



Jenny Wilson, Salt Lake County Mayor  
Robin Chalhoub, Community Services Director  
Joey McNamee, Library Director

February 5, 2025

To Whom It May Concern;

The Salt Lake County Library submits the following County Disclosure forms for review:

**EMPLOYEES:**

- Andrea Allred, Amazon Flex
- Christopher Bray, Reasoned Revisions
- Elliot Fenech, Vail Mountain Resorts
- Kimberly Zabriskie, Quilt – Etc.
- Lenora Monge, Utah State University
- Lorna Payne, The Waterford School
- Lorraine Wyness, Granite School District
- Melissa Haslam, Centerpoint Legacy Theater
- Sarah Laursen, Salt Lake Community College
- Shaun Dimick, Dimick Handyman & Maintenance
- Wanda Huffaker, American Library Association (ALA)
- Xiaolian Deng, Utah Library Association (ULA)

If you have any questions, please do not hesitate to contact the Admin Office Manager, Melissa Haslam at 801-944-7515 or [mhaslam@slcolibrary.org](mailto:mhaslam@slcolibrary.org).

Sincerely,

A handwritten signature in blue ink, appearing to read 'Joey McNamee'.

Joey McNamee  
Library Director

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Department Director

## 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. **Andrea Allred** **Library Shelver (Metro/Oxbow)** **801.943.4636**  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
**8030 S 1825 W West Jordan, UT 84088**  
Covered Person's County Address/Volunteer's Address

B. **Amazon Flex**  
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  
**Delivery Driver (occasional)**  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
**410 Terry Avenue North, Seattle, WA 98109**  
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.)*

No conflict exists

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

Signed on the 31 day of January, 2025  
Date Month Year

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

Andrea Allred

Printed Name

**Andrea Allred** Digitally signed by Andrea Allred  
Date: 2025.01.31 09:12:53 -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.*

# 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. Christopher Bray Librarian 801.943.4636  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
8030 S 1825 W West Jordan, UT 84088

Covered Person's County Address/Volunteer's Address

B. Reasoned Revisions (freelance editing 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

Owner

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.
- ☒ 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 conflict Exists.*

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

Signed on the 03 day of January, 2025  
Date Month Year

Sandy, UT  
at  
City or other location, and state or county

Christopher Bray

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.*

## 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. **Elliot Fenech** **Sr. Divisional IT Manager | Salt Lake County Library** **801.944.7513**  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
**8030 S 1825 W West Jordan, UT 84088**

Covered Person's County Address/Volunteer's Address

B. **Vail Mountain Resorts, Park City**  
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 Ski and Snowboard Instructor**

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

**390 Interlocken Crescent, Broomfield Colorado, 80021 ( 303.404.1800 )**

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.)*

no conflict exists

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  
Date Month Year

West Jordan, Utah (Salt Lake County)  
at City or other location, and state or county

Elliot Fenech

Printed Name



2025.01.30 14:05:32 -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.*

**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. Kimberly Zabriskie 801.943.4636  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
8030 S 1825 W West Jordan, UT 84088

Covered Person's County Address/Volunteer's Address

B. Quilt - Etc.  
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  
Covered person's status, relationship or commitment to the institution, entity, business or person named above

11 E Main Sandy UT 84070  
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.)*

No Conflict Exists.

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

Signed on the 6 day of January 2025  
Date Month Year

at South Jordan UT  
City or other location, and state or county

Kimberly Zabriskie  
Printed Name

Kimberly Zabriskie  
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. **Lenora Monge** **Assistant Circulation Supervisor** **801.943.4636**  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
**8030 S. 1825 W., West Jordan, UT 84088**

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

**USUSA Wasatch Vice President**

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

**920 West Levoy Drive, Salt Lake City, UT 84123 435.797.4230**

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.)*

No conflict exists

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

Signed on the 30 day of January, 2025  
Date Month Year

Taylorsville, UT  
at City or other location, and state or county

Lenora Monge

Printed Name

**Lenora Monge** Digitally signed by Lenora Monge  
Date: 2025.01.30 14:55:02 -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.*

## 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. **Lorna Payne** **Salt Lake County Library Customer Service Specialist** **801.943.4636**  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
**8030 S 1825 W West Jordan, UT 84088**  
Covered Person's County Address/Volunteer's Address

B. **The Waterford 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  
**Mathematics Tutor**  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
**1480 East 9400 South Sandy, UT 84093**  
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.)*

No Conflict Exists.

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

Signed on the 8 day of January, 2025  
Date Month Year

**Cottonwood Heights, UT**  
at City or other location, and state or county

**Lorna Payne**  
Printed Name  
*Lorna Payne*  
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. \_\_\_\_\_  
Covered Person                      Position, or County Division for which you are employed or volunteering                      County/Volunteer's Phone

\_\_\_\_\_  
Covered Person's County Address/Volunteer's Address

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

\_\_\_\_\_  
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.
  - \_\_\_ 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 Conflict Exists**

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

Signed on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_,  
                                    Date                      Month                      Year

at \_\_\_\_\_  
City or other location, and state or county

\_\_\_\_\_  
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.***



## 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. **Shaun Dimick** **Facilities Manager II** **801.381-3835**  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
**9786 S Prosperity Rd West Jordan, UT 84081**

Covered Person's County Address/Volunteer's Address

B. **Dimick Handyman & Maintenance**  
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**

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

**2967 S Hibler Dr, Magna UT 84044** **801-574-0480**

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.)*

No conflict exists.

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

Signed on the 31 day of January, 2025  
Date Month Year

at \_\_\_\_\_  
City or other location, and state or county

**Shaun Dimick**

Printed Name

**Shaun Dimick** Digitally signed by Shaun Dimick  
Date: 2025.01.31 10:03:57 -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.*

## 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. **Wanda Mae Huff Library** **801.943.4636**  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
**8030 S 1825 W West Jordan, UT 84088**

Covered Person's County Address/Volunteer's Address

B. **American 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

**Volunteer**

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

**2550N Michigan Avenue Chi. IL 60601**

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.)*

No Conflict Exists

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

Signed on the 29 day of January, 2025  
Date Month Year

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

Wanda Mae Huffaker

Printed Name

Wanda Mae Huffaker Digitally signed by Wanda Mae Huffaker  
Date: 2025.01.29 16:00:43 -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.*

## 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. **Xiaolian Deng Librarian, Salt Lake County Library 801.943.4636**  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
**8030 S 1825 W West Jordan, UT 84088**

Covered Person's County Address/Volunteer's Address

B. **ULA**  
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 At Large**

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

**Utah Library of Association**

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.)*

No conflict exists.

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

Signed on the 30 day of January, 2025  
Date Month Year

Sandy  
at City or other location, and state or county

Xiaolian Deng

Printed Name

**Xiaolian Deng** Digitally signed by Xiaolian Deng  
Date: 2025.01.30 14:27:47 -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.*