

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.

Anna F Gallagher	Collections Division Administrator (Treasurer's Office)	385.468.8309
Covered Person*	Position* or County Division	County Phone

2001 S State, Gov't Center N1-200, SLC, UT 84114-4575
Covered Person's County Address

B.


Alta Canyon Baptist Church
Outside institution, entity, private business or person involved

Assistant Financial Secretary (volunteer)
Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract

11194 S 1000 E Sandy, UT 801.572.0747
Outside institution, entity, business or person's address and phone number

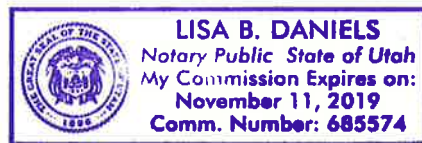
C. Describe below the nature of the assistance you are providing to the institution, entity, private business or person named above, or describe the nature of the economic interest or employment you hold in the private business. Also describe the relationship with or transaction between the business, 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.)*


As a volunteer, I sign checks, make bank deposits, and count offerings.


Covered Person's Signature

SUBSCRIBED and SWORN to before me this 25 day of January, 2018.

[SEAL]



	
NOTARY PUBLIC, Residing in	
<u>Davis</u>	<u>UT</u>
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.

*"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.

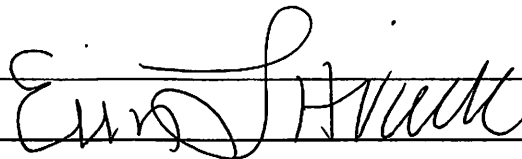
*"Position" refers to any Salt Lake County office, appointment, employment, or uncompensated volunteer situation as described in the definition of "covered person."

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
--------------------------------------	-----------------

Date of Request	01/31/18
Requesting Staff Member	Karen Hale
Requested Council Date	02.06.18
Topic/Discussion Title	Disclosure Statements
Description	Attached are the disclosure statements from the following departments/divisions: Mayors Office/Administration
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.



Ben McAdams
Salt Lake County Mayor

Erin Litvack
Deputy Mayor, County Services

Rick Graham
Deputy Mayor, Operations

Karen Hale
Deputy Mayor, Community
& External Affairs

Darrin Casper
Deputy Mayor, Finance
& Administration

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.

- Karen Hale
- Anne Dayton
- J. Janell Fluckiger
- Rick Graham
- Emma E. Houston
- Ze Min Xiao
- Anna Vukin-Chow
- Justin Stewart
- Ben McAdams
- Kim Barnett
- Joseph Mbuga
- Carly Lansche
- Erin Litvack

Respectfully,

A handwritten signature in black ink, appearing to read 'Erin Litvack', written over a horizontal line.

Erin Litvack, Deputy Mayor
Salt Lake County Mayor's Office



Ben McAdams
Salt Lake County Mayor

Erin Litvack
Deputy Mayor, County Services

Rick Graham
Deputy Mayor, Operations

Karen Hale
Deputy Mayor, Community
& External Affairs

Darrin Casper
Deputy Mayor, Finance
& Administration

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.

- Karen Hale
- Anne Dayton
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- Rick Graham
- Emma E. Houston
- Ze Min Xiao
- Anna Vukin-Chow
- Justin Stewart
- Ben McAdams
- Kim Barnett
- Joseph Mbuga
- Carly Lansche

Respectfully,

A handwritten signature in black ink, appearing to read 'Erin Litvack', written over a horizontal line.

Erin Litvack, Deputy Mayor
Salt Lake County Mayor's Office

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

A. Karen Hale Deputy Mayor 385-468-7035
 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2431 Lynwood Dr, Salt Lake City, UT 84109

Covered Person's County Address/Volunteer's Address

B. Intermountain Healthcare Board of Trustees

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

Trustee

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

IHC, 36 S. State St Salt Lake City 84111 (801)-442-2000

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.)*

Trustees set policy, create goals and evaluate management's performance.

SUBSCRIBED and SWORN to before me this 31 day of January, 2018.



