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	01/31/18
(office use)	

Date of Request	01/31/18
Requesting Staff Member	Darrin Casper
Requested Council Date	02.06.18
Topic/Discussion Title	Disclosure Statements
Description	Attached are the disclosure statements from the following departments/divisions: Mayors Finance Administration
Requested Action ¹	Consent
Presenter(s)	N/A
Time Needed ²	<5
Time Sensitive ³	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.	ρ.
Mayor or Designee approval:	Cun DHVack

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.



BEN MCADAMS Salt Lake County Mayor

MAYOR'S FINANCIAL ADMINISTRATION

DARRIN CASPER
Deputy Mayor/
Chief Financial Officer

SALT LAKE COUNTY GOVERNMENT CENTER • 2001 S. State St., Ste. N4-200 • Salt Lake City, UT 84190

Phone 385-468-7070 Fax 385-468-7071

January 25, 2018

Salt Lake County Council 2001 S State Street N2-200 Salt Lake City, Utah 84114

To Whom it May Concern,

Attached are notarized 2018 Disclosure of Personal or Financial Interest Statements, completed by employees of Mayor's Financial Administration:

Darrin Casper LeAnne Sarver Greg Folta Robby Beesley Diane Spainhower Rod Kitchens Dan Curtis Vardhan Nadkarni

Thank you for your consideration.

Sincerely.

Darrin Casper

Deputy Mayor/Chief Financial Officer

Enclosures:

Salt Lake County Disclosure Statements



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;
- Use or attempt to use the covered person's official position to secure special privileges for the covered person or for others; or
- 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;
- 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.



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.	Darrin Casper Chief Firencial Officer Deputy Mayor x 87075 Covered Person* County Division County Phone County Phone
	2001 S. State St. # N21-200 Sold lake Gity UT 84191 Covered Person's County Address
В.	Outside institution, entity, private business of person involved
	Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract
	Outside institution, entity, business or person's address and phone number
С.	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.)
	Serve as a member of the UPACA board which is charged with acting in the best interests of the Becles Theatre. Durins of the Theater are Sicounty, Sic, and the Sic RPA.
	Covered Person's Signature
SUB	SCRIBED and SWORN to before me this 4 day of January, 20 18.
	SEAL State of Utah Comm. No. 684857 My Comm. Expires Sep 2, 2019 MELANI A. MARTINEZ NOTARY PUBLIC, Residing in Sold Color 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 persists.

^{*&}quot;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.

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



TO: ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS, AND EMPLOYEES (COVERED PERSONS*)

FROM: OFFICE OF THE DISTRICT ATTORNEY FOR SALT LAKE COUNTY
SUBJECT: STATUTORY ETHICAL AND DISCLOSURE REOUIREMENTS

All Salt Lake County covered persons* must be aware of and abide by a Utah law which prohibits, or requires disclosure of certain actual or potential conflicts of interest between public duties and private business interests, if any. The County Officers and Employees Disclosure Act (§§ 17-16a-1, et seq., U.C.A., 1953 as amended) sets the following requirements:

PROHIBITED ACTS:

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 other investment or employment that would reasonably be expected to interfere with the ethical performance of his or her
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- 2. No covered person shall knowingly receive, accept, take, seek or solicit, directly or indirectly, any gift or loan for himor herself or another if: (1) the gift or loan would reasonably tend to influence himor her in the performance of official duties, or (2) the donor has been, is, or may become involved in any official county business. Exceptions to subparagraph (2) are occasional non-money gifts of a value less than \$50.00; public awards; bona fide business loans; or campaign contributions actually used in a political campaign. Paid Salt Lake County officers and employees are prohibited from accepting any gifts of more than nominal value or which violate the Salt Lake County Ethics Code (SLCo. Ordinance sections 2.07.203 through 2.07.207).
- 3. No covered person, acting in a county position, may accept payment for helping a private person or business in any transaction with the county. Payment may be accepted if the transaction is not in the covered person's official capacity and disclosure is made as set forth below.
- 4. A covered person may not be involved with any private business which is regulated by the county, may not be involved in any transaction between their private business interests and the county, and may not be involved in any other actual or potential conflict of interest unless the nature and extent of the private business interest(s) are disclosed as explained below.

