

**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. Chloë Spiewak (Morrone) Communications Director 385-261-9301  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street Suite W2-100 Salt Lake City, UT 84190  
Covered Person's County Address/Volunteer's Address

B. Jim Spiewak Reporter/Anchor KUTV  
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  
Husband  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
299 Main Street Salt Lake City, 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.

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, Jim Spiewak is a reporter and Anchor for KUTV.

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

Signed on the 21 day of 1, ~~2019~~ 2020  
Date Month Year

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

Chloë Spiewak (Morrone)  
Printed Name

Chloë T. Spiewak  
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. Catherine Kanter Deputy Mayor  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

Covered Person's County Address/Volunteer's Address

B. Utah Foundation  
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

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

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

I serve on the board of trustees of the Utah Foundation, in a voluntary capacity. I do not receive compensation from that entity.

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

Signed on the 13 day of January, 2020  
Date Month Year

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

Catherine Kanter  
Printed Name

Catherine Kanter  
Signature

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**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. Eric Biggart                      Senior Advisor to the Mayor                      87004  
Covered Person                      Position, or County Division for which you are employed or volunteering                      County/Volunteer's Phone  
2001 S State St. N2-100, Salt Lake City, UT 84114

Covered Person's County Address/Volunteer's Address  
B. Salt Lake County Democratic Party

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  
825 N 300 W, Salt Lake City, UT 84103

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

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

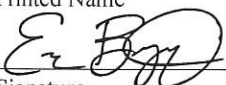
- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

I serve as a volunteer board member for the Salt Lake County Democratic Party and am the primary liaison between the County Party and County Government.

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

Signed on the 13 day of January, 202  
Date                      Month                      Year  
Salt Lake City, UT  
at \_\_\_\_\_  
City or other location, and state or county

Eric Biggart  
Printed Name  
  
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. Milica Reberg Associate Deputy Mayor 385-468-7093  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 S. State Street, N2100, Salt Lake City 84114  
Covered Person's County Address/Volunteer's Address

B. Valley Emergency Communication Center VECC  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
Board member representing Salt Lake County  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
5360 S. Ridge Village Dr. WVC 84118  
Address and phone number of the institution, entity, business or person named above

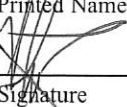
- C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
  - I am an officer, 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.

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 on the board of VECC representing Salt Lake County's interests. As a board member I can make votes that can impact Salt Lake County's costs.

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

Signed on the 28 day of Jan, 2020  
Date Month Year  
at Salt Lake City, Ut.  
City or other location, and state or county

Milica Reberg  
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. Darrin Casper Chief Financial Officer / Deputy Mayor 87074  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street #N4-200 Salt Lake City, Utah 84190

Covered Person's County Address/Volunteer's Address

B. Utah Performing Arts Center Agency  
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

50 West 200 South Salt Lake City, UT 84101

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

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

Serve as a member of the UPACA Board which is charged with acting in the best interest of The Eccles Theater. Owners of the theater are SLCounty, SLC, and SLC RDA.

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

Signed on the 22 day of 1, 2020  
Date Month Year

at County  
City or other location, and state or county

Darrin Casper  
Printed Name

[Signature]  
Signature

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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. Darrin Casper Chief Financial Officer / Deputy Mayor 87074  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street #N4-200 Salt Lake City, Utah 84190

Covered Person's County Address/Volunteer's Address

B. Salt Palace Solar, 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

President of Salt Lake County NMTC, Inc

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

2001 South State Street, N4-200 Salt Lake City, UT 84190

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

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

Serve as President of all Salt Lake County NMTC entities. Entities are formed to act in the best interest of SLCounty residents.

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

Signed on the 22 day of 1, 2020  
Date Month Year

at County  
City or other location, and state or county

Darrin Casper  
Printed Name

[Signature]  
Signature

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A. Darrin Casper Chief Financial Officer / Deputy Mayor 87074  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street #N4-200 Salt Lake City, Utah 84190

Covered Person's County Address/Volunteer's Address

B. Wasatch View Solar, 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

President of Salt Lake County NMTC, Inc

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

2001 South State Street, N4-200 Salt Lake City, UT 84190

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

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

Serve as President of all Salt Lake County NMTC entities. Entities are formed to act in the best interest of SLCounty residents.

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

Signed on the 22 day of 1, 2020  
Date Month Year

at County  
City or other location, and state or county

Darrin Casper  
Printed Name

[Signature]  
Signature

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A. Darrin Casper Chief Financial Officer / Deputy Mayor 87074  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street #N4-200 Salt Lake City, Utah 84190

Covered Person's County Address/Volunteer's Address

B. Salt Lake County Health Clinic, 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

President of Salt Lake County NMTC, Inc

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

2001 South State Street, N4-200 Salt Lake City, UT 84190

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

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

Serve as President of all Salt Lake County NMTC entities. Entities are formed to act in the best interest of SLCounty residents.