[SEAL]

[Signature]
 Covered Person's Signature

[Signature]
 NOTARY PUBLIC, Residing in

DAVIS
 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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A. **Karen Hale** **Deputy Mayor** **385-468-7035**
 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2431 Lynwood Dr, Salt Lake City, UT 84109

Covered Person's County Address/Volunteer's Address

B. **Envision Utah Board of Directors**

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

Board Member

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

254 South 600 East, Suite 201 SLC, UT 84102 (801) 303-1450

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

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

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

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.)*

Board Member

Covered Person's Signature

SUBSCRIBED and SWORN to before me this 31 day of January, 2018.



[SEAL]

NOTARY PUBLIC, Residing in

DAVIS
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A. Karen Hale Deputy Mayor 385-468-7035
 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2431 Lynwood Dr, Salt Lake City, UT 84109

Covered Person's County Address/Volunteer's Address

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

Board Member

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

50 West Broadway Suite 1125, SLC, UT 84101 (801) 746-7000

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

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

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


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.)*

Board Member

SUBSCRIBED and SWORN to before me this 31 day of January, 2018.

[Signature]
 Covered Person's Signature

[Signature]
 NOTARY PUBLIC, Residing in
DAVIS UT
 County State

[SEAL] 

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A. Karen Hale Deputy Mayor 385-468-7035
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2431 Lynwood Dr, Salt Lake City, UT 84109

Covered Person's County Address/Volunteer's Address

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

Board Member

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

PO Box 171092 SLC, Ut 84117 (801) 671-1533

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

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

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

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.)*

Board Member

[Signature]
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 31 day of January, 2018.



[SEAL]

[Signature]
NOTARY PUBLIC, Residing in
DAVIS UT
County State

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A. Karen Hale Deputy Mayor 385-468-7035
 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2431 Lynwood Dr, Salt Lake City, UT 84109

Covered Person's County Address/Volunteer's Address

B. Natural History Museum of Utah Community Relations Board
 Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Board Member

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

301 Wakara Way, SLC, UT 84108 (801) 581-6927

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

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

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

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.)*

Board Member

[Signature]
 Covered Person's Signature

SUBSCRIBED and SWORN to before me this 31 day of January, 2018.



[SEAL]

[Signature]
 NOTARY PUBLIC, Residing in

DAVIS UT
 County State

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A. Karen Hale Deputy Mayor 385-468-7035
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2431 Lynwood Dr, Salt Lake City, UT 84109

Covered Person's County Address/Volunteer's Address

B. Utah Debate Commission Executive Committee
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Committee Member

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

PO Box 1654 American Fork, Utah 84003 (801) 919-6004

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

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

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

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.)*

Committee Member

[Signature]
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 31 day of January, 2018.



[SEAL]

[Signature]
NOTARY PUBLIC, Residing in
DAVIS UT
County State

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DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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A. Karen Hale Deputy Mayor 385-468-7035
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2431 Lynwood Dr, Salt Lake City, UT 84109

Covered Person's County Address/Volunteer's Address

B. Intermountain Donor Services Medical Advisory Board
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Board Member

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

30 South 500 East, #490 SLC, UT 84102 (801) 521-17558

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.)*

Advisory Board Member

SUBSCRIBED and SWORN to before me this 31 day of January, 2018



[SEAL]

[Signature]
Covered Person's Signature

[Signature]
NOTARY PUBLIC, Residing in

DAVIS
County

UT
State

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A. Karen Hale Deputy Mayor 385-468-7035
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2431 Lynwood Dr, Salt Lake City, UT 84109

Covered Person's County Address/Volunteer's Address

B. Visit Salt Lake Executive Committee
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Board Member

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

VSL, 90 South West Temple, SLC, UT 84101 (801) 534-4900

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.
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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.)*

Board Member

Karen Hale
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 31 day of January, 2018.



