Year

Salt Lake County  
at \_\_\_\_\_  
City or other location, and state or county

Kerry D. Steadman  
Printed Name  
Kerry D. Steadman  
Signature

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

**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. Kerry Steadman Housing and Community Development 385-468-4902  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street S2-100 Salt Lake City, Utah 84119  
Covered Person's County Address/Volunteer's Address

B. The Road Home  
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  
I am a member of the administrative committee of this organization  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
3380 South 1000 West South Salt Lake City 84123  
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.

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 personally interested in this organization because of the work they do in our community in serving those who are or have been homeless. The administrative committee meets about 8-9 times a year and reviews financial information and associated policies and makes recommendations to the Policy Board of The Road Home for their consideration.

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

Signed on the 28 day of January, 2020  
Date Month Year

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

Kerry D. Steadman

Printed Name

Kerry D. Steadman  
Signature

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

**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. Kerry Steadman Housing and Community Development 385-468-4902  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street #S2-100 Salt Lake City, Utah 84119  
Covered Person's County Address/Volunteer's Address

B. Housing Connect  
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  
I am a member of the budget committee of this organization.  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
3595 South Main Street, Salt Lake City, Utah 84115  
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.

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 personally interested in this organization because of the work they do in providing housing for low income individuals and families. The budget committee meets two-three times a year to examine financial information and make recommendations to the Policy Board of Housing Connect.

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

Signed on the 28 day of January, 2020  
Date Month Year

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

Kerry D. Steadman

Printed Name

Kerry D. Steadman  
Signature

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



# SALT LAKE COUNTY DISCLOSURE STATEMENT

**TO:** ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS AND EMPLOYEES ("covered persons")

**FROM:** THE SALT LAKE COUNTY DISTRICT ATTORNEY'S OFFICE

**SUBJECT:** STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

All Salt Lake County covered persons must understand and follow a Utah law that prohibits, or requires disclosure of, certain actual or potential conflicts of interest between public duties and private interests. The County Officers and Employees Disclosure Act (§§ 17-16a-1, et seq., U.C.A., 1953 as amended) and Salt Lake Countywide Policy 1430 set the following requirements:

## PROHIBITED ACTS

A covered person may not:

1. Disclose confidential information acquired by reason of the covered person's official position or use such information to secure special privileges or exemptions for the covered person or others;
2. Use or attempt to use the covered person's official position to secure special privileges for the covered person or for others; or
3. Knowingly receive, accept, take, seek or solicit, directly or indirectly, any gift or loan for the covered person or for another, if the gift or loan tends to influence the covered person in the discharge of his/her official duties.

## DISCLOSURE REQUIRED

A covered person is required to make a disclosure if he or she:

- A. Receives or agrees to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County;
- B. Is 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;
- C. Is 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;
- D. Holds an investment or other financial interest that creates a potential or actual conflict between the interest and the covered person's public duties; or
- E. Hold some personal interest that creates a potential or actual conflict between the interest and the covered person's public duties.

All written disclosures must be sworn statements containing the information described above and be in a form similar to that on the reverse side of this document. All such statements are public records, open to public inspection. All disclosures must be made as follows: Orally in any meeting of a county agency, board or division where a transaction is discussed involving a matter in which the covered person has an interest, and in writing when the conflict first arises. The general written disclosure must also be filed in January of each year that the outside interest exists. The written disclosure is filed through the covered person's chain of command to the immediate supervisor, volunteer or community liaison, division director, department head or elected official, and county council.

Violation of these provisions may subject the covered person to disciplinary action or criminal prosecution. Any violations will be thoroughly investigated and prosecuted. Please be aware that this document is a shortened and simplified statement of the legal requirements involved in this area. Additional requirements or exceptions may apply. **YOUR CONDUCT WILL BE GOVERNED BY THE LAW, NOT THIS SUMMARY.** Feel free to direct any questions regarding the law's ethical and disclosure requirements to the Civil Division of the Office of the District Attorney.

**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. Susan Fox Housing and Community Development 385-468-4889  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 S. State Street S2-100 Salt Lake City Utah 84114-4575  
Covered Person's County Address/Volunteer's Address

B. N/A  
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  
N/A  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
N/A  
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.

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 volunteer fitness instructor for Salt Lake County.

