


Mayor's Office: Council Agenda Item Request Form
*This form and supporting documents (if applicable) are due the Wednesday
before the COW meeting by noon.*

Date Received (office use)	01/31/18
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Date of Request	01/31/18
Requesting Staff Member	Carlton Christensen
Requested Council Date	02.06.18
Topic/Discussion Title	Disclosure Statements
Description	Attached are the disclosure statements from the following departments/divisions: Transportation, Housing and Economic Development
Requested Action¹	Consent
Presenter(s)	N/A
Time Needed²	<5
Time Sensitive³	No
Specific Time(s)⁴	No
Please attach the supporting documentation you plan to provide for the packets to this form. While not ideal, if supporting documents are not yet ready, you can still submit them by 10 am the Friday morning prior to the COW agenda. Items without documentation may be taken off for consideration at that COW meeting.	

Mayor or Designee approval: _____

¹ What you will ask the Council to do (e.g., discussion only, appropriate money, adopt policy/ordinance) – in specific terms.

² Assumed to be 10 minutes unless otherwise specified.

³ Urgency that the topic to scheduled on the requested date.

⁴ If important to schedule at a specific time, list a few preferred times.

Aimee Winder-Newton
Salt Lake County Council
2001 South State Street
Salt Lake City, UT 84114

Dear Chairwoman Winder-Newton:

Per Countywide Policy #1430, we are submitting the Conflict of Interest Disclosure Forms for the following staff. You will find the completed forms attached.

- Stephanie Gyllenskog
- Jacob Young
- Helen Peters
- Karen Wiley
- Matthew Castillo
- Susan Fox
- John Russell

Respectfully,

Carlton Christensen
Department Director
Transportation, Housing and Economic Development

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. Stephnie Gyllenskog Office of Regional Development 3854684854
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 S State St., Ste S2100
Covered Person's County Address/Volunteer's Address

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

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

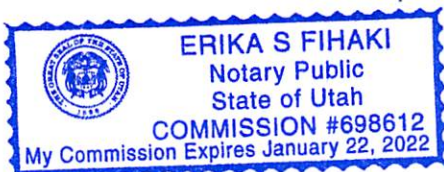
Address and phone number of the institution, entity, business or person named above

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.)*

SUBSCRIBED and SWORN to before me this 26 day of January, 2016



[SEAL]

[Signature]
Covered Person's Signature

[Signature]
NOTARY PUBLIC, Residing in

Salt Lake
County

UT
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

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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. Jacob Young Planner, Regional Development 4358906287
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
239 Ironside Way Farmington UT 84025
Covered Person's County Address/Volunteer's Address

B. Citta Designs 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
Personal consultant company.
Covered person's status, relationship or commitment to the institution, entity, business or person named above
same as above
Address and phone number of the institution, entity, business or person named above

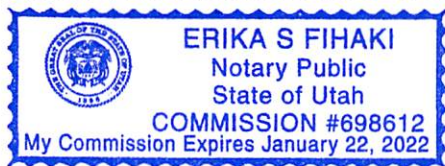
C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:

- ☐ 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.)*

Through Citta Designs I offer design/ planning consulting to cities and developers outside of Salt Lake County.

SUBSCRIBED and SWORN to before me this 26 day of January, 20 18.



[SEAL]

Covered Person's Signature

NOTARY PUBLIC, Residing in

Salt Lake
County

UT
State

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SALT LAKE COUNTY DISCLOSURE STATEMENT

TO: ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS AND EMPLOYEES ("covered persons")

FROM: THE SALT LAKE COUNTY DISTRICT ATTORNEY'S OFFICE

SUBJECT: STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

All Salt Lake County covered persons must understand and follow a Utah law that prohibits, or requires disclosure of, certain actual or potential conflicts of interest between public duties and private interests. The County Officers and Employees Disclosure Act (§§ 17-16a-1, et seq., U.C.A., 1953 as amended) and Salt Lake Countywide Policy 1430 set the following requirements:

PROHIBITED ACTS

A covered person may not:

1. Disclose confidential information acquired by reason of the covered person's official position or use such information to secure special privileges or exemptions for the covered person or others;
2. Use or attempt to use the covered person's official position to secure special privileges for the covered person or for others; or
3. Knowingly receive, accept, take, seek or solicit, directly or indirectly, any gift or loan for the covered person or for another, if the gift or loan tends to influence the covered person in the discharge of his/her official duties.