Michelle Hicks
NOTARY PUBLIC, Residing in

DAVIS
County

UT
State

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A. Karen Hale Deputy Mayor 385-468-7035
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2431 Lynwood Dr, Salt Lake City, UT 84109
Covered Person's County Address/Volunteer's Address


B. KUED Advisory Board
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Board Member
Covered person's status, relationship or commitment to the institution, entity, business or person named above
KUED, Dolores Dore Eccles Broadcast Center, The U of U, 101 S Wasatch Dr, 84112 (801)-581-7777
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.
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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.)*

Board Member

SUBSCRIBED and SWORN to before me this 31 day of January, 2018
[Signature]
Covered Person's Signature
[Signature]
NOTARY PUBLIC, Residing in
DAVIS UT
County State
[SEAL] 

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A. Karen Hale Deputy Mayor 385-468-7035
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2431 Lynwood Dr, Salt Lake City, UT 84109

Covered Person's County Address/Volunteer's Address

B. Primary Children's Hospital Community Development Board
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Board Member

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

100 N Mario Capecchi Dr., Salt Lake City, UT 84113 (801)662-1000


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.)*

Board Member

SUBSCRIBED and SWORN to before me this 31 day of January, 2018
Covered Person's Signature

[SEAL] NOTARY PUBLIC, Residing in DAVIS UT
County State

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

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

A. Karen Hale Deputy Mayor 385-468-7035
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2431 Lynwood Dr, Salt Lake City, UT 84109

Covered Person's County Address/Volunteer's Address

B. Primary Children's Hospital Board of Trustees
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Trustee

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

100 N Mario Capecchi Dr., Salt Lake City, UT 84113 (801)662-1000

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.)*

Trustee

SUBSCRIBED and SWORN to before me this 31 day of January, 2018



[SEAL]

[Signature]
Covered Person's Signature

[Signature]
NOTARY PUBLIC, Residing in

DAVIS
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

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

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

A. Karen Hale Deputy Mayor 385-468-7035
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2431 Lynwood Dr, Salt Lake City, UT 84109

Covered Person's County Address/Volunteer's Address

B. Intermountain Community Care 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

36 South State St., 23rd Floor SLC, UT 84111 (801) 442-2863

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.)*

Board Member

SUBSCRIBED and SWORN to before me this 31 day of January, 2018



[SEAL]

[Signature]
Covered Person's Signature

[Signature]
NOTARY PUBLIC, Residing in

DAVIS
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

(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. Anne Dayton Continuum of Care Management Analyst, Mayor's Admin 8-7142
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

2001 South State Street, Suite N4-930

Covered Person's County Address/Volunteer's Address

B. Salt Lake City Arts Council

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

Board Member

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

54 Finch Lane (1340 East 100 South), 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.)*

The Salt Lake City Arts Council receives County ZAP funding.

Anne Dayton
Covered Person's Signature

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



[SEAL]

Leah Davis
NOTARY PUBLIC, Residing in

DAVIS
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.



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

(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. J. Jamell Fluckiger Special Projects (801) 864-5860
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

N4930
Covered Person's County Address/Volunteer's Address

B. Housing Authority of the County of Salt Lake
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

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

3595 Main St. SLC, UT 84115
Address and phone number of the institution, entity, business or person named above

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

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

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

Serve as a board member for the County Housing Authority, which accepts County funding + partners with the County on projects, including potential real estate acquisition, property development + project mnngt.

[Signature]
Covered Person's Signature

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



[SEAL]

[Signature]
NOTARY PUBLIC, Residing in

DAVIS
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.



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.

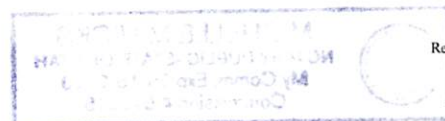
DISCLOSURE REQUIRED

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

(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. Richard Graham Deputy Mayor - COO 385-468-7054
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State Street, SLC, Utah 84114 N2-100
Covered Person's County Address/Volunteer's Address

B. Reaching Out World Wide (Non-Profit 501-C3)
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

Director - Member of the Board
Covered person's status, relationship or commitment to the institution, entity, business or person named above
1039 South 1200 East SLC, Utah 84105 801-583-3843
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 Salt Lake City Business License
- ☐ 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.)