DISCLOSURE:

- 1. Any covered person who receives payment for helping a private person or business in a transaction with the county must disclose the payment.
- 2. Any covered person involved in a private business which is subject to county regulation must disclose that involvement. If the regulation is made by the agency or board of which the officer or employee is a member, disclosure must be made at each meeting in which the officer's or employee's business is discussed. Such oral disclosures shall be made part of the minutes of the meeting.
- 3. Any covered person involved with a private business that does or anticipates doing business with the county must disclose that involvement.
- 4. Any covered person who has a personal or business interest of any kind which raises an actual or potential conflict of interest with his or her position must disclose that interest.
- 5. All written disclosures must be sworn statements containing the information required 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. In writing when the conflict first arises. The general written disclosure must also be refiled every January of each year that the outside interest persists. 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.

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

A.	Covered Person* Casper Chief Financial Officer/Deplay Mayor x 87075 Covered Person* County Division County Phone
	2001 S State St. #N4-200 Salt Lake City UT 84114 Covered Person's County Address
В.	Outside institution, entity, private business or person involved
	President of Jat Lake County NMTC, Inc. Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract
	Outside institution, entity, business or person's address and phone number At Lake City UT 54114
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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	Serve as president of all Salt Lake Courty NMTC entities. Entities are formed to act in the best interests of SL courts residents.
	Covered Person's Signature
SUE	SSCRIBED and SWORN to before me this 4 day of January, 20 18.
	MELANI A MARTINEZ NOTARY PUBLIC, Residing in
	State of Utah Comm. No. 684857

My Comm. Expires Sep 2, 2019

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 persists.

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TO:

ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS, AND EMPLOYEES (COVERED PERSONS*)

FROM:

OFFICE OF THE DISTRICT ATTORNEY FOR SALT LAKE COUNTY

SUBJECT:

STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

All Salt Lake County covered persons* must be aware of and abide by a Utah law which prohibits, or requires disclosure of certain actual or potential conflicts of interest between public duties and private business interests, if any. The County Officers and Employees Disclosure Act (§§ 17-16a-1, et seq., U.C.A., 1953 as amended) sets the following requirements:

PROHIBITED ACTS:

- 1. No covered person shall (1) use a County position* for private advantage by revealing confidential, controlled, private or protected information gained through that position, (2) use his or her County position to secure special privileges, or (3) accept other investment or employment that would reasonably be expected to interfere with the ethical performance of his or her public duties.
- 2. No covered person shall knowingly receive, accept, take, seek or solicit, directly or indirectly, any gift or loan for himor herself or another if: (1) the gift or loan would reasonably tend to influence himor her in the performance of official duties, or (2) the donor has been, is, or may become involved in any official county business. Exceptions to subparagraph (2) are occasional non-money gifts of a value less than \$50.00; public awards; bona fide business loans; or campaign contributions actually used in a political campaign. Paid Salt Lake County officers and employees are prohibited from accepting any gifts of more than nominal value or which violate the Salt Lake County Ethics Code (SLCo. Ordinance sections 2.07.203 through 2.07.207).
- 3. No covered person, acting in a county position, may accept payment for helping a private person or business in any transaction with the county. Payment may be accepted if the transaction is not in the covered person's official capacity and disclosure is made as set forth below.
- 4. A covered person may not be involved with any private business which is regulated by the county, may not be involved in any transaction between their private business interests and the county, and may not be involved in any other actual or potential conflict of interest unless the nature and extent of the private business interest(s) are disclosed as explained below.

DISCLOSURE:

- 1. Any covered person who receives payment for helping a private person or business in a transaction with the county must disclose the payment.
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- 4. Any covered person who has a personal or business interest of any kind which raises an actual or potential conflict of interest with his or her position must disclose that interest.
- 5. All written disclosures must be sworn statements containing the information required 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. In writing when the conflict first arises. The general written disclosure must also be refiled every January of each year that the outside interest persists. 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.