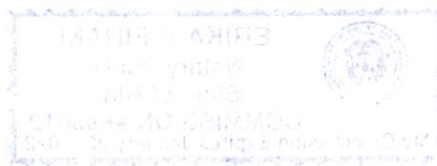
DISCLOSURE REQUIRED

A covered person is required to make a disclosure if he or she:

- A. Receives or agrees to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County;
- B. Is 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;
- C. Is 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;
- D. Holds an investment or other financial interest that creates a potential or actual conflict between the interest and the covered person's public duties; or
- E. Hold some personal interest that creates a potential or actual conflict between the interest and the covered person's public duties.

All written disclosures must be sworn statements containing the information described above and be in a form similar to that on the reverse side of this document. All such statements are public records, open to public inspection. All disclosures must be made as follows: Orally in any meeting of a county agency, board or division where a transaction is discussed involving a matter in which the covered person has an interest, and in writing when the conflict first arises. The general written disclosure must also be filed in January of each year that the outside interest exists. The written disclosure is filed through the covered person's chain of command to the immediate supervisor, volunteer or community liaison, division director, department head or elected official, and county council.

Violation of these provisions may subject the covered person to disciplinary action or criminal prosecution. Any violations will be thoroughly investigated and prosecuted. Please be aware that this document is a shortened and simplified statement of the legal requirements involved in this area. Additional requirements or exceptions may apply. **YOUR CONDUCT WILL BE GOVERNED BY THE LAW, NOT THIS SUMMARY.** Feel free to direct any questions regarding the law's ethical and disclosure requirements to the Civil Division of the Office of the District Attorney.



Revised 10/17

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. Helen Peters Program Manager, Transportation 385-468-4860
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 S State Street, Ste S2-100
Covered Person's County Address/Volunteer's Address

B. Friends of the S-Line
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
2803 Beverly Street, Salt Lake City, Utah 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.

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.)*

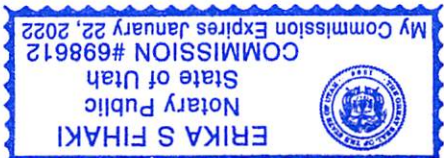
Friends of the S-Line is a 501(c)(3) organization that is currently inactive for 3-4years.

Past activities have included supporting the creation of the SLC greenway, facilitating

informational walks, and supporting research completed by the University of Utah Urban Ecology Program.

Helen Peters
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 26 day of January, 2018.

[SEAL] 

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

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SALT LAKE COUNTY DISCLOSURE STATEMENT

TO: ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS AND EMPLOYEES ("covered persons")

FROM: THE SALT LAKE COUNTY DISTRICT ATTORNEY'S OFFICE

SUBJECT: STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

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1. Disclose confidential information acquired by reason of the covered person's official position or use such information to secure special privileges or exemptions for the covered person or others;
2. Use or attempt to use the covered person's official position to secure special privileges for the covered person or for others; or
3. Knowingly receive, accept, take, seek or solicit, directly or indirectly, any gift or loan for the covered person or for another, if the gift or loan tends to influence the covered person in the discharge of his/her official duties.

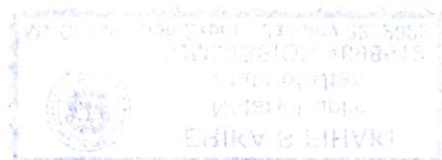
DISCLOSURE REQUIRED

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- C. Is 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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Revised 10/17

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A. Karen Wiley Housing & Community Development 385-468-4870
 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State St., SLC, UT Room S2-100

Covered Person's County Address/Volunteer's Address

B. Elkay Consulting
 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

Co-Owner of Elkay Consulting - see "D" below

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

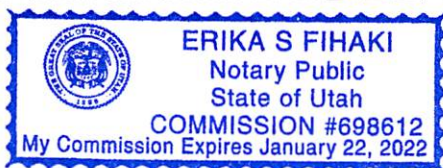
C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:

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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.)*

Provides construction mgt, consulting on building projects, & bldg & const. legal opinions

SUBSCRIBED and SWORN to before me this 26 day of January, 2018.



[SEAL]

Karen E Wiley
 Covered Person's Signature

[Signature]
 NOTARY PUBLIC, Residing in

Salt Lake
 County

UT
 State

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2. Use or attempt to use the covered person's official position to secure special privileges for the covered person or for others; or
3. Knowingly receive, accept, take, seek or solicit, directly or indirectly, any gift or loan for the covered person or for another, if the gift or loan tends to influence the covered person in the discharge of his/her official duties.