No conflict. This is a family operated 501-C3 non-profit organization that performs humanitarian service work in Salt Lake City, Philippines and Thailand. I receive no compensation. The organization operates under a SLC business license and under State of Utah non-profit licensing. I am a Board Director with my family members.

Richard Graham
Covered Person's Signature

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



[SEAL]

Michelle
NOTARY PUBLIC, Residing in
DAVIS 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.

Commissioner of the
My Comm. Exp. Date
NOTARY PUBLIC - STATE OF
MICHELLE M. HORN

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

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

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

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

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

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

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

Emma E. Houston
Covered Person's Signature

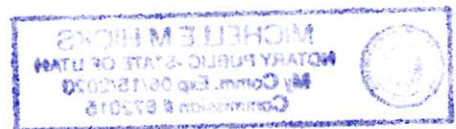
SUBSCRIBED and SWORN to before me this 9 day of January, 2018.



[SEAL]

Michelle Davis
NOTARY PUBLIC, Residing in
DAVIS
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

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

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

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

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

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

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

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

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

Emma E Houston

Covered Person's Signature

SUBSCRIBED and SWORN to before me this 9th day of January, 2018.



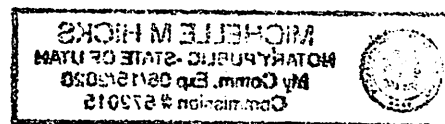
[SEAL]

Michelle Davis
NOTARY PUBLIC, Residing in

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

B. The HistoryMakers
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Board Member
Covered person's status, relationship or commitment to the institution, entity, business or person named above
1900 S. Michigan Avenue Chicago, Illinois 60616 312-674-1900
Address and phone number of the institution, entity, business or person named above

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

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

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

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

Emma E Houston
Covered Person's Signature

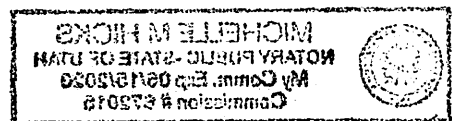
SUBSCRIBED and SWORN to before me this 9 day of January, 2018.



[SEAL]

Utah
NOTARY PUBLIC, Residing in
DAVIS UT
County State

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



DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

B. Huntsman Cancer Institute
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Advocate Spokesperson
Covered person's status, relationship or commitment to the institution, entity, business or person named above
2000 Circle of Hope Salt Lake City, Utah 84112
Address and phone number of the institution, entity, business or person named above

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

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

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

Volunteer advocate and spokesperson for Huntsman Cancer Foundation

Emma E. Houston
Covered Person's Signature

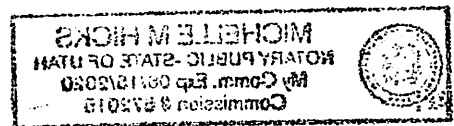
SUBSCRIBED and SWORN to before me this 9 day of January, 2018.



[SEAL]

Michelle Hicks
NOTARY PUBLIC, Residing in
DAVIS UT
County State

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



DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

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

B. Utah Martin Luther King Commission
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Board Member
Covered person's status, relationship or commitment to the institution, entity, business or person named above
Salt Lake City, Utah 84111
Address and phone number of the institution, entity, business or person named above

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

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

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

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

Emma E. Houston
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 9 day of January, 2018



Utah
NOTARY PUBLIC Residing in

DAVIS
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

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

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

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

B. Anne Stirba Cancer Foundation
 Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Advocate Spokesperson
 Covered person's status, relationship or commitment to the institution, entity, business or person named above
215 South State Street #750 Salt Lake City, Utah 84111 801-364-8300
 Address and phone number of the institution, entity, business or person named above

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

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

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

Volunteer advocate and spokesperson for Judges Run for Anne Stirba Cancer Foundation and Night off from Cancer Celebration.

Emma E. Houston
 Covered Person's Signature

SUBSCRIBED and SWORN to before me this 9 day of January, 2018.