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

Signed on the 22 day of 1, 2020,  
Date Month Year

at County  
City or other location, and state or county

Darrin Casper  
Printed Name

[Signature]  
Signature

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**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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A. Darrin Casper Chief Financial Officer / Deputy Mayor 87074  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street #N4-200 Salt Lake City, Utah 84190

Covered Person's County Address/Volunteer's Address

B. Historical Capitol Theater, 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

President of Salt Lake County NMTC, Inc

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

2001 South State Street, N4-200 Salt Lake City, UT 84190

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

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

Serve as President of all Salt Lake County NMTC entities. Entities are formed to act in the best interest of SLCounty residents.

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

Signed on the 22 day of 1, 2020  
Date Month Year

at County  
City or other location, and state or county

Darrin Casper  
Printed Name

[Signature]  
Signature

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A. Darrin Casper Chief Financial Officer / Deputy Mayor 87074  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street #N4-200 Salt Lake City, Utah 84190

Covered Person's County Address/Volunteer's Address

B. Magna Library, 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

President

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

2001 South State Street, N4-200 Salt Lake City, UT 84190

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.
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- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

Serve as President of all Salt Lake County NMTC entities. Entities are formed to act in the best interest of SLCounty residents.

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

Signed on the 22 day of 1, 2020,  
Date Month Year

at County  
City or other location, and state or county

Darrin Casper  
Printed Name

[Signature]  
Signature

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A. Darrin Casper Chief Financial Officer / Deputy Mayor 87074  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street #N4-200 Salt Lake City, Utah 84190

Covered Person's County Address/Volunteer's Address

B. Salt Lake County NMTC, 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

President

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

2001 South State Street, N4-200 Salt Lake City, UT 84190

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.

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Serve as President of all Salt Lake County NMTC entities. Entities are formed to act in the best interest of SLCounty residents.

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

Signed on the 22 day of 1, 2020,  
Date Month Year

at County  
City or other location, and state or county

Darrin Casper  
Printed Name

[Signature]  
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. Erin Litvack Chief Administrative Officer / Deputy Mayor 87005  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street, #N2-100 Salt Lake City, Utah 84190  
Covered Person's County Address/Volunteer's Address

B. Jewish Family Services Board of Directors  
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  
1111 Brickyard Rd #218, Salt Lake City, UT 84106  
Address and phone number of the institution, entity, business or person named above

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

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

I am a board member for Jewish Family Services

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

Signed on the 23 day of Jan, 2020  
Date Month Year

at SLC, UT  
City or other location, and state of county

Erin Litvack  
Printed Name

Erin Litvack  
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. Erin Litvack Chief Administrative Officer / Deputy Mayor 87005  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street, #N2-100 Salt Lake City, Utah 84190  
Covered Person's County Address/Volunteer's Address

B. Downtown Alliance Board of Directors  
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  
175 400 South #600, 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.)

Through my position at SLCounty I am a board member for Downtown Alliance Board

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

Signed on the 23 day of Jan, 2020  
Date Month Year

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

Erin Litvack  
Printed Name

Erin Litvack  
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. Erin Litvack Chief Administrative Officer / Deputy Mayor 87005  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street, #N2-100 Salt Lake City, Utah 84190  
Covered Person's County Address/Volunteer's Address

B. Shelter the Homeless Board of Directors  
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  
310 Main St Ste M2, Salt Lake City, UT 84101  
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.)

Through my position at SLCounty I am a board member for Shelter the Homeless

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

Signed on the 23 day of Jan, 2020  
Date Month Year

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

Erin Litvack  
Printed Name

Erin Litvack  
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. Erin Litvack Chief Administrative Officer / Deputy Mayor 87005  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street, #N2-100 Salt Lake City, Utah 84190  
Covered Person's County Address/Volunteer's Address

B. State Homeless Coordinating Committee  
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  
1385 South State Street Salt Lake City 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.)

Through my position at SLCounty I am a board member for Sate Homeless Coordinating Committee

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

Signed on the 23 day of Jan, 2020  
Date Month Year

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

Printed Name Erin Litvack

Signature Erin Litvack

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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. Erin Litvack Chief Administrative Officer / Deputy Mayor 87005  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street, #N2-100 Salt Lake City, Utah 84190  
Covered Person's County Address/Volunteer's Address

B. David Litvack  
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  
Salt Lake City  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
451 South State Street, Salt Lake City, UT 84114  
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.)

Spouse works for Salt Lake City under Mayor Mendenhall

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

Signed on the 23 day of Jan, 2020  
Date Month Year

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

Erin Litvack  
Printed Name

Erin Litvack  
Signature

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**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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A. Erin Litvack Chief Administrative Officer / Deputy Mayor 87005  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street, #N2-100 Salt Lake City, Utah 84190  
Covered Person's County Address/Volunteer's Address

B. Visit Salt Lake Board of Directors  
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  
90 South West Temple, Salt Lake City, Utah 84101  
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.)