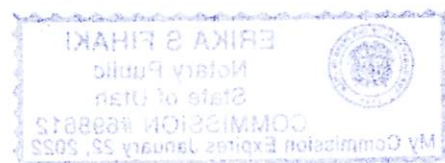
DISCLOSURE REQUIRED

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Revised 10/17

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. Matthew Castillo Assistant Fiscal Manager, Department of Regional Development 385-468-4903

Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

2001 State Street, Suite S2-955, Salt Lake City, UT 84114

Covered Person's County Address/Volunteer's Address

B. Salt Lake City Arts Council 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

54 Finch Lane, Salt Lake City, UT 84102

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.

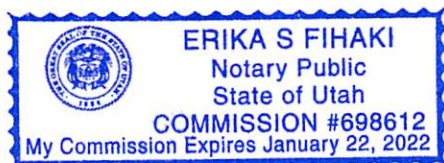
D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. *(This disclosure statement will not be accepted as valid unless this section is completed.)*

Salt Lake City Arts Council Foundation receives ZAP funds.



Covered Person's Signature

SUBSCRIBED and SWORN to before me this 30 day of January, 2018.



[SEAL]



NOTARY PUBLIC, Residing in

Salt Lake
County

UT
State

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A. Matthew Castillo Assistant Fiscal Manager, Department of Regional Development 385-468-4903

Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

2001 State Street, Suite S2-955, Salt Lake City, UT 84114

Covered Person's County Address/Volunteer's Address

B. Equality 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

175 West 200 South, Suite 1004, 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.

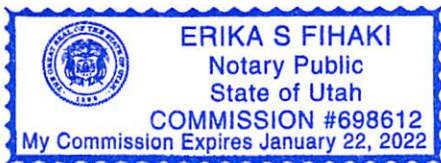
D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. *(This disclosure statement will not be accepted as valid unless this section is completed.)*

Equality Utah works with local governments, including Salt Lake County, to promote regulations that improve the lives of LGBT citizens.



Covered Person's Signature

SUBSCRIBED and SWORN to before me this 30 day of January, 2018.



[SEAL]

NOTARY PUBLIC, Residing in

Salt Lake
County

UT
State

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DISCLOSURE OF PRIVATE BUSINESS INTERESTS (Use one form for each outside business entity, institution, or person involved.)

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 private business interests. (*Type or print all information.*)

A.

Susan Fox	Regional Development	385-468-4889
Covered Person*	Position* or County Division	County Phone

2001 S State Street S2-100

Covered Person's County Address

B.

Salt Lake County Fitness Center
Outside institution, entity, private business or person involved

Volunteer

Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract

Ann Bradshaw 385-468-1789

Outside institution, entity, business or person's address and phone number

C. Describe below the nature of the assistance you are providing to the institution, entity, private business or person named above, or describe the nature of the economic interest or employment you hold in the private business. Also describe the relationship with or transaction between the business, institution, person, etc. and Salt Lake County. Use more sheets if necessary. (*This disclosure statement will not be accepted as valid unless this section is completed.*)


Volunteer Fitness Instructor


Covered Person's Signature

SUBSCRIBED and SWORN to before me this 30 day of January, 2018.



[SEAL]


NOTARY PUBLIC, Residing in

Salt Lake	UT
County	State

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*"Covered person" means any person appointed to any statutory office or position or any other person appointed to any position of employment with Salt Lake County. "Covered person" includes, but is not limited to, persons serving on special, regular or full-time committees, agencies, or boards whether or not such persons are compensated for their services.

**"Position" refers to any Salt Lake County office, appointment, employment, or uncompensated volunteer situation as described in the definition of "covered person."

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. John Russell ORD 84884
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
S2-100

Covered Person's County Address/Volunteer's Address

B. Copper Creek Construction 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

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

863 N 1380 E. Tooele, UT 84074

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:

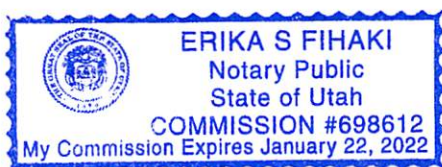
- ☐ I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- ☐ I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- ☒ 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 no conflicts of interest. The license is active but the company is not soliciting business.

John Russell
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 30 day of January, 20 18.



[SEAL]

[Signature]
NOTARY PUBLIC, Residing in
Salt Lake 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.