[SEAL]

Michelle M. Hicks
 NOTARY PUBLIC, Residing in
DAVIS UT
 County State

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

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

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

B. Pastor France A. Davis Scholarship Foundation
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Development Director
Covered person's status, relationship or commitment to the institution, entity, business or person named above
1090 South State Street Salt Lake City, Utah 84127 801-355-1025
Address and phone number of the institution, entity, business or person named above

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

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

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

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

SUBSCRIBED and SWORN to before me this 9 day of January, 2018.

Emma E. Houston
Covered Person's Signature

Michelle M. Hicks
NOTARY PUBLIC, Residing in

DAVIS
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

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

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

A. Ze Min Xiao Director, Mayor's Office for New Americans 3854684861
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State Street, N1-100, Salt Lake City, Utah 84118
Covered Person's County Address/Volunteer's Address

B. Utah Asian Chamber of Commerce
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
Covered person's status, relationship or commitment to the institution, entity, business or person named above
PO Box 3178, Salt Lake City, Utah 84110
Address and phone number of the institution, entity, business or person named above

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

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


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

I am a founding member of this organization and current seats on the board.

SUBSCRIBED and SWORN to before me this 20 day of January, 2018

[Signature]
Covered Person's Signature

[Signature]
NOTARY PUBLIC, Residing in
Davis UT
County 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 re-filed every January, as long as the potential conflict exists.

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

A. Ze Min Xiao Director, Mayor's Office for New Americans 3854684861
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State Street, N1-100, Salt Lake City, Utah 84118
Covered Person's County Address/Volunteer's Address

B. Utah Asian Charitable Foundation
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Member of the Board
Covered person's status, relationship or commitment to the institution, entity, business or person named above
PO Box 3178, Salt Lake City, Utah 84110
Address and phone number of the institution, entity, business or person named above

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

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

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

I am a founding member of this organization and current serves as a member of the Executive Committee.

SUBSCRIBED and SWORN to before me this 24 day of January, 2018
Covered Person's Signature
Michelle M Hicks
NOTARY PUBLIC, Residing in Lithia
DAVIS VT
County 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 re-filed every January, as long as the potential conflict exists.

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

A. Ze Min Xiao Director, Mayor's Office for New Americans 3854684861
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State Street, N1-100, Salt Lake City, Utah 84118
Covered Person's County Address/Volunteer's Address

B. Zions Bank
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Community Advisory Board
Covered person's status, relationship or commitment to the institution, entity, business or person named above
1 Main Street, Salt Lake City, Utah 84133
Address and phone number of the institution, entity, business or person named above

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

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


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

I am a member of the advisory committee

SUBSCRIBED and SWORN to before me this 29 day of January, 2018.

[Signature]
Covered Person's Signature

[Signature]
NOTARY PUBLIC, Residing in DAVIS State UT


[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 re-filed every January, as long as the potential conflict exists.

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

A. Ze Min Xiao Director, Mayor's Office for New Americans 3854684861
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State Street, N1-100, Salt Lake City, Utah 84118
Covered Person's County Address/Volunteer's Address

B. State of 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
Commissioner, Governor's multicultural commission
Covered person's status, relationship or commitment to the institution, entity, business or person named above
350 UT-186, Salt Lake City, Utah 84114
Address and phone number of the institution, entity, business or person named above

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

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


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

I am a member of the commission

SUBSCRIBED and SWORN to before me this 29 day of January, 2018.

[Signature]
Covered Person's Signature

[Signature]
NOTARY PUBLIC, Residing in
DAVIS UT
County 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 re-filed every January, as long as the potential conflict exists.

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

A. Ze Min Xiao Director, Mayor's Office for New Americans 3854684861
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State Street, N1-100, Salt Lake City, Utah 84118
Covered Person's County Address/Volunteer's Address

B. State of 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
Member, State of Utah Refugee Advisory Committee
Covered person's status, relationship or commitment to the institution, entity, business or person named above
350 UT-186, Salt Lake City, Utah 84114
Address and phone number of the institution, entity, business or person named above

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

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

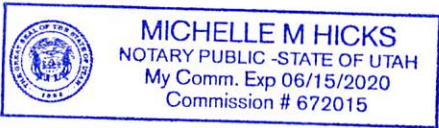
D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. *(This disclosure statement will not be accepted as valid unless this section is completed.)*

I am a member of the board.

