Mayor's Office: Council Agenda Item Request Form

This form and supporting documents (if applicable) are due the Wednesday before the COW meeting by noon.

Date Received	01/31/18
(office use)	

Date of Request	01/31/18
Requesting Staff Member	Holly Yocom
Requested Council Date	02.06.18
Topic/Discussion Title	Disclosure Statements
Description	Attached are the disclosure statements from the following departments/divisions: Community Services Department ZAP Center for the Arts Clark Planetarium Library Parks and Recreation
Requested Action ¹	Consent
Presenter(s)	N/A
Time Needed ²	<5
Time Sensitive ³	No
Specific Time(s) ⁴	No
Please attach the supporting documentation you plan to provide for the packets to this form. While not ideal, if supporting documents are not yet ready, you can still submit them by 10 am the Friday morning prior to the COW agenda. Items without documentation may be taken off for consideration at that COW meeting.	

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

To:

County Council

From:

Community Services Department

DEPARTMENT OF COMMUNITY SERVICES

Date:

January 29, 2018

HOLLY M YOCOM Director Re:

2018 Conflict of Interest Form Submissions

ROBIN CHALHOUB
Associate Director

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

Community Services Department

- Holly Yocom (5)
- Robin Chalhoub (2)
- Phil Jordan (2)

DIVISIONS

CENTER FOR THE ARTS

Regards,

CLARK PLANETARIUM

DISCOVERY GATEWAY

LIBRARY SERVICES

PARKS, RECREATION & GOLF

EQUESTRIAN PARK & EVENTS CENTER

ZOO, ARTS AND PARKS

Holly Yocom

Department Director

SALT LAKE COUNTY GOVERNMENT CENTER 2001 South State Street Suite N-3200 Salt Lake City, UT 84190 385/468-7050 385/468-7072 fax www.slco.org

(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*.)

Α.	Robin B. Chalhoub Associate Director Community Services Department 385-468-7051
•	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	2001 South State Street Suite N3-200 Salt Lake City, Utah 84190
	Covered Person's County Address/Volunteer's Address
В.	Salt Lake Community College
υ.	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
	Adjunct Professor
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	4600 South Redwood Road, Salt Lake City, 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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	is completed.)
	This was it as the seaflist with my security position
	This position is not in conflict with my county position.
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	DOUNTED
	Covered Person's Signature
SU	JBSCRIBED and SWORN to before me this day of day of 2018.
	2 Maratanoly
	INA LANDRY NOTARY PUBLIC, Residing in
	My Comm. Exp 06/07/2020 Commission # 690406 State
10	LALI LOUNTY NIAE

(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.	Robin B. Chalhoub Associate Director Community Services Department 385-468-7051
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 2001 South State Street Suite N3-200 Salt Lake City, Utah 84190
	Covered Person's County Address/Volunteer's Address
В.	Discovery Gateway - The Children's Museum
	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
	444 West 100 South, 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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	I hold this position as a responsibility of my County position.
	RK halhers
	Covered Person's Signature
CI.	BSCRIBED and SWORN to before me this day of day of day. , 20 8.
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	NOTARY PUBLIC -STATE OF UTAH NOTARY PUBLIC, Residing in
	My Comm. Exp 06/07/2020 Commission # 690406
	EAL] County State

