

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. Alisha Salinas Criminal Justice Services 385-468-3514
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E 1300 S Ste 501 SLC UT 84115

Covered Person's County Address/Volunteer's Address

B. Assessment and Referral Services
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Part Time SW

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

450 S 900 E SLC UT

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

- C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
 - I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
 - I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
 - I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
 - I hold a personal interest that creates a potential or actual conflict with my public duties.
 - None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)

I work part time conducting clinical assessments. To avoid any conflict of interest, I am not scheduled to meet with any individual that has CJS involvement.

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

Signed on the 24 day of January, 2022
Date Month Year

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

Alisha Salinas
Printed Name

Alisha L. Salinas Digitally signed by Alisha L. Salinas
Date: 2022.01.24 09:01:50 -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. Alisha Salinas Criminal Justice Services 385-468-3514
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E 1300 S Ste 501 SLC UT 84115

Covered Person's County Address/Volunteer's Address

B. Odyssey House
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 SW

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

3148 S 1100 W SLC UT

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

C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.
- None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)

I work part time in the CATS program conducting clinical assessments. To avoid any conflict of interest, I am not scheduled to meet with any individual that is a participant in a specialty court.

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

Signed on the 24 day of January, 2022
Date Month Year

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

Alisha Salinas
Printed Name

Alisha L. Salinas Digitally signed by Alisha L. Salinas
Date: 2022.01.24 09:05:33 -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. Erik Holdaway CJS Pre-Trial (Low Risk) Case Manager 385-468-3578
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 East 1300 South Ste. 501, Salt Lake City, UT 84115

Covered Person's County Address/Volunteer's Address

B. Valley Behavioral Health, CORE-1 (men's unit)
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

Weekend graveyard seasonal

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

443 South 600 East, Salt Lake City, UT 84102 / 888-949-4864

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.)

As a weekend graveyard employee with CORE, I have little interaction with the residents and am not responsible for treatment recommendations or other interventions. These additional work hours do not conflict with my work hours with the county. As a low risk case manager for Pre-Trial Services I am not asked to make referrals or recommendations for placements, or have the ability to direct resources to the organization in question, so there should be no conflict of interest in my continued part-time employment.

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

Signed on the 20 day of January, 2022
Date Month Year

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

John Erik Holdaway
Printed Name

Erik Holdaway Digitally signed by Erik Holdaway
Date: 2022.01.20 10:32:23 -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. Heidi Marks Section Manager, Criminal Justice Services 384-468-3423
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 East 1300 South, Suite 501, Salt Lake City, UT 84115-6141

Covered Person's County Address/Volunteer's Address

B. Clinical Consultants
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 employment

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

7601 S Redwood Rd, West Jordan, UT 84088 801-233-8670

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

C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.
- None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)

I facilitate substance abuse groups that contain mutual clients of Clinical Consultants and CJS. Clinical Consultants works with many staff that are employed at CJS in regard to clients' progress in treatment, to which I am a part of determining at Clinical Consultants. However, I do not directly report to CJS on behalf of Clinical Consultants in regard to any clients. Clinical Consultants holds contracts that are subject to the regulation of Salt Lake County Behavioral Health Services.

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

Signed on the 19 day of January, 2022
Date Month Year

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

Heidi Kenney Marks
Printed Name

Heidi Kenney Marks Digitally signed by Heidi Kenney Marks
Date: 2022.01.19 13:47:24 -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. Jeff Monson HR Coordinator - Criminal Justice Services 385-468-3535
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 East 1300 South #501, Salt Lake City, Utah 84115

Covered Person's County Address/Volunteer's Address

B. Oquirrh Recreation and Parks District
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Chairman of the Board of Trustees

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

5624 Cougar Lane, Salt Lake City, Utah 84118

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

C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.
- None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)

I am the Chairman of the Board for Oquirrh Recreation and Parks District which may at time seek financing from Salt Lake County.