SUBSCRIBED and SWORN to before me this 20 day of January, 2018.

[Signature]
Covered Person's Signature

[Signature]
NOTARY PUBLIC, Residing in DAVIS State UT


[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 re-filed every January, as long as the potential conflict exists.

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

A. Ze Min Xiao Director, Mayor's Office for New Americans 3854684861
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State Street, N1-100, Salt Lake City, Utah 84118
Covered Person's County Address/Volunteer's Address

B. Children's Center
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Member of the Board
Covered person's status, relationship or commitment to the institution, entity, business or person named above
350 South 400 East, Salt Lake City, Utah 84101
Address and phone number of the institution, entity, business or person named above

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

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


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

I am a member of the board.

SUBSCRIBED and SWORN to before me this 24 day of January, 2018.

[Signature]
Covered Person's Signature

[Signature]
NOTARY PUBLIC, Residing in
DAVIS UT
County 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 re-filed every January, as long as the potential conflict exists.

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

A. Ze Min Xiao Director, Mayor's Office for New Americans 3854684861
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State Street, N1-100, Salt Lake City, Utah 84118
Covered Person's County Address/Volunteer's Address

B. Salt Lake Community College
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Instructor
Covered person's status, relationship or commitment to the institution, entity, business or person named above
4600 South Redwood Road, SLC, Utah 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.


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

*I am a adjunct instructor and teaches
one class for SLCC.*

SUBSCRIBED and SWORN to before me this 21 day of January, 2018

[Signature]
Covered Person's Signature

[Signature]
NOTARY PUBLIC, Residing in
DAVIS UT
County 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 re-filed every January, as long as the potential conflict exists.

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

A. Ze Min Xiao Director, Mayor's Office for New Americans 3854684861
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State Street, N1-100, Salt Lake City, Utah 84118
Covered Person's County Address/Volunteer's Address

B. Chinese Railroad Workers Descendants Association
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Board member
Covered person's status, relationship or commitment to the institution, entity, business or person named above
2061 East Rainbow Point Drive, Holladay, Utah 84124
Address and phone number of the institution, entity, business or person named above

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


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

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

I am a member of the board .

SUBSCRIBED and SWORN to before me this 21 day of January, 2018.

[Signature]
Covered Person's Signature



[Signature]
NOTARY PUBLIC, Residing in
DAVIS UT
County 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 re-filed every January, as long as the potential conflict exists.

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

A. Anna Vulkan-Chow Community Relations Specialist / Salt Lake County Mayor's Office (385) 468-7031
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
Salt Lake County Mayor's Office / 2001 South State St, N2-100 / Salt Lake City, UT 84114
Covered Person's County Address/Volunteer's Address

B. St. Catherine of Siena Newman Center
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

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

170 University St E / Salt Lake City, UT 84102 Phone: (801) 359-6060
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.)

~~Reference~~ I am a parishioner and will occasionally volunteer through the church.

Anna Vulkan-Chow
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 10 day of January, 2018.



[SEAL]

[Signature]
NOTARY PUBLIC, Residing in
DAVIS 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

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.

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. Justin Stewart

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

Salt Lake County Government Center 2001 South State Street, Ste N2-100, Salt Lake City, Utah 84114

Covered Person's County Address/Volunteer's Address

B. Merck Pharmaceuticals

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

Contract Lobbyist

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

2000 Galloping Hill Road, Kenilworth, NJ 07033 908-740-4000

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

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

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

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

I know of no direct conflicts with Salt Lake County. I will be representing the interests of
Merck before the Utah State Legislature.

Justin Stewart
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 8 day of January, 2018.



[SEAL]

Michelle Davis
NOTARY PUBLIC, Residing in
DAVIS 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

(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. Ben McAdams Mayor 385-468-7025
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2205 S. 1000 E., Salt Lake City, Utah, 84106
Covered Person's County Address/Volunteer's Address

B. Please see attached list.
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
Serves as board member on each of the groups listed on the page attached.
Covered person's status, relationship or commitment to the institution, entity, business or person named above
Please see attached list.
Address and phone number of the institution, entity, business or person named above

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

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

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

I serve on the boards of the attached list.