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

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

Α.	Philip Andrew Jordan Cultural Planning & Project Director / Community Services 801-244-1962
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	2001 South State Street, Salt Lake City, UT, 84114 Suite N-3209
	Covered Person's County Address/Volunteer's Address
В.	Soldier Hollow Nordic Center - Utah Olympic Legacy 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
	Volunteer Cross-country Ski Instructor & Community Advisor
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	PO Box 2002 2002 Soldier Hollow Lane, Midway UT 84049 @ (435) 731-6363
	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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	Mostly weekends during the winter months I teach novice cross-country skiing to the general public entirely as a volunteer with no renumera at the Soldier Hollow Nordic Center, Midway UT. In 2017, Soldier Hollow is organizing a Community Advisory Board and I have been invite to volunteer as one of its members in order for the Center to better connect with the Wasatch County residents. The Soldier Hollow Nordic Cedoes not have any direct or indirect business relationship or transactions with Salt Lake County.
	In January, 2017, the Utah Olympic Legacy Foundation formally agreed to manage Soldier Hollow as part of the Foundation. Utah Olympic Legacy Foundation is actively partnering with Salt Lake County, Oquirrh Recreation & Parks District (DBA Kearns Oquirrh Park Fitness Center) and US Speedskating in construction of the new Kearns Athletic Training and Events Center. In my Salt Lake County duties, I have involvement whatsoever with the Foundation's private business interests and Salt Lake County.
	The London Vordan
	Covered Person's Signature
SU	JBSCRIBED and SWORN to before me this
	INA LANDRY NOTARY PUBLIC -STATE OF UTAH NOTARY PUBLIC, Residing in
	My Comm. Exp 06/07/2020 Commission # 690406 Soft Labor UT
[S]	EAL] County State

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

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

Α.	Philip Andrew Jordan Cultural Planning & Project Director / Community Services 801-244-1962
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	2001 South State Street, Salt Lake City, UT, 84114 Suite N-3209
	Covered Person's County Address/Volunteer's Address
В.	International Association of Venue Managers (IAVM) Venue Management School (VMS)
	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
	Volunteer Instructor - Faculty Member
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	635 Fritz Drive, Suite 100, Coppell, TX 75019 @ (972) 538-1021
	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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	I have been appointed as a Volunteer Instructor/Faculty Member at International Association of Venue Managers (IAVM) Venue Managemer School (VMS) which is service without any remuneration held annually at Oglebay Training Center, Wheeling, WV. I volunteer my time using vacation/compensatory leave hours from the County. VMS faculty are not employees and receive/retain their appointments by means of their professional expertise and success as instructors not through their employment or job position. Each volunteer teaches subjects as part of the educational programs for the week-long 'school' period. The faculty Is not Involved whatsoever in recruiting or managing IAVM membership
	or VMS student admissions. VMS reimburses faculty travel costs with receipts for air travel, meals and ground transportation. During the schweek faculty are provided housing and meals at the Center. Salt Lake County pays for IAVM association membership fees, conferences and
	VMS training for Center for the Arts staff. In 2017 I was elected to the VMS Board of Regents and am invited to teach at the VMS in Brisbar Australia. As Salt Lake County Cultural Planning Director I have no economic interest in or paid employment by IAVM or VMS and I have budget authority over any Salt Lake County employee having IAVM membership or attending VMS or IAVM conferences.
	Covered Person's Signature
SU	JBSCRIBED and SWORN to before me this agriculture day of Danuary, 2018.
	INA LANDRY NOTARY PUBLIC - STATE OF UTAH NOTARY PUBLIC, Residing in
	My Comm. Exp 06/07/2020 Commission # 690406 UT
[S]	EAL] County State

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My Comm. Exp 05/07/2009

Commission & Commi

(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*.)

Δ	Holly Yocom	Community Services Depar	tment Director	87052
	Covered Person 2001 South State N	Position, or County Division for w 3200 Salt Lake City, UT	which you are employed or volunteering	County/Volunteer's Phone
В.	Covered Person's Count Equality Utah PAC	y Address/Volunteer's Address		
υ.	is required in the above s		th the Covered Person has a personal or busing	ness interest for which disclosure
	Board Member			
	•	relationship or commitment to the i າ #1004 SLC UT 84101	nstitution, entity, business or person named a	above
	Address and phone numb	ber of the institution, entity, business	s or person named above	
C.	Select the category that	t applies to yourself and the outside i	nstitution, entity, business or person identification	ed in subsection (B) above:
	I receive or have ag	greed to receive compensation for ass	sisting a person or business entity in a transac	tion involving Salt Lake County.
	Salt Lake County. I am an officer, dir with Salt Lake Cou	ector, agent, employee or owner of a	of a substantial interest in a business entity to substantial interest in a business entity that of ates a potential or actual conflict with my pu	loes or anticipates doing business
		nterest that creates a potential or actu		one 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 bus entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this see is completed.)				
	a a	d don't believe a conflict exist.		
			1	
				. Good
			Covered Person's Signature	\mathcal{O}
SU	BSCRIBED and SWORN	N to before me this <u>31s+</u> day of	January , 20 18.	
	NO.	INA LANDRY DTARY PUBLIC -STATE OF UTAH My Comm. Exp 06/07/2020	NOTARY PUBLIC, Residing in	
SI	EAL]	Commission # 690406	County County	State