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

Signed on the 28 day of January, 2020  
Date Month Year

2001 S. State Street S2-100 Salt Lake City Utah 8411  
at City or other location, and state or county

Susan Fox  
Printed Name

Susan Fox  
Signature

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



# SALT LAKE COUNTY DISCLOSURE STATEMENT

**TO:** ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS AND EMPLOYEES (“covered persons”)  
**FROM:** THE SALT LAKE COUNTY DISTRICT ATTORNEY’S OFFICE  
**SUBJECT:** STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

All Salt Lake County covered persons must understand and follow a Utah law that prohibits, or requires disclosure of, certain actual or potential conflicts of interest between public duties and private interests. The County Officers and Employees Disclosure Act (§§ 17-16a-1, et seq., U.C.A., 1953 as amended) and Salt Lake Countywide Policy 1430 set the following requirements:

## PROHIBITED ACTS

A covered person may not:

1. Disclose confidential information acquired by reason of the covered person’s official position or use such information to secure special privileges or exemptions for the covered person or others;
2. Use or attempt to use the covered person’s official position to secure special privileges for the covered person or for others; or
3. Knowingly receive, accept, take, seek or solicit, directly or indirectly, any gift or loan for the covered person or for another, if the gift or loan tends to influence the covered person in the discharge of his/her official duties.

## DISCLOSURE REQUIRED

A covered person is required to make a disclosure if he or she:

- A. Receives or agrees to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County;
- B. Is 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;
- C. Is 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;
- D. Holds an investment or other financial interest that creates a potential or actual conflict between the interest and the covered person’s public duties; or
- E. Hold some personal interest that creates a potential or actual conflict between the interest and the covered person’s public duties.

All written disclosures must be sworn statements containing the information described above and be in a form similar to that on the reverse side of this document. All such statements are public records, open to public inspection. All disclosures must be made as follows: Orally in any meeting of a county agency, board or division where a transaction is discussed involving a matter in which the covered person has an interest, and in writing when the conflict first arises. The general written disclosure must also be filed in January of each year that the outside interest exists. The written disclosure is filed through the covered person’s chain of command to the immediate supervisor, volunteer or community liaison, division director, department head or elected official, and county council.

Violation of these provisions may subject the covered person to disciplinary action or criminal prosecution. Any violations will be thoroughly investigated and prosecuted. Please be aware that this document is a shortened and simplified statement of the legal requirements involved in this area. Additional requirements or exceptions may apply. **YOUR CONDUCT WILL BE GOVERNED BY THE LAW, NOT THIS SUMMARY.** Feel free to direct any questions regarding the law’s ethical and disclosure requirements to the Civil Division of the Office of the District Attorney.

**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. Susan Fox Housing and Community Development 385-468-4889  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 S. State Street S2-100 Salt Lake City Utah 84114-4575  
Covered Person's County Address/Volunteer's Address

B. N/A  
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  
N/A  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
N/A  
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.

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 voting member on the State Asthma Task Force Advisory Board

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

Signed on the 28 day of January, 2020  
Date Month Year

2001 S. State Street S2-100 Salt Lake City Utah 8411  
at City or other location, and state or county

Susan Fox  
Printed Name

Susan Fox  
Signature

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



## SALT LAKE COUNTY DISCLOSURE STATEMENT

**TO:** ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS AND EMPLOYEES (“covered persons”)  
**FROM:** THE SALT LAKE COUNTY DISTRICT ATTORNEY’S OFFICE  
**SUBJECT:** STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

All Salt Lake County covered persons must understand and follow a Utah law that prohibits, or requires disclosure of, certain actual or potential conflicts of interest between public duties and private interests. The County Officers and Employees Disclosure Act (§§ 17-16a-1, et seq., U.C.A., 1953 as amended) and Salt Lake Countywide Policy 1430 set the following requirements:

### PROHIBITED ACTS

A covered person may not:

1. Disclose confidential information acquired by reason of the covered person’s official position or use such information to secure special privileges or exemptions for the covered person or others;
2. Use or attempt to use the covered person’s official position to secure special privileges for the covered person or for others; or
3. Knowingly receive, accept, take, seek or solicit, directly or indirectly, any gift or loan for the covered person or for another, if the gift or loan tends to influence the covered person in the discharge of his/her official duties.

### DISCLOSURE REQUIRED

A covered person is required to make a disclosure if he or she:

- A. Receives or agrees to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County;
- B. Is 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;
- C. Is 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;
- D. Holds an investment or other financial interest that creates a potential or actual conflict between the interest and the covered person’s public duties; or
- E. Hold some personal interest that creates a potential or actual conflict between the interest and the covered person’s public duties.

All written disclosures must be sworn statements containing the information described above and be in a form similar to that on the reverse side of this document. All such statements are public records, open to public inspection. All disclosures must be made as follows: Orally in any meeting of a county agency, board or division where a transaction is discussed involving a matter in which the covered person has an interest, and in writing when the conflict first arises. The general written disclosure must also be filed in January of each year that the outside interest exists. The written disclosure is filed through the covered person’s chain of command to the immediate supervisor, volunteer or community liaison, division director, department head or elected official, and county council.