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

A.	Davin Casper Chief Financial Officer/Deputy Mayor ×87075 Covered Person* Position* or County Division
	2001 S. State St #N4-200 Salt Lake City UT 84114 Covered Person's County Address
В.	Outside institution, entity, private business or person involved
	President of Jat Lake County NMTC, Inc. Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract
	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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	Serve as President of all NMTC entities. Each entity is established to further the interests of
	Sh Lawby.
	Covered Person's Signature
SUE	BSCRIBED and SWORN to before me this 49 day of January, 2018.
	MELANI A. MARTINEZ Notary Public State of Utah

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 persists.

Salt

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Comm. No. 684857 M. Comm. Expires Sep 2, 2019

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TO: ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS, AND EMPLOYEES (COVERED PERSONS*)

FROM: OFFICE OF THE DISTRICT ATTORNEY FOR SALT LAKE COUNTY
SUBJECT: STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

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A.	Darrin Casper Chief Financial Officer/ Deputy Mayor x 87075 Covered Person* County Division County Phone			
	Covered Person's County Address At 14 N4-200 Salt Lake City UT 84/14			
В.	Outside institution, entity, private business or person involved			
	Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract			
	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.)			
	Carry as Dresided of all SI County NMTC entitles.			
	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.) Sovue as President of all St County NMTC entitles. Each of famed to further the interests. Source Statement will not be accepted as valid unless this section is completed.)			
	SL Courty.			
	L. M.			
	Covered Person's Signature			
SU	SUBSCRIBED and SWORN to before me this 4th day of January, 20 18.			
	MELANI A. MARTINEZ Notary Public NOTARY PUBLIC, Residing in			
	[SEAL] State of Utah Comm. No. 684857 My Comm. Expires Sep 2, 2019 County State			

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Version Date: 3/19/2015

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TO:

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FROM:

OFFICE OF THE DISTRICT ATTORNEY FOR SALT LAKE COUNTY

SUBJECT:

STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

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My Conver. Expires San 2, 2019.

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A.	Davin Casper Chief Financial Officer Deputy Mayor ×8707. Covered Person* County División
	Covered Person's County Address The State St. #N4-200 Sat Lake City UT 8411
В.	Outside institution, entity, private business or person involved
	Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract
	2001 S. State St. # N4-200 Sat Lake City UT 84/1' Outside institution, entity, business or person's address and phone number
С.	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.)
	Serve as President of all Si country NMTZ entitles which are famed to Further the interests of Si Country.
	Covered Person's Signature
SUB	SCRIBED and SWORN to before me this 4 day of 2 anua ry, 20 18.
	[SEAL] MELANI A. MARTINEZ Notary Public State of Utah Comm. No. 684857

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My Comm. Expires Sep 2, 2019

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TO:

ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS, AND EMPLOYEES (COVERED PERSONS*)

FROM:

OFFICE OF THE DISTRICT ATTORNEY FOR SALT LAKE COUNTY

SUBJECT:

STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

All Salt Lake County covered persons* must be aware of and abide by a Utah law which prohibits, or requires disclosure of certain actual or potential conflicts of interest between public duties and private business interests, if any. The County Officers and Employees Disclosure Act (§§ 17-16a-1, et seq., U.C.A., 1953 as amended) sets the following requirements:

PROHIBITED ACTS:

- 1. No covered person shall (1) use a County position* for private advantage by revealing confidential, controlled, private or protected information gained through that position, (2) use his or her County position to secure special privileges, or (3) accept other investment or employment that would reasonably be expected to interfere with the ethical performance of his or her
- 2. No covered person shall knowingly receive, accept, take, seek or solicit, directly or indirectly, any gift or loan for himor herself or another if: (1) the gift or loan would reasonably tend to influence himor her in the performance of official duties, or (2) the donor has been, is, or may become involved in any official county business. Exceptions to subparagraph (2) are occasional non-money gifts of a value less than \$50.00; public awards; bona fide business loans; or campaign contributions actually used in a political campaign. Paid Salt Lake County officers and employees are prohibited from accepting any gifts of more than nominal value or which violate the Salt Lake County Ethics Code (SLCo. Ordinance sections 2.07.203 through 2.07.207).
- 3. No covered person, acting in a county position, may accept payment for helping a private person or business in any transaction with the county. Payment may be accepted if the transaction is not in the covered person's official capacity and disclosure is made as set forth below.
- 4. A covered person may not be involved with any private business which is regulated by the county, may not be involved in any transaction between their private business interests and the county, and may not be involved in any other actual or potential conflict of interest unless the nature and extent of the private business interest(s) are disclosed as explained below.

