

February 8, 2024

To Whom it May Concern:

The Salt Lake County Health Department submits the following County Disclosure forms for

review: **EMPLOYEES:**

- Andrea Gamble, Fun Food Handlers, LLC and Salt Lake Community College
- Dede Vilven, Salt Lake Culinary Education
- Gabe Moreno, Guadalupe School
- Jeannine Skinner, Private Practice
- Jorge Mendez, Canyons School District
- Kevin Okleberry, Salt Lake Community College
- Launa Carrillo, Churros LuLu
- Maddie Fuchs, Chick-Fil-A
- Mamta Chaudha, Best Western Plus Airport Inn & Suites and La Quinta Inn & Suites West Jordan
- Nancy Lucero, Fun Food Handlers, LLC
- Petra Farmer, Centro Civico Mexicano
- Rachel Black, Black Diamant Environmental
- Raul Garcia, Dept. of Health and Human Services

If you have any questions, please do not hesitate to contact me.

Sincerely,



Angela C. Dunn, MD MPH
Executive Director

Department Director

Mayor's Office Designee

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 Gamble Supervisor EH Food Protection 385-468-3817
 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
788 East Woodoak Lane Murray, UT 84107
 Covered Person's County Address/Volunteer's Address

B. Fun Food Handlers, LLC
 Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Instructor for the Food Handlers and Certified Manager class.
 Covered person's status, relationship or commitment to the institution, entity, business or person named above
150 S State St #100, Salt Lake City, UT 84111 435-631-9942
 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 an instructor, I teach the Food Handlers and Certified Manager class.

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

Signed on the 9 day of January, 24
Date Month Year

Murray, Utah
at City or other location, and state or county

Andrea Gamble
Printed Name
Andrea Gamble Digitally signed by Andrea Gamble
Date: 2024.01.09 12:05:00 -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. Andrea Gamble Supervisor EH Foods 385-468-3817
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
788 East Woodoak Lane Murray, UT 84107

Covered Person's County Address/Volunteer's Address

B. Salt Lake Community College
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

Adjunct instructor in the Culinary Arts Program

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

9750 S 300 W, Sandy, UT 84070(801) 957-5417

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 an instructor in the culinary program at SLCC, teaching three courses: CHEF 1110 Sanitation, CHEF 1200 Cuisine and Culture, and CHEF 2520 Nutrition.

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

Signed on the 9 day of January, 24
Date Month Year

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

Andrea Gamble
Printed Name

Andrea Gamble Digitally signed by Andrea Gamble
Date: 2024.01.09 12:17:10 -07'00'

Signature

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DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)

A. Dorothy Vilven Epidemiologist 801-953-3433
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
278 E New Century Ln #E78 South Salt Lake City, 84115

Covered Person's County Address/Volunteer's Address

B. SLICE, Salt Lake Culinary Education: Culinary School In 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

Assitant Instructor, bar tender

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

2233 S 300 E Salt Lake City, 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.)

In my work at the County I investigate any food borne illness outbreaks. The work at SLICE involves cooking, and serving food. In the event of a food borne illness outbreak at this facility I would not be able to investigate this facility. There are other members of my team that would be able to complete the investigation.

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

Signed on the 12 day of January, 2024
Date Month Year

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

Dorothy D Vilven
Printed Name

Dede Vilven Digitally signed by Dede Vilven
Date: 2024.01.12 08:35:03 -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. Gabriel A Moreno-Serrano Marketing & Outreach Manager 801-518-5041
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
3748 South Carlisle Park Pl, Unit 1, South Salt Lake, UT 84119
Covered Person's County Address/Volunteer's Address

B. Guadalupe 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
Member of Agency Board of Directors
Covered person's status, relationship or commitment to the institution, entity, business or person named above
1385 North 1200 West, Salt Lake City, UT 84116 Tel: (801) 531-6100
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.)*

Since September 2023, I have been serving in the agency board of directors at Guadalupe School, a public charter school and a 501(c)3 nonprofit organization serving some of the most vulnerable families in the community.