Violation of these provisions may subject the covered person to disciplinary action or criminal prosecution. Any violations will be thoroughly investigated and prosecuted. Please be aware that this document is a shortened and simplified statement of the legal requirements involved in this area. Additional requirements or exceptions may apply. **YOUR CONDUCT WILL BE GOVERNED BY THE LAW, NOT THIS SUMMARY.** Feel free to direct any questions regarding the law’s ethical and disclosure requirements to the Civil Division of the Office of the District Attorney.

**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. Amanda Cordova Contract Specialist 385-468-4891  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street Suite S2-100 Salt Lake City, Utah 84114  
Covered Person's County Address/Volunteer's Address

B. ZoomGrants  
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

Covered person's status, relationship or commitment to the institution, entity, business or person named above  
ZoomGrants Senior Admin- Appointed Vice Chair on 1.22.20  
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.

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 was elected Vice Chair for the Salt Lake County Senior Admin User Group on Jan. 22nd 2020.

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

Signed on the 28 day of January, 2020  
Date Month Year

Salt Lake City, Salt Lake County USA  
at City or other location, and state or county

Amanda L. Cordova  
Printed Name

Amanda Cordova Digitally signed by Amanda Cordova  
Date: 2020.01.28 16:08:16 -07'00'

Signature

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



# SALT LAKE COUNTY DISCLOSURE STATEMENT

**TO:** ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS AND EMPLOYEES (“covered persons”)  
**FROM:** THE SALT LAKE COUNTY DISTRICT ATTORNEY’S OFFICE  
**SUBJECT:** STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

All Salt Lake County covered persons must understand and follow a Utah law that prohibits, or requires disclosure of, certain actual or potential conflicts of interest between public duties and private interests. The County Officers and Employees Disclosure Act (§§ 17-16a-1, et seq., U.C.A., 1953 as amended) and Salt Lake Countywide Policy 1430 set the following requirements:

## PROHIBITED ACTS

A covered person may not:

1. Disclose confidential information acquired by reason of the covered person’s official position or use such information to secure special privileges or exemptions for the covered person or others;
2. Use or attempt to use the covered person’s official position to secure special privileges for the covered person or for others; or
3. Knowingly receive, accept, take, seek or solicit, directly or indirectly, any gift or loan for the covered person or for another, if the gift or loan tends to influence the covered person in the discharge of his/her official duties.

## DISCLOSURE REQUIRED

A covered person is required to make a disclosure if he or she:

- A. Receives or agrees to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County;
- B. Is 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;
- C. Is 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;
- D. Holds an investment or other financial interest that creates a potential or actual conflict between the interest and the covered person’s public duties; or
- E. Hold some personal interest that creates a potential or actual conflict between the interest and the covered person’s public duties.

All written disclosures must be sworn statements containing the information described above and be in a form similar to that on the reverse side of this document. All such statements are public records, open to public inspection. All disclosures must be made as follows: Orally in any meeting of a county agency, board or division where a transaction is discussed involving a matter in which the covered person has an interest, and in writing when the conflict first arises. The general written disclosure must also be filed in January of each year that the outside interest exists. The written disclosure is filed through the covered person’s chain of command to the immediate supervisor, volunteer or community liaison, division director, department head or elected official, and county council.

Violation of these provisions may subject the covered person to disciplinary action or criminal prosecution. Any violations will be thoroughly investigated and prosecuted. Please be aware that this document is a shortened and simplified statement of the legal requirements involved in this area. Additional requirements or exceptions may apply. **YOUR CONDUCT WILL BE GOVERNED BY THE LAW, NOT THIS SUMMARY.** Feel free to direct any questions regarding the law’s ethical and disclosure requirements to the Civil Division of the Office of the District Attorney.

**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. Dina Blaes Director, Office of Regional Development x84848  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street, Rm S2-100, SLC  
Covered Person's County Address/Volunteer's Address

B. Preservation Solutions  
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  
President/CEO  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
1875 Millcreek Way, SLC UT 84106  
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.)

Preservation Solutions is a sole proprietorship that provides consulting services in the areas of historic preservation. Currently, the firm does not operate in Salt Lake County.

Chair, Utah Board of State History (appointed by Gov. Herbert)

Member, Great Salt Lake Advisory Council (appointed by Gov. Herbert)

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

Signed on the 24 day of January, 2020  
Date Month Year

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

Dina Blaes  
Printed Name  
  
Signature

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