DISCLOSURE:

- 1. Any covered person who receives payment for helping a private person or business in a transaction with the county must disclose the payment.
- 2. Any covered person involved in a private business which is subject to county regulation must disclose that involvement. If the regulation is made by the agency or board of which the officer or employee is a member, disclosure must be made at each meeting in which the officer's or employee's business is discussed. Such oral disclosures shall be made part of the minutes of the meeting.
- 3. Any covered person involved with a private business that does or anticipates doing business with the county must disclose that involvement.
- 4. Any covered person who has a personal or business interest of any kind which raises an actual or potential conflict of interest with his or her position must disclose that interest.
- 5. All written disclosures must be sworn statements containing the information required 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. In writing when the conflict first arises. The general written disclosure must also be refiled every January of each year that the outside interest persists. 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. Comm. No. 684857

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. YOUR CONDUCT WILL BE GOVERNED BY THE LAW, NOT THIS REVIEW. 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.



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.	Covered Person* Chief Financia Officer Deputy Mayor x 8707 Covered Person* County Division County Phone
	2001 S. State St. # N4-200 Salt Lake City UT 84114 Covered Person's County Address
В.	Outside institution, entity, private business ør person involved
	President of Calt Lake County NMTC, Inc. Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract
	2001 S. State St. #N4-200 Salt Lake City Ut 84114. 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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	Serve as president of all SI courty NMTC entities. Entities are charged with furthering the interests of SI courty.
	Interests of 80 Cooly.
	Covered Person's Signature
SUE	assCRIBED and SWORN to before me this 4 day of January, 2018.
	NOTARY PUBLIC, Residing in

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 persists.

County

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UT

State of Utah

Comm. No. 684857 My Comm. Expires Sep 2, 2019

^{*&}quot;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.

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



TO: ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS, AND EMPLOYEES (COVERED PERSONS*)

FROM: OFFICE OF THE DISTRICT ATTORNEY FOR SALT LAKE COUNTY
SUBJECT: STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

All Salt Lake County covered persons* must be aware of and abide by a Utah law which prohibits, or requires disclosure of certain actual or potential conflicts of interest between public duties and private business interests, if any. The County Officers and Employees Disclosure Act (§§ 17-16a-1, et seq., U.C.A., 1953 as amended) sets the following requirements:

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 protected information gained through that position, (2) use his or her County position to secure special privileges, or (3) accept
 other investment or employment that would reasonably be expected to interfere with the ethical performance of his or her
 public duties.
- 2. No covered person shall knowingly receive, accept, take, seek or solicit, directly or indirectly, any gift or loan for himor herself or another if: (1) the gift or loan would reasonably tend to influence himor her in the performance of official duties, or (2) the donor has been, is, or may become involved in any official county business. Exceptions to subparagraph (2) are occasional non-money gifts of a value less than \$50.00; public awards; bona fide business loans; or campaign contributions actually used in a political campaign. Paid Salt Lake County officers and employees are prohibited from accepting any gifts of more than nominal value or which violate the Salt Lake County Ethics Code (SLCo. Ordinance sections 2.07.203 through 2.07.207).
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- 4. Any covered person who has a personal or business interest of any kind which raises an actual or potential conflict of interest with his or her position must disclose that interest.
- 5. All written disclosures must be sworn statements containing the information required 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. In writing when the conflict first arises. The general written disclosure must also be refiled every January of each year that the outside interest persists. 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. YOUR CONDUCT WILL BE GOVERNED BY THE LAW, NOT THIS REVIEW. 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.