Through my position at SLCounty I am a board member for Visit Salt Lake

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

Signed on the 23 day of Jan, 2020  
Date Month Year

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

Erin Litvack  
Printed Name

Erin Litvack  
Signature

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**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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A. Erin Litvack Chief Administrative Officer / Deputy Mayor 87005  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street, #N2-100 Salt Lake City, Utah 84190  
Covered Person's County Address/Volunteer's Address

B. Department Heritage and Arts Museum Board  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
Board Member  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
1000 South 600 West SLC, UT 84119  
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.)

Through my position at SLCounty I am a board member for Department Heritage and Arts Museum Board

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

Signed on the 23 day of Jan, 2020  
Date Month Year

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

Erin Litvack  
Printed Name

[Signature]  
Signature

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**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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A. Erin Litvack Chief Administrative Officer / Deputy Mayor 87005  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street, #N2-100 Salt Lake City, Utah 84190  
Covered Person's County Address/Volunteer's Address

B. Housing Connect  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
Board Member  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
3595 South Main Streer SLC, UT 84119  
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.)

Through my position at SLCounty I am a board member for Housing Connect

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

Signed on the 23 day of Jan, 2020  
Date Month Year

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

Erin Litvack  
Printed Name

Erin Litvack  
Signature

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**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. Erin Litvack Chief Administrative Officer / Deputy Mayor 87005  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street, #N2-100 Salt Lake City, Utah 84190  
Covered Person's County Address/Volunteer's Address

B. UPD Board of Directors  
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  
Sheriff's Office Building 3365 South 900 West, Room 115A SLC, UT 84119  
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.)*

Through my position at SLCounty I am a board member for UPD

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

Signed on the 23 day of Jan, 2020  
Date Month Year

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

Erin Litvack  
Printed Name

[Signature]  
Signature

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**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. ZE Min Xaio      Director, Office for New Americans      3854684861  
Covered Person      Position, or County Division for which you are employed or volunteering      County/Volunteer's Phone  
2001 south state Street, N1-130  
Covered Person's County Address/Volunteer's Address

B. The Christian Center of Park City  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
National Advisory Board  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
1283 Deer Valley Dr. Park City, Utah 84060  
Address and phone number of the institution, entity, business or person named above

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

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

The Christian Center of Park City might engage in business with Salt Lake County

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

Signed on the 17 day of January, 2020  
Date      Month      Year

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

Ze Min Xaio  
Printed Name  
Ze Xaio      Digitally signed by Ze Xaio  
Date: 2020.01.17 17:02:51 -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. Ze Min Xiao      Dirctor, Office for New Americans      3854684861  
Covered Person      Position, or County Division for which you are employed or volunteering      County/Volunteer's Phone  
2001 South STate STreet, N1-130  
Covered Person's County Address/Volunteer's Address

B. Utah Asian Charitable Foundation  
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 of Directors  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
PO Box 3179  
Address and phone number of the institution, entity, business or person named above

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

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

There are possible opportunities for the Utah Asian Charitable Foundation to receive funding from Salt Lake County.

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

Signed on the 17 day of January, 2020  
Date      Month      Year

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

Ze Min Xiao  
Printed Name  
Ze Xiao      Digitally signed by Ze Xiao  
Signature      Date: 2020.01.17 16:59:06 -07'00'

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**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. Ze Min Xiao      Director, Office for New Americans      3854684861  
Covered Person      Position, or County Division for which you are employed or volunteering      County/Volunteer's Phone  
2001 South State Street, N1-130, Salt Lake City, Utah 84190  
Covered Person's County Address/Volunteer's Address

B. Welcoming America  
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  
Community Advisory Board  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
315 West Ponce de Leon Avenue, Suite 900 Decature, GA 30030  
Address and phone number of the institution, entity, business or person named above

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

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

Salt Lake County is a member of Welcoming America

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

Signed on the 17 day of January, 2020  
Date      Month      Year  
at Salt Lake City  
City or other location, and state or county

Ze Min Xiao  
Printed Name  
Ze Xiao      Digitally signed by Ze Xiao  
Date: 2020.01.17 16:27:06 -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. Ze Min Xiao      Director, Office for New Americans      3854684861  
Covered Person      Position, or County Division for which you are employed or volunteering      County/Volunteer's Phone  
2001 south state street, N1-130  
Covered Person's County Address/Volunteer's Address

B. Utah Humanities  
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  
202 South 300 North Salt Lake City, Utah 84103  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
Board of Directors  
Address and phone number of the institution, entity, business or person named above

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

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

Utah Humanities receives grant funding from Salt Lake County

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

Signed on the 17 day of January, 2020  
Date      Month      Year  
at Salt Lake City  
City or other location, and state or county

Ze Min Xiao  
Printed Name  
Ze Xiao      Digitally signed by Ze Xiao  
Date: 2020.01.17 16:21:53 -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. Ze Min Xiao                      Director, Office for New Americans                      3854684861  
Covered Person                      Position, or County Division for which you are employed or volunteering                      County/Volunteer's Phone  
2001 south state street, N1-130  
Covered Person's County Address/Volunteer's Address