[SEAL]

(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.) Community Services Department Director 87052 Holly Yocom Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 2001 South State N3200 Salt Lake City, UT Covered Person's County Address/Volunteer's Address Discovery Gateway B. 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 444 West 100 South. 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 sit on this board as part of my general job duties and don't believe a conflict exist. Covered Person's Signature SUBSCRIBED and SWORN to before me this 315+ day of Qquan INA LANDRY NOTARY PUBLIC -STATE OF UTAH My Comm. Exp 06/07/2020 Commission # 690406

(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*.)

٨	Holly Yocom	Community Services Department Director	87052
١.	Covered Person 2001 South State	Position, or County Division for which you are employed or volunteering a N3200 Salt Lake City, UT	County/Volunteer's Phone
3.	Covered Person's Co UPACA	unty Address/Volunteer's Address	
) .	is required in the above	ntity, private business or person in which the Covered Person has a personal or business exection	ness interest for which disclosure
	Board Member		
		tus, relationship or commitment to the institution, entity, business or person named	above
	451 South State	2 (20) 2 (2) 7	
	Address and phone no	umber of the institution, entity, business or person named above	
Ι.	Select the category t	that applies to yourself and the outside institution, entity, business or person identification.	ed in subsection (B) above:
	I receive or hav	e agreed to receive compensation for assisting a person or business entity in a transaction	ction involving Salt Lake County.
	Salt Lake Coun	director, agent, employee or the owner of a substantial interest in a business entity ity. director, agent, employee or owner of a substantial interest in a business entity that of the control of the	
	with Salt Lake I hold an invest		
D.	Give a detailed described or person with is completed.)	ription of the actual or potential conflicts of interest identified above, i.e., the nature h the County. Use more sheets if necessary. (<i>This disclosure statement will not be a</i>	of the relationship of each business accepted as valid unless this section
	500.000 000.000 000 000 000 000	as part of my general job duties and don't believe a conflict exist.	
		Hall M.C.	loce
		Covered Person's Signature	
SU	JBSCRIBED and SWO	DRN to before me this 3151— day of Onusuy, 2018	,
		INA LANDRY NOTARY PUBLIC - STATE OF UTAM NOTARY PUBLIC, Residing in	
re i	EAL]	My Comm. Exp 06/07/2020 Commission # 690406 Scalt Lane County County	State

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

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Holly Yocom Community Services Department Director 87052 Position, or County Division for which you are employed or volunteering County/Volunteer's Phone Covered Person 2001 South State N3200 Salt Lake City, UT Covered Person's County Address/Volunteer's Address Spy Hop B. 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 Capital Campaign Board Member Covered person's status, relationship or commitment to the institution, entity, business or person named above 175 West 200 South #1004 SLC UT 84101 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I sit on this board and don't believe a conflict exist. SUBSCRIBED and SWORN to before me this 31st day of _______ 20 1