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

Signed on the 11 day of January, 2022
Date Month Year

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

Jeff Monson
Printed Name
Jeff Monson Digitally signed by Jeff Monson
Date: 2022.01.11 08:02:45 -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

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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. Jeff Wade Treatment Specialist/ Criminal Justice Services 385-468-3525
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 East 1300 South Salt Lake City, Utah 84115
Covered Person's County Address/Volunteer's Address

B. Changes Counseling - Chris Smalley
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
Therapist
Covered person's status, relationship or commitment to the institution, entity, business or person named above
8221 South 700 East Sandy, Utah 84070 801-542-7060
Address and phone number of the institution, entity, business or person named above

- C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
 - I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
 - I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
 - I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
 - I hold a personal interest that creates a potential or actual conflict with my public duties.
 - None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. *(This disclosure statement will not be accepted as valid unless this section is completed.)*

I do individual and group therapy with clients who are on Medicaid and/or living in Assisted Living facilities. I work with individuals and families that are struggling with lifes challenges by doing therapy with them. None of the individuals I work with are in Drug Court.

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

Signed on the 10th day of January, 2022
Date Month Year

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

Jeff Wade
Printed Name

Jeff Wade
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

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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. Kele Griffone Division Director, Criminal Justice Services 3854683425
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E 1300 S Suite 501, SLC, UT 84115

Covered Person's County Address/Volunteer's Address

B. Salt Lake Area Family Justice Center Advisory Council
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

YWCA 322 East 300 South Salt Lake City, Utah 84111

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.)

Member of Advisory Council

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

Signed on the 18 day of January, 2022
Date Month Year

at Utah
City or other location, and state or county

Kele Griffone
Printed Name

Kele Griffone Digitally signed by Kele Griffone
Date: 2022.01.18 16:38:58 -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

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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. Kele Griffone Division Director, Criminal Justice Services 3854683425
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E 1300 S Suite 501, SLC, UT 84115

Covered Person's County Address/Volunteer's Address

B. American Probation and Parole Association (APPA) State Representative
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

State representative

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.)*

State Representative for APPA. To continued education, advocacy, and professional development of community corrections professionals. Support national trainings that include county employees attending.

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

Signed on the 18 day of January, 2022
Date Month Year

at Utah
City or other location, and state or county

Kele Griffone
Printed Name
Kele Griffone Digitally signed by Kele Griffone
Date: 2022.01.18 16:34:27 -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. Kele Griffone Division Director, Criminal Justice Services 3854682435
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E 1300 S Suite 501, SLC, UT 84115

Covered Person's County Address/Volunteer's Address

B. Criminal Justice Advisory Council
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

Mayor's Office of Criminal Justice Initiatives 2001 South State Street N4-930 PO Box 144575

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.)*

Member of Advisory Council

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

Signed on the 10 day of January, 2022
Date Month Year

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

Kele Griffone

Printed Name

Kele Griffone Digitally signed by Kele Griffone
Date: 2022.01.10 11:55:34 -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

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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. Brian Lohrke Assoc. Director, Criminal Justice Services 8-3595
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E 1300 S, Salt Lake City, UT 84115
Covered Person's County Address/Volunteer's Address

B. Murray 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
Public Safety Advisory Board / Board Member
Covered person's status, relationship or commitment to the institution, entity, business or person named above
5025 S State St., Murray, UT 84107
Address and phone number of the institution, entity, business or person named above

- C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
 - I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
 - I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
 - I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
 - I hold a personal interest that creates a potential or actual conflict with my public duties.
 - 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.)*

Murray City is an incorporated city government within Salt Lake County. With this board, I help advise the Murray Police and Fire Command in policy and procedures. If a conflict arises, I will make sure to notify my supervisors immediately.

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

Signed on the 26 day of January, 2022
Date Month Year
at Salt Lake City, UT
City or other location, and state or county

Brian Lohrke
Printed Name
Brian Lohrke Digitally signed by Brian Lohrke
Date: 2022.01.26 13:14:19 -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

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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. Brian Lohrke Assoc. Director, Criminal Justice Services 8-3595
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E 1300 S, Salt Lake City, UT 84115

Covered Person's County Address/Volunteer's Address

B. State of Utah, Office of the Medical Examiner
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

Medicolegal Death Investigator

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

4451 S 2700 W, Taylorsville, UT 84129

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.)

The Office of the Medical Examiner covers the State of Utah. I am assigned to part-time investigative duties within Salt Lake County. In the course of my duties, I often times work with Salt Lake County departments and employees. If a conflict ever arises, I will notify my supervisors immediately.