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



[SEAL]

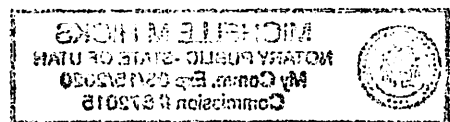
Ben McAdams
Covered Person's Signature

Utah
NOTARY PUBLIC, Residing in

DAVIS
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.



Downtown Alliance

801-359-5118
175 400S. #600
Salt Lake City, Utah

Envision Utah Board of Directors

801-303-1450
254 S. 600 E., Suite 201
Salt Lake City, Utah 84102

Inland Port Exploratory Committee

801-532-8080
60 South Temple, Suite 300
Salt Lake City, Utah 84111

Kem C Gardner Policy Institute Advisory Board

801-581-7676
1655 East Campus Center Drive
Salt Lake City, Utah 84112

Point of the Mountain Commission**Salt Lake Chamber Board of Governors**

801-364-3631
175 E. University Blvd.
Salt Lake City, Utah 84111

Shelter the Homeless

Salt Lake City, Utah

Sorenson Policy Innovation Lab

801-581-6191
1655 E. Campus Dr.
Salt Lake City, Utah 84112

State Homelessness Coordination Council**United Way**

801-736-8929
257 E. 200 S., Suite 300
Salt Lake City, Utah 84111

Utah Advisory Board Sundance

435-658-3456
1825 Three Kings Dr.
Park City, Utah 84060

Utah Association of Counties

801-265-1331
5397 S. Vine Street
Murray, Utah 84107

Utah Technology Council

801-568-3500
2755 E. Cottonwood Pkwy, #500
Salt Lake City, Utah 84121

Utah Sports Commission

801-328-2372
201 Main Street, Suite 2125
Salt Lake City, Utah 84111

Wasatch Front Regional Council

801-363-4250
295 Jimmy Dolittle Road
Salt Lake City, Utah 84116

Women's Leadership Institute

801-364-3631
175 E. 400 S. #600
Salt Lake City

World Trade Center Utah

801-532-8080
60 South Temple, Suite 300
Salt Lake City, Utah 84111

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. Ben McAdams Mayor 385-468-7025
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2205 S. 1000 E., Salt Lake City, Utah, 84106
Covered Person's County Address/Volunteer's Address

B. Julie McAdams
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
Julie works for University of Utah; is a member of Sugarmont Holdings LLC, Fairmont Holdings LLC.
Covered person's status, relationship or commitment to the institution, entity, business or person named above
2205 S. 1000 E., 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.)*

The properties within the holdings are used for rental purposes.
There are no relationship or ties between the holdings and Salt Lake County.

[Signature]
Covered Person's Signature

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



[Signature]
NOTARY PUBLIC, Residing in

DAVIS UT
County State

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

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

A. Justin Stewart Mayor Administration
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

Covered Person's County Address/Volunteer's Address

B. Utah Association of Nurse Anesthetists

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

Legislative Consultant

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

9765 North Meadow Drive

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

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

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

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

I will be representing the interests of the CRNAs before the Utah state legislature.

SUBSCRIBED and SWORN to before me this

8

day of

January, 2018

Covered Person's Signature



MICHELLE M HICKS
NOTARY PUBLIC -STATE OF UTAH
My Comm. Exp 06/15/2020
Commission # 672015

[SEAL]

NOTARY PUBLIC, Residing in

County

State

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DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

A. Kimberly Barnett, Assoc. Deputy Mayor 385-468-7007
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

2001 South State Street, N2100
Covered Person's County Address/Volunteer's Address

B. Columbus
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 Board of Directors

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

3495 West Temple, SLC, Utah 84115
Address and phone number of the institution, entity, business or person named above

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

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

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.)

Columbus is a nonprofit organization that transforms lives of individuals with disabilities through employment, training, day programs, and housing since 1968. I serve on the Board of Directors representing Salt Lake County Mayor's office.