B. Zions Bank  
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  
Community Advisory  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
1st , Main Street, Salt Lake City, Utah 84133  
Address and phone number of the institution, entity, business or person named above

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

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

Zions Bank is a vendor of Salt Lake County

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

Signed on the 17 day of January, 2020  
Date                      Month                      Year

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

Ze Min Xiao  
Printed Name  
Ze Xiao                      Digitally signed by Ze Xiao  
Signature                      Date: 2020.01.17 16:30:15 -07'00'

*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. Ze Min Xiao      Director, Office for New Americans      3854684861  
Covered Person      Position, or County Division for which you are employed or volunteering      County/Volunteer's Phone  
2001 South State Street, N1-130  
Covered Person's County Address/Volunteer's Address

B. Governor's Multi-cultural Commission  
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  
Commissioner  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
Utah capitol  
Address and phone number of the institution, entity, business or person named above

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

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

The Governor's Multicultural Commission is an advisory group to the governor on polices that might effect Salt Lake county

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

Signed on the 17 day of January, 2020  
Date      Month      Year

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

Ze Min Xiao  
Printed Name  
Ze Xiao      Digitally signed by Ze Xiao  
Signature      Date: 2020.01.17 16:35:32 -07'00'

*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. Ze Min Xiao      Director, Office for New Americans      3854684861  
Covered Person      Position, or County Division for which you are employed or volunteering      County/Volunteer's Phone  
2001 South State Street, N1-130  
Covered Person's County Address/Volunteer's Address

B. Governor's Refugee Advisory Committee  
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  
Advisory Board  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
Utah Capitol  
Address and phone number of the institution, entity, business or person named above

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

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

The refugee advisory committee provides advise to the Governor on polices that might effect Salt Lake County

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

Signed on the 17 day of January, 2020  
Date      Month      Year

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

Ze Min Xiao  
Printed Name  
Ze Xiao      Digitally signed by Ze Xiao  
Date: 2020.01.17 16:50:21 -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. Ze Min Xiao      Director, Office for New Americans      3854684861  
Covered Person      Position, or County Division for which you are employed or volunteering      County/Volunteer's Phone  
2001 South State Street, N1-130  
Covered Person's County Address/Volunteer's Address

B. The Children Center  
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 of Directors  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
350 South 400 East, 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.

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 Children Center has been a recipient of grant funding from Salt Lake County.

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

Signed on the 17 day of January, 2020  
Date      Month      Year  
at Salt Lake County  
City or other location, and state or county

Ze Min Xiao  
Printed Name  
Ze Xiao Digitally signed by Ze Xiao  
Date: 2020.01.17 16:17:56 -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. Emma E. Houston 801-557-0867  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 Elgin Avenue - Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. National MS Society, Utah-Southern Idaho Chapter  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
Training Consultant  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
1440 Foothill Drive, Suite 200 Salt Lake City, Utah 84108 - 801-523-4251  
Address and phone number of the institution, entity, business or person named above

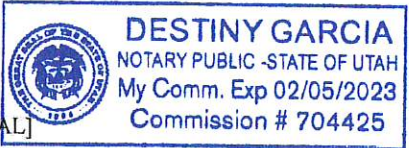
- C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
  - I am an officer,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

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

Contacted through personal business (Brighter Day Productions, LLC) to conduct Board training for the National MS Society, Utah Southern Idaho Chapter.

Emma E. Houston  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 2 day of January, 2020.



D. Garcia  
NOTARY PUBLIC, Residing in  
Salt Lake county ut  
County State

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

**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

A. Emma E. Houston Mayor's Office 385-468-7014  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 East Elgin Avenue Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. Brighter Day Productions, LLC  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
Owner & CEO  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
P.O. Box 521206 Salt Lake City, Utah 84152 801-557-0867  
Address and phone number of the institution, entity, business or person named above

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

*Responsible for the creative, technical, and logistical elements. This includes overall event design, brand building, marketing and communication strategy, audio-visual production, script writing, logistics, budgeting, negotiation, and client service*

\*Providing assistance and guidance as requested by local and national organizations outside of Salt Lake County Government.

\*Speaker, presenter, trainer or consultant for local organizations in developing their strategic plans as they relate to diversity, inclusion, equity, belonging, professional development, networking, etc.



Covered Person's Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, Residing in

[SEAL]

\_\_\_\_\_  
County

\_\_\_\_\_  
State

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

**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

A. Emma E. Houston Mayor's Office 385-468-7014  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 East Elgin Avenue Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. Alpha Kappa Alpha Sorority, Incorporated - Upsilon Beta Omega Chapter  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
Chapter Vice President  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
P.O. Box 271041 Salt Lake City, Utah 84127 801-557-0867  
Address and phone number of the institution, entity, business or person named above

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. *(This disclosure statement will not be accepted as valid unless this section is completed.)*  
*Act reasonably and in good faith. Consider the best interest of the organization and its members. Place the interest of the organization first. Act within the scope of the law. Follow the rules and regulations that apply to the organization.*

No actual or potential conflict with this organization.