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.	Covered Person* Covered Person* County Division County Division County Phone	3707
	2001 S. State St. # N4-200 Sait Lake City UT 8411 Covered Person's County Address	4
В.	Sat Lake County Health Clinic, U.C. Outside institution, entity, private business or person involved	
	President of Salt Lake County NMTC, Inc. Describe covered person's status, employment or investment in the outside histitution, entity, private business, or personal contract	<u> </u>
	2001 C. State St. #NY-200 Salt Lake City UT 84 Outside institution, entity, business or person's address and phone number	114
C.	Describe below the nature of the assistance you are providing to the institution, entity, private business or person named above, or describe nature of the economic interest or employment you hold in the private business. Also describe the relationship with or transact between the business, institution, person, etc. and Salt Lake County. Use more sheets if necessary. (This disclosure statement will not accepted as valid unless this section is completed.)	ction
	Serve as Precident of SL county NMTC entities which are formed to further the interests of SL county.	
	SL Conty.	
	Covered Person's Signature	
SUE	SCRIBED and SWORN to before me this LPH day of January, 20 18.	
	MELANI A. MARTINEZ Notary Public State of Utah Comm. No. 884857	h.

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 persists.

County

*"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.

State

My Comm. Expires Sep 2, 2019

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TO:

ALL SALT LAKE COUNTY OFFICERS, VOLUNTEERS, BOARD MEMBERS, AND EMPLOYEES (COVERED PERSONS*)

FROM: SUBJECT: OFFICE OF THE DISTRICT ATTORNEY FOR SALT LAKE COUNTY STATUTORY ETHICAL AND DISCLOSURE REQUIREMENTS

All Salt Lake County covered persons* must be aware of and abide by a Utah law which prohibits, or requires disclosure of certain actual or potential conflicts of interest between public duties and private business interests, if any. The County Officers and Employees Disclosure Act (§§ 17-16a-1, et seq., U.C.A., 1953 as amended) sets the following requirements:

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

Un un	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)
Α.	LeAnne M Sarver - Associate Accounting Administrator - Mayor Finance 385-468-7113 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
3.	Covered Person's County Address/Volunteer's Address Sarver Project Controls, 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
	Covered person's status, relationship or commitment to the institution, entity, business or person named above 1737 E Sunrix Meadow Dr Sandy UT 84093 Address and phone number of the institution, entity, business or person named above
ζ.	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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	Sarver Prairect controls does Project Management for Construction Prairects.
	Covered Person's Signature
SU	UBSCRIBED and SWORN to before me this 23 day of JAYVAY , 2019.
ſS	ANTIGONE CARLSON Notary Public State of Utah My Commission Expires on: May 27, 2020 Comm. Number: 688787 ANTIGONE CARLSON NOTARY PUBLIC, Residing in Substituting the Community of the Community of the 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 refiled every January, as long as the potential conflict exists.

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ANTIGONE CARLSON
Notery Public State of Utah
My Commission Expires on
May 27, 2020
Comm, Number: 698767

(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.) en N4-200 Salt Lake County Covernment Cen Covered Person's County Address/Volunteer's Address B. Salt Lake County NMTC, Inc. and associated LLC's
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.) Registered Agent for all Salt Lake County NMTC entities which are formed to further the interests of Salt Lake County. SUBSCRIBED and SWORN to before me this 24 day of _ ANTIGONE CARLSON Notary Public State of Utah May 27, 2020 [SEAL] Comm. Number: 688787

(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.	Robby R. Beesley	Accountant, Mayor's Financial Adm	inistration	385-468-7105
	Covered Person	Position, or County Division for w	hich you are employed or volunteering	County/Volunteer's Phone
	N4-202			
	Covered Person's Cou	inty Address/Volunteer's Address		
В	R&M Beesley Proper	ties, LLC		
Б.		tity, private business or person in which	h the Covered Person has a personal or bus	iness interest for which disclosure
	Owner			
	Covered person's statu	is, relationship or commitment to the ir	nstitution, entity, business or person named	above
	Business Address: 21:	59 W Hugoton Cir., Taylorsville, UT 8	4129 801-809-8712	
	Address and phone nur	mber of the institution, entity, business	or person named above	
C.	Select the category th	nat applies to yourself and the outside in	nstitution, entity, business or person identif	ied in subsection (B) above:
	I receive or have	agreed to receive compensation for ass	isting a person or business entity in a transa	ction involving Salt Lake County.
	Salt Lake County	y.	of a substantial interest in a business entity	
	with Salt Lake C	County.	substantial interest in a business entity that	
		nent or other financial interest that creat interest that creates a potential or actu	tes a potential or actual conflict with my pu al conflict with my public duties.	ablic duties.
D.			of interest identified above, i.e., the nature ary. (This disclosure statement will not be a	
	Although the propert	ties contained in this LLC are located in within the boundaries of Salt Lake Cou	n Duchesne County and Oklahoma, I use m inty. Therefore, the business is subject to co	ny home address as the business address. ertain regulations of Salt Lake County.
			Rolling Basley	
			Covered Person's Signature	
		acd		
SU	BSCRIBED and SWOI	RN to before me this 23 day of	January - ,20/18	
			Tilemyl Sc	
	Second .	LeAnne M Sarver	NOTARY PUBLIC, Residing in	
		NOTARY PUBLIC - STATE OF UTAH My Comm. Exp. 09/15/2019 Commission # 685040	Saltlake	GT
[SE	EAL]	Commission # 685040	County	State