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

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(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	Holly Yocom	Community Services Depar	tment Director	87052
••	Covered Person 2001 South State N3	Position, or County Division for was 3200 Salt Lake City, UT	which you are employed or volunteering	County/Volunteer's Phone
		y Address/Volunteer's Address		
В.	Equestrian Park			
ь.	Outside institution, entity is required in the above so Board Member		th the Covered Person has a personal or busine	ss interest for which disclosure
		relationship or commitment to the i	nstitution, entity, business or person named abo	OV/A
		uth South Jordan UT 84095	institution, entity, business of person named ab-	Jve
		per of the institution, entity, business	s or person named above	
C.	-		institution, entity, business or person identified	in subsection (B) above:
	I receive or have ag	reed to receive compensation for as	sisting a person or business entity in a transaction	on involving Salt Lake County.
	I am an officer, dire Salt Lake County.	ector, agent, employee or the owner	of a substantial interest in a business entity that	it is subject to the regulation of
	I am an officer, dire with Salt Lake Cou		substantial interest in a business entity that doc	es or anticipates doing business
	I hold an investmen		ates a potential or actual conflict with my publical conflict with my public duties.	ic 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 relationship of each business epted as valid unless this section
		part of my general job duties and	don't believe a conflict exist.	31
			Covered Person's Signature	focer
		21.1		
SL	JBSCRIBED and SWORN	N to before me this 31st day of	<u>January</u> , 20 18.	
	(C) NO	INA LANDRY OTARY PUBLIC -STATE OF UTAH My Comm. Exp 06/07/2020	On Landy NOTARY PUBLIC, Restains in	
ΓÇ	FALL	Commission # 690406	Goult Com County	State





BEN MCADAMS

Salt Lake County Mayor

Holly M Yocom

Community Services Department Director

Robin B Chalhoub

Community Services Department Associate Director

Kirsten Darrington

Zoo, Arts and Parks Program Director January 22, 2018

Salt Lake County Council 2001 S State Street, N2-200 Salt Lake City, UT 84190

RE: ZAP Program Staff Disclosure Statements

Dear Honorable Council Members,

tu Haruster

Per Utah law and Countywide Policy 1430, enclosed you will find completed Disclosure Statements form the ZAP Program staff:

Kirsten Darrington Lola Taylor

Thank you for your consideration of these statements.

Sincerely,

Kirsten Darrington Program Director

Attachments:

Disclosure Statement for Kirsten Darrington Disclosure Statement for Lola Taylor

(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.) Dorrington, 7AP Rogram Director, 385-468-7058

Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 2001 S. State ST N3-200, SLC, UT 84190 Covered Person's County Address/Volunteer's Address Westwinster College Alumni 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 Volunteer Board Member

Covered person's status, relationship or commitment to the institution, entity, business or person named above 1840 S. 1300 E. SLC, UT 8410 S. 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.) a yourseer board member on the Westminster I Alumni Board. I have no fiduciary responsibilities and in no way involved in any of the college's decisions to sact with Salt have Country. SUBSCRIBED and SWORN to before me this and day of January aano NOTARY PUBLIC, Residing in SEAL



(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.)

Und	er the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, er penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)
	Lola Taylor Gant & Communications Coordinator 385-468-7058 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	2001 S. State St N3-WO, Salt Lake City, UT 84190 Covered Person's County Address/Volunteer's Address
В.	Amenian Mothes, Inc. Dutside 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
	BOOK Veeper Covered person's status, relationship or commitment to the institution, entity, business or person named above
	1775 Fye St, NW, Ste 1150, Washington, DC 2006 877-242-4264 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 busines 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 manage the financial entries into Quickbooks for American Mothers. I also maintain their membership database and provide consultation on nonprofit
	best pactises.
	Covered Person's Signature
SU	BSCRIBED and SWORN to before me this 22 day of January, 2018.
	INA LANDRY NOTARY PUBLIC -STATE OF UTAH My Comm. Exp 06/07/2020 Commission # 690406
[S]	County State

INA LANDRY

ROTARY PUBLIC STATE OF UTAN

My Carra. Exp 08/07/2020

Corranission @ 690406





January 22, 2018

Salt Lake County Council 2001 South State Street N2-200 Salt Lake City, UT 84114

To Whom It May Concern,

Attached are notarized 2018 Disclosure of Personal or Financial Interest statements, completed by employees of the Salt Lake County Center for the Arts:

Melinda Cavallaro Elizabeth Ferguson Ernesto Flores Jeffrey Gwilliam Sarah Pearce Clifford Wallgren Laura Zepko Kristina Pappas

Thank you for your consideration of this request.