Covered Person's Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, Residing in

[SEAL]

\_\_\_\_\_  
County State

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

**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

A. Emma E. Houston Mayor's Office 385-468-7014  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 East Elgin Avenue Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. Pastor France A. Davis Scholarship Foundation  
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  
Development Director  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
1090 South State Street Salt Lake City, Utah 84127 801-355-1025  
Address and phone number of the institution, entity, business or person named above

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

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. *(This disclosure statement will not be accepted as valid unless this section is completed.)*  
*Act reasonably and in good faith. Consider the best interest of the organization and its members. Place the interest of the organization first. Act within the scope of the law. Follow the rules and regulations that apply to the organization.*

\*No actual or potential conflict.

Provides leadership development training for members of the congregation.



Covered Person's Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, Residing in

[SEAL]

\_\_\_\_\_  
County

\_\_\_\_\_  
State

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



**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

A. Emma E. Houston Mayor's Office 385-468-7014  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 East Elgin Avenue Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. Huntsman Cancer Institute  
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  
Advocate Spokesperson  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
2000 Circle of Hope Salt Lake City, Utah 84112  
Address and phone number of the institution, entity, business or person named above

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

\*No actual or potential conflict  
Provides support and input as it relates to receiving services for under-served populations.  
Welcoming Ambassador for employees from ethnically/racially/culturally diverse demographics recruited to Utah to work for the Institute.

Emma E Houston  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, Residing in

[SEAL]

\_\_\_\_\_  
County State

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

**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

A. Emma E. Houston Mayor's Office 385-468-7014  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 East Elgin Avenue Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. International Disaster Relief Committee - Alpha Kappa Alpha Sorority, Incorporated  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Committee Member

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

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

Alpha Kappa Alpha Sorority, Incorporated 5656 South Stony Island Avenue- Chicago, Illinois 60637

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

*Act reasonably and in good faith. Consider the best interest of the organization and its members. Place the interest of the organization first. Act within the scope of the law. Follow the rules and regulations that apply to the organization.*

As a member of the International Disaster Relief Committee, I have the responsibility to ensure that the committee does the best work possible in pursuit of its goals and to design curriculum and training to ensure members are adequately prepared should disaster strike.

\*No actual or potential conflict with this international organization. I serve as the regional contact person for the organization with the responsibility for relating information on disasters that may impact members.



Covered Person's Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, Residing in

[SEAL]

\_\_\_\_\_  
County

\_\_\_\_\_  
State

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**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. Emma E. Houston Mayor's Office 385-468-7014  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 East Elgin Avenue Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. Community Advisory Board (CAB) - Huntsman Cancer Institute  
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  
Advisory Board Member  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
2000 Circle of Hope Salt Lake City, Utah 84112 801-581-4485  
Address and phone number of the institution, entity, business or person named above

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

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. *(This disclosure statement will not be accepted as valid unless this section is completed.)*  
*Act reasonably and in good faith. Consider the best interest of the organization and its members. Place the interest of the organization first. Act within the scope of the law. Follow the rules and regulations that apply to the organization.*  
Volunteer advocate for the Cancer Advisory Committee for Huntsman Cancer Institute. Provides input and recommendations for cancer patients along with strategic and inclusive community input regarding local and regional factors that impact HCI's mission.

\*No actual or potential conflict. Provides support and input for strategies as it relates to receiving services for underserved populations.

  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, Residing in

[SEAL]

\_\_\_\_\_  
County State

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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. Emma E. Houston Mayor's Office 385-468-7014  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 East Elgin Avenue Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. Anne Stirba Cancer Foundation  
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  
Advocate Spokesperson  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
215 South State Street #750 Salt Lake City, Utah 84111 801-364-8300  
Address and phone number of the institution, entity, business or person named above

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

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. *(This disclosure statement will not be accepted as valid unless this section is completed.)*  
*Volunteer advocate and spokesperson for Judges Run for Anne Stirba Cancer Foundation and Night off from Cancer Celebration.*

\* No actual or potential conflict. Provides support for annual cancer thriver gala and Judges 5K Run



\_\_\_\_\_  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, Residing in

[SEAL]

\_\_\_\_\_  
County State

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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. Emma E. Houston Mayor's Office 385-468-7014  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 East Elgin Avenue Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. Utah Martin Luther King Commission  
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/Board Chair  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
300 S. Rio Grande Street - 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.

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.)

*Act reasonably and in good faith. Consider the best interest of the organization and its members. Place the interest of the organization first. Act within the scope of the law. Follow the rules and regulations that apply to the organization.*

\*No actual or potential conflict.  
Provides direction and support to Commissioners to implement strategies to educate the community on the principles of Dr. Martin Luther King, Jr.

