



Jennifer Wilson
Salt Lake County Mayor

**DEPARTMENT OF
ADMINISTRATIVE SERVICES**

Megan Hillyard
Director

DIVISIONS

ADDRESSING
CONTRACTS & PROCUREMENT
FACILITIES MANAGEMENT
INFORMATION SERVICES
REAL ESTATE
RECORDS MANAGEMENT &
ARCHIVES

SALT LAKE COUNTY
GOVERNMENT CENTER
2001 S. State St. Ste. N3200
Salt Lake City, UT 84190
385-468-7060 phone
385-468-7072 fax
www.slco.org
TTY: 7-1-1

January 30, 2019

Salt Lake County Council
2001 S. State St, Suite N2-200
Salt Lake City, UT 84114

Re: Administrative Services Department Conflict of Interest Forms

Dear Salt Lake County Council:

Attached please find the notarized conflict of interest disclosure forms for:

- Javid Lal (2)
- Megan Hillyard, (2)

Regards,

A handwritten signature in black ink that reads 'Ina Landry'.

Ina Landry
Department Assistant

Attachments: 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. Javaid M. Lal Department of Administrative Services / Data & Innovation 385-468-7063
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State Street, N3-200, Salt Lake City, UT 84190
Covered Person's County Address/Volunteer's Address

B. Utah Library Association
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
Treasurer
Covered person's status, relationship or commitment to the institution, entity, business or person named above
P.O. Box 708155, Sandy, UT 84070-8155
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.)

The treasurer's responsibilities include maintenance of Utah Library Association's financial records, write checks to various service providers, collect membership/sponsorship dues, prepare and make bank deposits, review ULA contracts and maintain bank signature card, insurance policies, and investment accounts. ULA board has approved an annual stipend of \$4,140 for the treasurer. I am not aware of any business transaction between Department of Administrative Services and the Library Association. However, Salt Lake County Library maintains membership with ULA and actively participates in the Association's programs.

[Signature]
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 4th day of January, 2019.



[SEAL]

[Signature]
NOTARY PUBLIC, Residing in
Salt Lake County UT
County State

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. Javaid M. Lal Department of Administrative Services / Data & Innovation 385-468-7063
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State Street, N3-200, Salt Lake City, UT 84190
Covered Person's County Address/Volunteer's Address

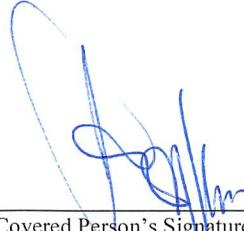
B. American Society for Public Administrators - Utah Chapter
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
President
Covered person's status, relationship or commitment to the institution, entity, business or person named above
Master of public administration 260 South Central Campus Drive Suite 3050, Salt Lake City, Ut 84112
Address and phone number of the institution, entity, business or person named above

C. Select the category that applies to yourself and the outside institution, entity, business or person 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.)

American Society for Public Administration (ASPA) is a national membership organization that promotes public service and support people advancing the public good. The chapter President is a volunteer position and does not receive any monetary compensation. Salt Lake County does not have any formal business/monetary relationship with ASPA Utah. Salt Lake County employee may become a member of ASPA.


Covered Person's Signature

SUBSCRIBED and SWORN to before me this 4th day of January, 2019.



[SEAL]

Ina Landry
NOTARY PUBLIC, Residing in
Salt Lake County UT
County State

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. Megan Hillyard Admin 385 468 7062
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 S. State St. SLCC, UT 84190
Covered Person's County Address/Volunteer's Address

B. PEHP
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
Mother works at PEHP
Covered person's status, relationship or commitment to the institution, entity, business or person named 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 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.)

Mother works for PEHP

[Signature]
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 7th day of January, 2019.



[SEAL]

Ina Landry
NOTARY PUBLIC, Residing in
Salt Lake County UT
County State

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. Megan Hilliard Admin Services 385 468 7062
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

2001 S. State St. SLCC, UT 84190
Covered Person's County Address/Volunteer's Address

B. Green Bike
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

Committee member
Covered person's status, relationship or commitment to the institution, entity, business or person named 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 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.)

Greenbike committee member - SLCC funds some of Greenbike

[Signature]
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 7th day of January, 2019



[SEAL]

Ina Landry
NOTARY PUBLIC, Residing in
Salt Lake County UT
County State

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.