Sincerely,

Sarah Pearce

Director, Center for the Arts

Enclosures:

Salt Lake County Disclosure Statements

BEN MCADAMS

Salt Lake County Mayor

HOLLY YOCOM

Department Director Community Services

ROBIN CHALHOUB

Associate Department Director Community Services

SARAH PEARCE

Division Director Center for the Arts

MELINDA CAVALLARO

Associate Division Director Center for the Arts

SCOTT A. BUTTERS

Associate Division Director Center for the Arts

JEFFREY GWILLIAM

Associate Division Director Center for the Arts

ANGELA VANDERWELL

Associate Division Director Center for the Arts

50 West 200 South Salt Lake City, UT 84101

385-468-1010 - Phone 385-468-1005 ~ Fax TTY: 7-1-1



(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. MELINDA CAVALLARO ASSOCIATE DIRECTOR - CVA

Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Pl County/Volunteer's Phone 50 WEST 200 SOUTH SLL UT B4101 Covered Person's County Address/Volunteer's Address B. LIGHTING ASSOCIATES 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 VILE-PRESIDENT Covered person's status, relationship or commitment to the institution, entity, business or person named above 968 Z^{DD} AVENUE SLC UT 94103
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 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.) AS VICE-PRESIDENT OF LIGHTING ASSOCIATES, I PROVIDE STRATEGIC PLANNING AND ASSISTANCE TO THE PRESIDENT, HICHOLAS CAVALLARO. HILHOLAS IS A THEATRICAL LIGHTING DESIGNER THAT DCGASIONALLY WORKS FOR SOME OF THE RESIDENT LOMPANIES AT CENTER FOR THE ARTS. HE CONSULTS FOR CENTER FOR THE ARTS REGARDING LIGHTING PROJECTS. I, AS VILE-PRESIDENT, AH NOT INVOLUED IN THOSE PROJECTS AND KEEP MY COUNTY DUTIES SEPARATE FIRD M HIS INVOLVEMENT. Muhaela Cavallana
Covered Person's Signature SUBSCRIBED and SWORN to before me this 17Huday of January **BRIAN FEREBEE** Notary Public State of Utah Comm. No. 683868 My Comm. Expires Jul 6, 2019 [SEAL]



(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.)

Ui	nder the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
A.	Elizabeth Ferguson Center for the Arts - Event Manager 385-468-1033 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	50 W. 200 S. Szlt Lake City, UT 84101 Covered Person's County Address/Volunteer's Address
В.	SB Dance 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
	Production Mayager Covered person's status, relationship or commitment to the institution, entity, business or person named above
	138 W. 300 S. SUC, UT 84101 801-583-8478 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.)
	Elizabeth Ferguson is an 1099 Independent Contractor with SB Dance, working as a Technician and Production Stage Manager for performance in Salt Lake County Center for the Arts venues. SB Dance is a Resident Arts Partner of Salt Lake County Center for the Arts, hosting events in the Rose Wagner Performing Arts Center.
SIII	SSCRIBED and SWORN to before me this 1 day of 90
[SE	JACLYN JENSEN NOTARY PUBLIC - STATE OF UTAN COMMISSION NO. 690826 JACLYN JENSEN NOTARY PUBLIC - STATE OF UTAN S91+ 1414 VIAIT S91+ 1414 Utalt



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

Un	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)
A.	Ernesto Flores Production manager J85-272-452, Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	131 So main Street SLC ut Bellol Covered Person's County Address/Volunteer's Address
В.	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
	President Covered person's status, relationship or commitment to the institution, entity, business or person named above
	45/0 So EdgeWore land Trylos Sville UTAH Address and phone number of the institution, entity, business or person named above
C.	Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties.
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) Volunteer at aboxing by That is in a County facility.
	Cavered Rerson's Signature
SUE	BSCRIBED and SWORN to before me this 17 day of January , 2018.
	NOTARY PUBLIC RAPHAELS HUNT NOTARY PUBLIC, Residing in
[SE.	AL] 684485 COMMISSION EXPIRES JULY 28, 2019 STATE OF UTAH County State