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	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	N4-202		
	Covered Person's Cour	nty Address/Volunteer's Address	
В.	Kearns Beesley Proper		
	is required in the above	tity, private business or person in which the Covered Person has a personal or le section	business interest for which disclosure
	Owner		
	3.5	s, relationship or commitment to the institution, entity, business or person nan	
		25 S 4775 West, Kearns, UT 84118, Business Address: 2159 W Hugoton Cir., mber of the institution, entity, business or person named above	<u>Taylorsville</u> , <u>UT 84129 801-809-87</u> 12
C.	Select the category that	at applies to yourself and the outside institution, entity, business or person idea	ntified in subsection (B) above:
	I receive or have	agreed to receive compensation for assisting a person or business entity in a tra	nsaction involving Salt Lake County.
	X I am an officer, d Salt Lake County	lirector, agent, employee or the owner of a substantial interest in a business ent	tity that is subject to the regulation of
		irector, agent, employee or owner of a substantial interest in a business entity tl	hat does or anticipates doing business
	I hold an investm	nent or other financial interest that creates a potential or actual conflict with my interest that creates a potential or actual conflict with my public duties.	y public duties.
			Manager and State on the color of the file
Э.		ption of the actual or potential conflicts of interest identified above, i.e., the nat the County. Use more sheets if necessary. (<i>This disclosure statement will not</i>	
		is property, which is located within the boundaries of Salt Lake County. There	efore, it is subject to the regulation of Sa
		ON OB DO	
		Covered Person's Signature	
		72/9	
SU	BSCRIBED and SWOR	RN to before me this 23 day of Chuay , 20	0
	10	Anne M Sarver Zelbunde	Ja
	MOTARY	NOTARY PUBLIC, Residing in	1 4
0.	Cor	mmission # 685040 SGITLAKE	ut
SE	EAL]	County	State

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	Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone			
	N4-202					
		unty Address/Volunteer's Address				
R	West Valley Beesley	Properties, LLC				
٥.	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 stat	tus, relationship or commitment to the institution, entity, business or person named	l above			
Ph	vsical Address: 3617 V	W Larry Cir., West Valley City, UT 84118, Business Address: 2159 W Hugoton C	Cir., Taylorsville, UT 84129 801-809-87			
•		umber of the institution, entity, business or person named above				
2.	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.					
	X 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.					
O.	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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)					
	I own and rent out this property, which is located within the boundaries of Salt Lake County. Therefore, it is subject to the regulation of Salt Lake County.					
		Ref R Busley				
		Covered Person's Signature				
SU)	BSCRIBED and SWO	ORN to before me this 23 day of January , 2018	<u> </u>			
		X Christ C				
	A CONTRACTOR AND A STATE OF THE PARTY OF THE	PARTY PUBLIC, Residing in NOTARY PUBLIC, Residing in	1			
-	《安理》 My C	Comm. Exp. 09/15/2019 Commission # 685040	<u> </u>			
SE	AIII C	APTH 11331UTT # UDDU4U 1 (County	State			

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Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone Zool S. State St. NY-200, SLC. Ut. 84114 Covered Person's County Address/Volunteer's Address B. Private 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 Covered person's status, relationship or commitment to the institution, entity, business or person named above Diane Spainhower, 6675, 630 West, Murray, VH 84123
Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. 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 preform sheepdog demonstrations at Wheeler Farm in exchange I am allowed to use the sheep at Wheeler Farm to practice with my dogs. SUBSCRIBED and SWORN to before me this 24th day of January LeAnne M Sarver PUBLIC, Residing in OTARY PUBLIC - STATE OF UTAM State [SEAL]

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 refiled every January, as long as the potential conflict exists.