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

Signed on the 26 day of January, 2022
Date Month Year

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

Brian Lohrke
Printed Name

Brian Lohrke Digitally signed by Brian Lohrke
Date: 2022.01.26 13:08:33 -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. Brian Lohrke Assoc. Director, Criminal Justice Services 8-3595
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E 1300 S, Ste 501, Salt Lake City, UT 84115

Covered Person's County Address/Volunteer's Address

B. Unified Police Department
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

Reserve Police Officer

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

3365 S 900 W, Salt Lake City, UT 84119 801-840-4000

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.)

Unified Police Department is a law enforcement agency within Salt Lake County. UPD often times engages in joint operations with Salt Lake County, which presents a chance for conflict, small albeit. In the chance of conflict, I will be cognizant of the situations, and alert my supervisors, as needed.

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

Signed on the 26 day of January, 2022
Date Month Year

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

Brian Lohrke
Printed Name
Brian Lohrke Digitally signed by Brian Lohrke
Date: 2022.01.26 12:01:22 -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. Kristina Pulsiphe Criminal Justice Services 385-468-3541
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E. 1300 S. #501, Salt Lake City, UT 84115

Covered Person's County Address/Volunteer's Address

B. Ruff Haven Crisis Sheltering
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

Executive Director/Volunteer

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

1370 S. 400 W., Salt Lake City, UT 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.
- None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)

I am the volunteer Executive Director of Ruff Haven Crisis Sheltering. We provide emergency services for the pets of individuals experiencing a temporary crisis. We may have clients who are receiving services through Criminal Justice Services in our program. We also offer court ordered community service opportunities and may have CJS clients complete their hours through our organization.

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

Signed on the 10 day of January, 2022
Date Month Year

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

Kristina Pulsipher
Printed Name

Kristina Pulsipher Digitally signed by Kristina Pulsipher
Date: 2022.01.10 16:58:53 -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. Madisen Drury Criminal Justice Section Manager 385-468-3485
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
1300 S 145 E Suite 501, Salt Lake City, UT 84115
Covered Person's County Address/Volunteer's Address

B. USA Water Polo, Utah Water Polo, and Collegiate Water Polo 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
Referee, Head Referee, Board 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.
 - 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.)

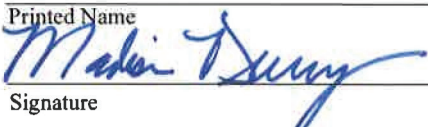
Referee local and national games for the sport of water polo. As a head referee I assigned referees to various tournaments. I work with coaches to staff tournaments and leagues with qualified referees. Some of the these tournaments I am paid as an independent contractor through the county for age-group and collegiate events.

As the Mountain Zone Head Referee for USA Water Polo, I am an non-voting board member of the USAWP Mountain Zone Board. I schedule/training/evaluate referees, provide support of sanctioning of tournaments, and provide guidance of disciplinary actions of all USA water polo member in the Mountain Zone (Arizona, Colorado, Nevada, New Mexico, Utah). Some of the sanctioned tournaments and leagues are held at SLCO aquatic facilities. Each tournament or league goes through a sanction process and is approved by the Mountain Zone Chair.

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

Signed on the 10 day of January, 2022
Date Month Year

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

Madisen Drury
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. Tara Bennion Case Manager, SLCO Criminal Justice Services 385-468-3539
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
145 E 1300 S Suite 501, SLC Utah 84115

Covered Person's County Address/Volunteer's Address

B. Volunteers of America, Utah
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

Volunteering, and voting board member

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

447 West Bearcat Drive SLC, Utah 84115 8013639414

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

C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.
- None of the above categories apply.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. *(This disclosure statement will not be accepted as valid unless this section is completed.)*

I recently accepted a voting position on the VOA Board of Directors starting 1/1/2022. I also will be volunteering at events and at their programs. This could be direct client service and or non direct client service.

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

Signed on the 10 day of January, 2022
Date Month Year

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

Tara Bennion
Printed Name
Tara Bennion Digitally signed by Tara Bennion
Date: 2022.01.10 15:23:26 -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.