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

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

A.	Jeffrey L. Gwilliam Associate Division Director-Operations Center For The Arts 385-468-1040 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	_50 West 200 South Salt Lake City, Utah 84101 Covered Person's County Address/Volunteer's Address
В.	<u>Freelance Theatrical Production Manager and Lighting Designer for theatre and dance performances.</u> 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
	Freelance private contractor, no ongoing relationship or commitment beyond individual event contracts Covered person's status, relationship or commitment to 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 provide freelance Production Management and Lighting Design services to various performing arts organizations for individual performances. Some of these organizations hold their performances in Salt Lake County venues. When working with these organizations I work as a 1099 private contractor with no continued financial relationship beyond the individual performances for which I am contracted. I do not have any involvement with these organizations booking, contracting, or payments when they are performing in Salt Lake County facilities.
	sell Toullin
	Covered Person's Signature
SU	BSCRIBED and SWORN to before me this day of Constant, 2009.
	JACK GASKILL Notary Public • State of Utah Commission # 694461 NOTARY PUBLIC, Residing in
[SF	My Commission Expires April 11, 2021 State My Commission Expires County State



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

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

Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone SO WEST 200 SOUTH, CAPITOL THEATRE
Covered Person's County Address/Volunteer's Address B. VISIT SACT 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 MANBER Covered person's status, relationship or commitment to the institution, entity, business or person named above 90 G, WIST TEMPLE SLC, UT 8410 1
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 (volunteer as a board menter for Visit Satt Cahe.

VISIT Sout Lake USES/ Expents CFA venues. [SEAL]



(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. SANAH PEARCE DREADR, CFA 385-468-101/
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 50 W. 200 S. CAPITOL THEATRE SLC UT 84101
Covered Person's County Address/Volunteer's Address B. SATUACE COMMUNITY COLLEGE MEDIA CENTER ADVISORY BOARD Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure ADVISORY BOARD MEMBER

Covered person's status, relationship or commitment to the institution, entity, business or person named above 1575 S. STATE ST. SLC UT 84110-5
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 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 I serve on the Advisory board that meets once a year. SUBSCRIBED and SWORN to before me this _____day of ______day of _______ INA LANDRY NOTARY PUBLIC -STATE OF UTA My Comm. Exp 06/07/2020



(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. Cliftord B wallgren Technical Director Eccles 385-468-2513

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

131 Main St. SLC, Ut 84111 Covered Person's County Address/Volunteer's Address

B. Vortex Production 5
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

General Manager

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

1865 WESE+Ch Drive, ut 84108 Chuck Johnson 801-580-6389
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.)

Scheduling, Payroll, Shop management. Head Pyro Technician for indoor, outdoor and flame effect shows throut the State Of Utah. and for Bread Firework Shows for City's within Salt Lake I am paid Directly By vortex.

SUBSCRIBED and SWORN to before me this 20 day of January

NOTARY PUBLIC SPOWELL Commission No. 679084 Commission Expires **SEPTEMBER 23, 2018** STATE OF UTAH

[SEAL]



(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. Clifford B Wallgren Technical Director Eccles 385-468-2513

Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 131 Main S+ SLC, UT 84111
Covered Person's County Address/Volunteer's Address B. Tndependent Frzelancer

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 Self
Covered person's status, relationship or commitment to the institution, entity, business or person named above 4022 Peach wood Drive WVC, Ut 84119
Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. 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.) Some times I do freelance lighting, Sound, protection for groups and organization's that rent out the county facilities (mainly the Rose magner) I am paid By each individual organization and not by the county. Cifel Walle

Covered Person's Signature SUBSCRIBED and SWORN to before me this 20 day of January . 2018 NOTARY PUBLIC SPOWELL Commission No. 679084 Commission Expires **SEPTEMBER 23, 2018** [SEAL] STATE OF UTAH



(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.)