(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.	Rodney Kitchens	Director, Budget & Planning		385-468-7084			
	Covered Person		hich you are employed or volunteering	County/Volunteer's Phone			
	2001 S State Street, #N4-200, Salt Lake City, UT 84190						
		nty Address/Volunteer's Address		The results of the result of			
В.							
	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section						
	Member of the Board	A TENNE OF THE STATE OF THE STA		V 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	Covered person's status, relationship or commitment to the institution, entity, business or person named above						
	3007 S State St, Salt Lake City, UT 84115 801-466-3906						
	Address and phone nun	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.						
	X 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 descripentity or person with t section is completed.)	the County. Use more sheets if necessar	s of interest identified above, i.e., the nature ary. (This disclosure statement will not be a	of the relationship of each busines accepted as valid unless this			
	business is regulated residential property.	by Salt Lake County and I am on the I There has not been any business with interest is extremely remote. Also, my	der the requirement to list any potential cor Board of Directors. The business activity is Salt Lake County in the past, none is antic position at the County is not related to the	s leasing commercial and ipated in the future, and any			
			John A off				
			Covered Person's Signature				
SU	JBSCRIBED and SWOF	RN to before me this <u>24</u> day of	Lanuary 2018	กั			
		LoAmer III C	Homey	<u></u>			
		LeAnne M Sarver	NOTARY PUBLIC, Residing in	1—			
	M	ly Comm. Exp. 09/15/2019 Commission # 685040	Saltlake	N			
15	FAI1		County	State			



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
- 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.



(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.	Daniel J Curtis	Budget Analyst Salt Lake County 1		385-468-7106	
	Covered Person	Position, or County Division for w	hich you are employed or volunteering	County/Volunteer's Phone	
		N4 200 Salt Lake City, UT 84190-000	01		
	Covered Person's County Address/Volunteer's Address				
В.	C & C Ballet Academy				
	Outside institution, enti is required in the above		n the Covered Person has a personal or busi	ness interest for which disclosure	
	Part Owner				
	Covered person's status, relationship or commitment to the institution, entity, business or person named above				
			801-254-0112		
	Address and phone num	ber 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.				
	X 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.				
			tes a potential or actual conflict with my pu	blic duties.	
	I hold a personal i	interest that creates a potential or actual	al conflict with my public duties.		
D.			of interest identified above, i.e., the nature ary. (This disclosure statement will not be a		
	My wife operates a dance studio in the City of South Jordan, under the name C & C Ballet Academy LLC. I am disclosing this because I am listed as a part owner of the above mentioned company that is regulated by Salt Lake County. C & C Ballet Academy LLC. also owns the building (at address listed above) where dance classes are held. The potential for conflict of interest is remote as chance of C & C Ballet Academy LLC. doing business with Salt Lake County is remote.				
			De Il Cunt	1 -	
			Covered Person's Skinature		
		211	.)		
SU	BSCRIBED and SWOR	N to before me this <u>24</u> day of_	January 2018	,	
			4(Cum)		
	NOTA	eAnne M Sarver	NOTARY PUBLIC, Residing in		
	MV C	Comm. Exp. 09/15/2019 commission # 685040	Saltlake	47	
[SI	EAL]	Griffinssion # 005040	County	State	

(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. Vardhan Nadkarni 350 5600 E AP+ #321 5LC UT 84102

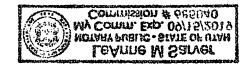
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone Covered Person's County Address/Volunteer's Address Right at Home
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure Caregiver for individuals on hospite care.

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

535 & 4500 S Sure D210 SLC UT 84107 8017580630

Address and phone number of the institution, entity, business or person named above is required in the above section 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, employed 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.) Covered Person's Signature SUBSCRIBED and SWORN to before me this 25 Commission # 685040 My Comm. Exp. 09/15/2019 HATU 30 STATE - SLIBUG YRATON **LeAnne M Sarver**

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 refiled every January, as long as the potential conflict exists.



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