Emma E Houston  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, Residing in

[SEAL] \_\_\_\_\_  
County State

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**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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A. Emma E. Houston Mayor's Office 385-468-7014  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 East Elgin Avenue Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. Utah Diversity Network  
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  
Advisory Board Member  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
Salt Lake City, Utah  
Address and phone number of the institution, entity, business or person named above

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

*Act reasonably and in good faith. Consider the best interest of the organization and its members. Place the interest of the organization first. Act within the scope of the law. Follow the rules and regulations that apply to the organization.*

\*No actual or potential conflict

**Assist Utah businesses in building diverse workforces and with diverse employees seeking supportive employers. Identify and produce resources for both employers and employees to help promote the "business case" for a diverse workforce. Recognize employers that have built a diverse workforce through the Utah Diversity Awards presented annually in conjunction with the Utah chapter of SHRM.**



\_\_\_\_\_  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, Residing in

[SEAL]

\_\_\_\_\_  
County State

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**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. Emma E. Houston Mayor's Office 385-468-7014  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 East Elgin Avenue Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. You Got This! - Interfaith Women 's Conference  
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  
Advisory 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  
416 West 650 South, Vernal, Utah 84078

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)  
*Act reasonably and in good faith. Consider the best interest of the organization and its members. Place the interest of the organization first. Act within the scope of the law. Follow the rules and regulations that apply to the organization.*

\*No actual or potential conflict.

**As a member of the Board of Directors of You Got This Interfaith Women's Conference, I have a the responsibility to ensure that the organization does the best work possible in pursuit of its goals and to interpret the organization's work and values to the community.**



Covered Person's Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, Residing in

[SEAL]

\_\_\_\_\_  
County State

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**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. Emma E. Houston Mayor's Office 385-468-7014  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 East Elgin Avenue Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. KUED - 7 Utah's PBS Station  
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  
Advisory Board Member  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
101 Wasatch Drive - Salt Lake City, Utah 84112  
Address and phone number of the institution, entity, business or person named above

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

D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)  
*Act reasonably and in good faith. Consider the best interest of the organization and its members. Place the interest of the organization first. Act within the scope of the law. Follow the rules and regulations that apply to the organization.*

\*No actual or potential conflict

**Assist KUED-7 to be a community resource that is trusted, valued and essential.**

Emma E Houston  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, Residing in

[SEAL]

\_\_\_\_\_  
County State

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**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. Emma E. Houston Mayor's Office 385-468-7014  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 East Elgin Avenue Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. The HistoryMakers  
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  
1900 S. Michigan Avenue Chicago, Illinois 60616 312-674-1900  
Address and phone number of the institution, entity, business or person named above

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

*Act reasonably and in good faith. Consider the best interest of the organization and its members. Place the interest of the organization first. Act within the scope of the law. Follow the rules and regulations that apply to the organization.*

~~Providing assistance and guidance as requested by and The HistoryMakers organization.~~

~~\*Speaker, presenter, trainer as it relates to creating the recruitment plans for securing local History Makers.~~



Covered Person's Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, Residing in

[SEAL]

\_\_\_\_\_  
County State

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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. Emma E. Houston 801-557-0867  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
908 Elgin Avenue - Salt Lake City, Utah 84106  
Covered Person's County Address/Volunteer's Address

B. Adobe  
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  
Training Consultant  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
3900 Adobe Way - Lehi, Utah 840431  
Address and phone number of the institution, entity, business or person named above

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

\*Providing assistance and guidance as requested by local and national organizations outside of Salt Lake County Government.

\*Speaker, presenter, trainer or consultant for local organizations in developing their strategic plans as they relate to diversity, inclusion, equity, belonging, professional development, networking, etc.

Emma E Houston  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, Residing in

[SEAL] \_\_\_\_\_ County \_\_\_\_\_ State

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**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. Karen Hale Special Initiatives Director 87035  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street N2-100, Salt Lake City, UT 84190  
Covered Person's County Address/Volunteer's Address

B. UVU Center for the Study of Ethics Appomattox Project Advisory Board  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
Board Member  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
UVU, 800 West University Parkway, Orem, UT 84058 (801)863-8888  
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 community board member of the UVU Center for the Study of Ethics Appomattox Project Advisory Board.

The Appomattox Project is a multi-year effort designed to focus on the ethical dimensions of democratic societies, civil discourse, public policy, and the sustainability of shared institutions. The project includes a variety of events and activities including workshops, public lectures, undergraduate research projects, panel discussions, and community engagement..

Salt Lake County has participated in one of the undergraduate research projects, an incarcerated parents survey conducted by UVU undergraduate students at Oxbow Jail.