Kimberly Barnett
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 21 day of January, 2018



[SEAL]

Julien
NOTARY PUBLIC, Residing in
DAVIS UT
County State

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DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

A. Joseph Munga Internship 360 924 1986
 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
945 ALTON DR- NORTH SALT LAKE 84054
 Covered Person's County Address/Volunteer's Address

B. NORTH EASTERN SERVICES
 Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Residential managers
 Covered person's status, relationship or commitment to the institution, entity, business or person named above
870 E 9400S # 112 SANDY, UT 84094
 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.)

Ensure the physical, spiritual and mental well-being of clients.
Attend to their needs and monitor their behavioral changes in order to assist in the formulation of a plan that contributes to their general happiness and well being.

[Signature]
 Covered Person's Signature

SUBSCRIBED and SWORN to before me this 29 day of January, 2018.



[SEAL]

[Signature]
 NOTARY PUBLIC, Residing in

DAVIS
 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.



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.

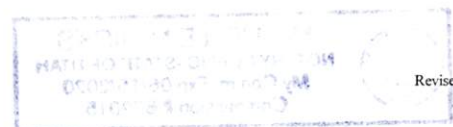
DISCLOSURE REQUIRED

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

(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. Carly Lansche Community Relations Intern
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
SALT LAKE COUNTY, 2001 S. State Street Ste NZ-100 SLC, UT 84114
Covered Person's County Address/Volunteer's Address

B. SALT LAKE COUNTY Sports Complex
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
Front Desk Receptionist & Learn to Skate Instructor
Covered person's status, relationship or commitment to the institution, entity, business or person named above
645 S. Guardsman Way, SLC, UT, 84108
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.)

Front Desk Receptionist & Learn to Skate Instructor

SUBSCRIBED and SWORN to before me this 29 day of January, 2018.



[SEAL]

Carly Lansche
Covered Person's Signature

Ruth Davis
NOTARY PUBLIC, Residing in

DAVIS
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.



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.

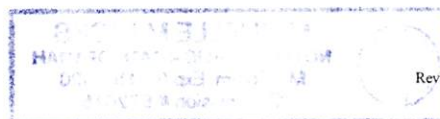
DISCLOSURE REQUIRED

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

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

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

A. Erin Litvack Deputy Mayor / CAO 385-468-7005
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State St., N2-100 SLC, UT 84190

Covered Person's County Address/Volunteer's Address

B. Visit Salt Lake Executive Committee
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Board Member

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

90 South West Temple Salt Lake City, Utah 84101

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

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

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

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.)*

Board Member

Erin Litvack

Covered Person's Signature

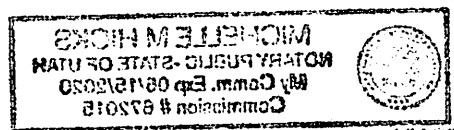
SUBSCRIBED and SWORN to before me this 30 day of January, 2018



[SEAL]

Michelle Davis
NOTARY PUBLIC, Residing in
DAVIS 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.



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Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State St., N2-100 SLC, UT 84190

Covered Person's County Address/Volunteer's Address

B. Department Heritage and Arts Museum Board
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section

Board Member

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

1000 600 W SLC, UT 84105

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.)*

Board Member

Erin Litvack

Covered Person's Signature

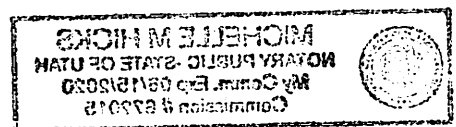
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[SEAL]

Michelle Davis
NOTARY PUBLIC Residing in
Davis UT
County State

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Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2001 South State St., N2-100 SLC, UT 84190

Covered Person's County Address/Volunteer's Address

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

Board Member

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

175 400 S #600 Salt Lake City, UT 84111

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

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

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

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Board Member

Erin Litvack

Covered Person's Signature

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



[SEAL]

[Signature]
NOTARY PUBLIC, Residing in
DAVIS UT
County State

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