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

Signed on the 9 day of January, 2024
Date Month Year

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

Gabriel A Moreno-Serrano
Printed Name
Gabriel Moreno Digitally signed by Gabriel Moreno
Date: 2024.01.09 11:56:13 -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. Jorge Mendez Health Department, EH 385-468-3790
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
788 E Woodoak LN, Murray UT. 84107

Covered Person's County Address/Volunteer's Address

B. Canyons School District - Entrada High 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

Food Safety Class Instructor

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

9800 S 800 E, Sandy, UT 84094, Phone: 801-826-6670

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.)*

SLCoHD requires that individuals working or volunteering at food handling establishment obtain a food handlers permit or a food manager certification. I am employed by the Canyons School District - Entrada H.S. to provide Spanish-English food safety instruction twice per month and as needed at off-site locations.

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

Signed on the 9th day of January, 2024
Date Month Year

The City of Murray, UT. USA
at City or other location, and state or county

Jorge Mendez
Printed Name

Jorge Mendez Digitally signed by Jorge Mendez
Date: 2024.01.09 12:05:03 -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. Jeannine Skinne Registered Dietitian 385-468-4347
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
7971 S 1825 W West Jordan, UT 84088
Covered Person's County Address/Volunteer's Address

B. Private practice
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
Primary owner
Covered person's status, relationship or commitment to the institution, entity, business or person named above
844 W Germania Avenue, Murray, UT 84123 (801) 513-9976
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 working on building my own business outside of work hours and writing a recipe book. There is a potential conflict of interest since I speak one on one with WIC participants who belong to a similar population with which I plan to cater my education towards. I do not share and do not plan to share any information with participants about my plans to have my own business. I do not plan to share any information about my business, so I will not have any chance of getting any direct financial benefit from meeting with families.

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

Signed on the 22 day of January, 2024
Date Month Year

South Redwood Public Health Center, UT
at City or other location, and state or county

Jeannine Skinner, RDN
Printed Name

Jeannine Skinner Digitally signed by Jeannine Skinner
Date: 2024.01.22 16:18:47 -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.

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. Kevin Okleberry Environmental Health Scientist 385-468-3792
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
788 E. Woodoak Lane #130, Murray, UT
Covered Person's County Address/Volunteer's Address

B. Salt Lake Community College
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
Adjunct Professor of Chemistry
Covered person's status, relationship or commitment to the institution, entity, business or person named above
4600 S. Redwood Road, Salt Lake City, UT 84123
Address and phone number of the institution, entity, business or person named above

- C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
 - I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
 - I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
 - I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
 - I hold a personal interest that creates a potential or actual conflict with my public duties.
 - 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 an adjunct professor of chemistry at SLCC and teach night and online classes in basic chemistry during Spring and Fall semesters. Employment is by contract each semester.

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

Signed on the 9 day of January, 2024
Date Month Year

Murray, Utah
at City or other location, and state or county

Kevin M. Okleberry
Printed Name

Kevin Okleberry Digitally signed by Kevin Okleberry
Date: 2024.01.09 12:45:53 -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

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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. Salt Lake County Health Dept Wic
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

93405. 700E Sandy 84070
Covered Person's County Address/Volunteer's Address

B. Churros Lulu
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

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

410W. Wasatch St Midvale Utah 84047 801-259-1979
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.)

My husband and I have 2 food trucks. It's business and work seasonally. ^{our}

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

Signed on the 12 day of 1, 2024
Date Month Year

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

LAUNA CARRILLO
Printed Name

Launa Carrillo
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. Madeline Fuchs Health Department-Environmental Health 385-468-3820
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
788 E Woodoak Ln Murray, UT 84107

Covered Person's County Address/Volunteer's Address

B. Chick-Fil-A
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Employee

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

357 E 12300 S Draper, UT 84020 801-495-2004

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 print food handler cards for the people I work with at Chick-Fil-A.

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

Signed on the 18 day of January, 2024,
Date Month Year

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

Madeline Fuchs
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.

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A. Mamta Chaudha Environmental Health 385-468-3827
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
788 E Woodoak Lane Murray UT 84107

Covered Person's County Address/Volunteer's Address

B. Best Western Plus Airport Inn & Suites
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
family

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

5433 Wiley Post Way Salt Lake City UT 84116 (801) 428-0900

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.)*

Business is family-owned and is subject to Salt Lake County regulations.