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

Signed on the 30th day of Jan, 2020  
Date Month Year

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

Karen Hale  
Printed Name

[Signature]  
Signature

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

**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. Karen Hale Special Initiatives Director 87035  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street N2-100, Salt Lake City, UT 84190  
Covered Person's County Address/Volunteer's Address

B. BYU Office of Civic Engagement Leadership External Advisory Board  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
Board Member  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
BYU, 359 SWKT, Provo, UT 84602 (801)422-9755  
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 community board member of the BYU Office of Civic Engagement Leadership External Advisory Board  
  
The mission of the Office of Civic Engagement is to provide students and faculty with the appropriate skills and meaningful opportunities to become engaged in their respective communities. The Office seeks to promote civic service and encourage finding solutions to problems through practical hands-on opportunities.

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

Signed on the 30th day of Jan, 2020,  
Date Month Year

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

Karen Hale  
Printed Name

[Signature]  
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. Karen Hale Special Initiatives Director 87035  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street N2-100, Salt Lake City, UT 84190  
Covered Person's County Address/Volunteer's Address

B. Utah Debate Commission  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
Committee Member  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
Po Box 1654 American Fork, UT 84003 (801)919-6004  
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 community board member of the Utah Debate Commission, a consortium of higher educational institutions, media organizations, and business and civic leaders dedicated to creating a non-partisan and independent system of debates among qualified candidates for statewide and federal offices in Utah during each election cycle.

The purposes of the Utah Debate Commission are to educate voters about viable candidates and their issue positions, promote a civil exchange of ideas among the leading candidates, and elevate the discussion of important issues confronting the State of Utah.

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

Signed on the 30th day of Jan, 2020,  
Date Month Year

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

Karen Hale  
Printed Name

[Signature]  
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. Karen Hale Special Initiatives Director 87035  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street N2-100, Salt Lake City, UT 84190  
Covered Person's County Address/Volunteer's Address

B. PBS 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  
Board Member  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
Dolores Dore Eccles Broadcast Center, U of U, 101 S Wasatch Dr., SLC, UT 84112  
Address and phone number of the institution, entity, business or person named above

- C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
  - I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
  - I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
  - I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
  - I hold a personal interest that creates a potential or actual conflict with my public duties.
  - 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 community board member of PBS Utah, Utah ' s public broadcasting station formerly known as KUED.  
PBS Utah is a valued and trusted community resource that promotes lifelong learning and an engaged, informed citizenry.

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

Signed on the 30th day of Jan, 2020,  
Date Month Year  
at Salt Lake City UT  
City or other location, and state or county

Karen Hale  
Printed Name

[Signature]  
Signature

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**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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A. Karen Hale Special Initiatives Director 87035  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street N2-100, Salt Lake City, UT 84190  
Covered Person's County Address/Volunteer's Address

B. Natural History Museum of Utah Community Advisory Board  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
Board Member  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
301 Wakara Way, Salt Lake City, UT 84108 (801)581-6927  
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 community board member of the Natural History Museum of Utah Advisory Board. The Museum is an institution of science which aims to "illuminate the natural world and the place of humans within it."

The Natural History Museum of Utah is a funded Salt Lake County ZAP Tier I organization.

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

Signed on the 30th day of Jan, 2020,  
Date Month Year

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

Karen Hale  
Printed Name

[Signature]  
Signature

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A. Karen Hale Special Initiatives Director 87035  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street N2-100, Salt Lake City, UT 84190  
Covered Person's County Address/Volunteer's Address

B. Utah Film Center  
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  
50 West Broadway Suite 1125, Salt Lake City, UT 84101 (801)746-7000  
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 board member of Utah Film Center, a 501(c)(3) nonprofit organization, that " utilizes the power of film to educate, inspire and engage diverse audiences to initiate conversation and community building through curated film exhibition, educational programs, and artist support. "

The Utah Film Center is a funded Salt Lake County ZAP Tier I organization.

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

Signed on the 30th day of Jan, 2020,  
Date Month Year

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

Karen Hale  
Printed Name

[Signature]  
Signature

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**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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A. Karen Hale Special Initiatives Director 87035  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 S Sate Street N2-100, Salt Lake City, UT 84190

Covered Person's County Address/Volunteer's Address

B. Envision Utah Board of Directors  
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

254 South 600 East Suite 201, Salt Lake City , UT 84102 (801)303-1450

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 community member of the Utah Tibet Foundation, which helps to support preservation of the Tibetan culture.

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

Signed on the 30th day of Jun, 2020,  
Date Month Year

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

Karen Hale  
Printed Name

[Signature]  
Signature

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**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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A. Karen Hale Special Initiatives Director 87035  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 S Sate Street N2-100, Salt Lake City, UT 84190

Covered Person's County Address/Volunteer's Address

B. Utah Tibetan Foundation  
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

PO Box 171092 Salt Lake City, UT 84117 (801)671-1533

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 community member of the Utah Tibet Foundation, which helps to support preservation of the Tibetan culture.

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

Signed on the 30th day of Jan, 2020,  
Date Month Year

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

Karen Hale  
Printed Name

[Signature]  
Signature

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**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. Karen Hale Special Initiatives Director 87035  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street N2-100, Salt Lake City, UT 84190  
Covered Person's County Address/Volunteer's Address

B. Primary Children's Hospital Community Development Board  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
Board Member  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
100 N Mario Capecchi Dr. Salt Lake City, UT 84113 (801)6621000  
Address and phone number of the institution, entity, business or person named above

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

- I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
- I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
- I hold a personal interest that creates a potential or actual conflict with my public duties.