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

Signed on the 9 day of January, 2024
Date Month Year

at Murray
City or other location, and state or county

Mamta Chaudhari
Printed Name

Mamta Chaudhari Digitally signed by Mamta Chaudhari
Date: 2024.01.09 08:57:25 -07'00'

Signature

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

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(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. Madeline Fuchs Health Department-Environmental Health 385-468-3820
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
788 E Woodoak Ln Murray, UT 84107

Covered Person's County Address/Volunteer's Address

B. Chick-Fil-A
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Employee

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

357 E 12300 S Draper, UT 84020 801-495-2004

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 print food handler cards for the people I work with at Chick-Fil-A.

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

Signed on the 18 day of January, 2024
Date Month Year

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

Madeline Fuchs
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. Mamta Chaudha Environmental Health 385-468-3827
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
788 E Woodoak Lane Murray UT 84107

Covered Person's County Address/Volunteer's Address

B. Hampton Inn & Suites SLC Cottonwood
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

family owned

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

3210 Millrock Dr Holladay UT 84121 (801) 871-1919

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.)*

Business is family-owned and subject to Salt Lake County regulations.

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

Signed on the 9 day of January, 2024
Date Month Year

Murray
at City or other location, and state or county

Mamta Chaudhari
Printed Name

Mamta Chaudhari Digitally signed by Mamta Chaudhari
Date: 2024.01.09 09:06:05 -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. Petra Farmer Information Specialist 385-468-4190
 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
610 S 200 East, RM 2103, SLC UT 84111
 Covered Person's County Address/Volunteer's Address

B. Centro Civico Mexicano
 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
Utah Non-profit organization / Community Center serving low to moderate income communiti
 Covered person's status, relationship or commitment to the institution, entity, business or person named above
President of the Board
 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.)*

CCM Has received funding from Salt Lake County, however, I personally have not nor will I personally be compensated through any of the funding received.

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

Signed on the 17 day of January, 2024
Date Month Year

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

Petra Farmer
Printed Name
Petra Farmer Digitally signed by Petra Farmer
Date: 2024.01.17 11:59:25 -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. Rachel Black Environmental Health Scientist, Environmental Health 385-468-3841
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
788 E Woodoak Lane, Murray, Utah, 84107

Covered Person's County Address/Volunteer's Address

B. Black Diamant Environmental
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

801-926-1858 1178 S 300 E, SLC,UT, 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.)*

I am a licensed Asbestos Inspector and business owner of Black Diamant Environmental. I have a license from SLCO as a Predemolition Building Inspector. I am subject to following SLCO rules and regulations when doing pre-demolition building inspections.

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

Signed on the 16 day of January, 2024
Date Month Year

Murray, Utah
at City or other location, and state or county

Rachel Black
Printed Name

Rachel Black Digitally signed by Rachel Black
Date: 2024.01.16 13:53:25 -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. Raul Garcia Community Health Division 8015418768
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
7971 South 1825 West, West Jordan, Utah 84088

Covered Person's County Address/Volunteer's Address

B. U.S. Department of Health and Human Services
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Federal Intermittent Emergency Responder

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

8833 South 580 East, Sandy, Utah 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.)*

Federal intermittent emergency responder with the Utah-1 Disaster Medical Assistance Team (DMAT). Official orders and missions are coordinated with federal, state, and local entities. Team response is according to the need of the major disaster declaration, public health and medical emergency, and event of national significance. Assignment and deployment orders are under the federal authority of the U.S. Department of Health and Human Services, (DHHS), Office of the Administration for Strategic Preparedness and Response (ASPR), National Disaster Medical System (NDMS). Deployment assignment is typically 2-3 weeks depending on the event and extent of national disaster declaration, and regional/local personnel need. Right to deploy and position is covered under the Uniformed Services Employment and Reemployment Rights Act (USERRA).

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

Signed on the 10 day of January, 2024
Date Month Year

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

Raul Garcia
Printed Name

Raul Garcia Digitally signed by Raul Garcia
Date: 2024.01.10 09:47:54 -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.