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

I am a longtime community member of the Primary Children's Hospital Community Development Board, supportive of the board's efforts to fund charity care, research, special programs and therapies.

Primary Children's Hospital is part of Intermountain Healthcare, a not-for-profit health system that provides charitable care. Intermountain defends its exemption from property taxes before the Board of Equalization.

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

Signed on the 30th day of Jan, 2020  
Date Month Year  
at Salt Lake City UT  
City or other location, and state or county

Karen Hale  
Printed Name

[Signature]  
Signature

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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. Karen Hale Special Initiatives Director 87035  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street N2-100, Salt Lake City, UT 84190  
Covered Person's County Address/Volunteer's Address

B. Better Days 2020  
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  
N/A Neylan McBaine (415)246-0368  
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 board member of Better Days 2020, a 501(c)(3) non-profit dedicated to popularizing Utah women ' s history in creative and communal ways. The organization believes that by exploring the legacy of our past, we make Utah a better place for women in the future.

This year the organization will mark the 150th anniversary of Utah being the first place where women voted in the modern nation, and the 100th anniversary of the 19th Amendment, which granted many (but not all) U.S. women the right to vote.

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

Signed on the 30th day of January, 2020,  
Date Month Year  
at Salt Lake City UT  
City or other location, and state or county

Karen Hale  
Printed Name

[Signature]  
Signature

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A. Karen Hale Special Initiatives Director 87035  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street N2-100, Salt Lake City, UT 84190  
Covered Person's County Address/Volunteer's Address

B. Donor Connect  
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
Board Member  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
6065 S Fashion Blvd, Ste 125, 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.)

I am a longtime community board member of Donor Connect (formerly Intermountain Donor Services), the federally designated, nonprofit community organ procurement organization dedicated to the recovery and transplantation of organs and tissues for Utah, southeastern Idaho, western Wyoming, and Elko, Nevada.

The service area encompasses 3.7 million residents, 94 hospitals, and three transplant centers – Primary Children's Hospital, Intermountain Medical Center, University of Utah Hospital (along with the George E. Wahlen Department of Veterans Affairs Medical Center).

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

Signed on the 30th day of January, 2020,  
Date Month Year  
at Salt Lake City UT  
City or other location, and state or county

Karen Hale  
Printed Name  
[Signature]  
Signature

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A. Karen Hale Special Initiatives Director 87035  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2001 South State Street N2-100 , Salt Lake City , UT 84190  
Covered Person's County Address/Volunteer's Address

B. Primary Children's Hospital Board of Trustees  
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  
Trustee  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
100 N Mario Capecchi Dr. Salt Lake City, UT 84113 (801)6621000  
Address and phone number of the institution, entity, business or person named above

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

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

I am a longtime community member of the Primary Children's Hospital Board of Trustees and support the hospital's efforts to serve "the child first and always."  
  
Primary Children's Hospital is part of Intermountain Healthcare, a not-for-profit health system that provides charitable care. Intermountain defends its exemption from property taxes before the Board of Equalization.

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

Signed on the 30th day of Jan, 2020  
Date Month Year  
at Salt Lake City UT  
City or other location, and state or county

Karen Hale  
Printed Name

[Signature]  
Signature

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

**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. Michelle Hicks      Office Administrator      87008  
Covered Person                      Position, or County Division for which you are employed or volunteering                      County/Volunteer's Phone  
2001 South State Street N2-100 SLC, UT 84190  
Covered Person's County Address/Volunteer's Address

B. Syracuse City Youth Court  
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  
Adult Advisor  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
1979 West 1900 South Syracuse, UT 84075  
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.)

Adult Advisory for Syracuse City Youth Court - Meet every Thursday to conduct court for juvenile offenders opting into this program.

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

Signed on the 05 day of February, 2020,  
Date                      Month                      Year

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

Michelle Hicks  
Printed Name

Michelle Hicks

Michelle Hicks (Feb 5, 2020)

**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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A. Michelle Hicks      Office Administrator      87008  
 Covered Person      Position, or County Division for which you are employed or volunteering      County/Volunteer's Phone  
2001 South State Street N2-100  
 Covered Person's County Address/Volunteer's Address

B. Utah Youth Court 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  
Data Manager  
 Covered person's status, relationship or commitment to the institution, entity, business or person named above  
645 South 200 East 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.)*

Data Manager for the Utah Youth Court Association. Go to meetings, update database, correct forms.

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

Signed on the 05 day of February, 2020  
Date      Month      Year

at SLC, UT 84111  
City or other location, and state or county

Michelle Hicks  
Printed Name  
Michelle Hicks

Signature: Michelle Hicks (Feb 5, 2020)

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