	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
A.	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
В.	Covered Person's County Address/Volunteer's Address 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 123 W Sarth Tengle 138 W - 300 S.
C.	Address and phone number of the institution, entity, business or person named above 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. J hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties.
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) Covered Person's Signature
[SE	AL] Statement is a public document. If must be filed with the covered person's immediate supervisor, volunteer or community liaison, is an director of energy and the County Council. It must be filed when the potential conflict arises and re-
>	I mapping of part time Staff in a full time position @ US/UD. Patron Services Manager - in the ticket office.
	I chair the Anbassadorial Cominitee for RWDC.
	This is a volunteer position that needs ance





110 South 400 West Salt Lake City, UT 84101 385.468.STAR (7827) www.clarkplanetarium.org

JANUARY 24, 2018

TO: SALT LAKE COUNTY COUNCIL

FROM: SETH JARVIS, CLARK PLANETARIUM

Accompanying this cover letter are Conflict of Interest Disclosure Statements for Clark Planetarium staff:

Duke Johnson

Ron Proctor

Jesse Warner

Cody Lavery

Chris Roberts

I have discussed the county's Conflict of Interest and Disclosure policies with each employee and reviewed with them their activities that necessitated their completion of the Disclosure Statement.

Seth Jarvis, Director

Clark Planetarium

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

	Un un	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)
	Λ.	Overed Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
1105		400 W 5/C 8410/
		Covered Person's County Address/Volunteer's Address
	В.	Desert 5Kirs Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure
		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
		Covered person's status, relationship or commitment to the institution, entity, business or person named above
		Address and phone number of the institution, entity, business or person named above
	C.	Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
		I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
		I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
		I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business
		with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
		I hold a personal interest that creates a potential or actual conflict with my public duties.
	D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section</i>
		is completed)
		My company sells mineral specimens etfossils, which the store sometimes buys.
		De la la companya de
		which the store some, mes onys.
		Durondfohren
		Covered Person's Signature
	SU	BSCRIBED and SWORN to before me this 17 day of Jan vary , 20 8.
		amongers, macy.
		AMY MYERS Notary Public – State of Utah NOTARY PUBLIC, Residing in
		Comm. No. 696263 My Commission Expires on DAVIS VT
	[SE	EAL] Aug 11, 2021 County State

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

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

A.	Ron Proctor Production Manager for Clark Planetarium / Community Services Division 385 468 1237
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	110 S 400 W, Salt Lake City, UT 84101
	Covered Person's County Address/Volunteer's Address
В.	Physics Foundry LLC
	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
	Owner
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	2522 W 2725 N, Farr West, UT 84404
	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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	Physics Foundry LLC (EIN: 27-4065284, Organized on 29 November 2010) provides software training, graphic design, animation, photography, audio, and video production for clients, including museums and planetariums. I am the owner of this business. Physics Foundry LLC has no business or transactional relationship with Salt Lake County and does not anticipate doing business with Salt Lake County.
	1 conce
	Covered Person's Signature
SU	BSCRIBED and SWORN to before me this
	Saltake City
	CRISTINE SALAZAR Notary Public • State of Utah NOTARY PUBLIC, Residing in
	[[Commission # 690327]
ISI	My Commission Expires June 20, 2020 County State



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:

- Disclose confidential information acquired by reason of the covered person's official position or use such information to secure special privileges or exemptions for the covered person or others;
- Use or attempt to use the covered person's official position to secure special privileges for the covered person or for others; or 2.
- 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:

- Receives or agrees to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County;
- B. Is an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County:
- Is an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County;
- D. Holds an investment or other financial interest that creates a potential or actual conflict between the interest and the covered person's public duties; or
- Hold some personal interest that creates a potential or actual conflict between the interest and the covered person's public duties.

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

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



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

	nder the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)
Α.	JESSE PWARNER EDUCATION SPECIALIST 385-468-1250
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	CLYRIK PLANETARIUM 110 SOURT 400 WEST SALT LIKE CITY, LIT. 84/0/ Covered Person's County Address/Volunteer's Address
	Covered Person's County Address/Volunteer's Address
В.	FOLIR CURNORS SCHOOL UT- OLUTROUR EDUCATION
	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 costion.
	Science Spainist For Exent Words Sky Summer Sciences Comp
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	1117 North Man Street Monneau, UT. 87535 435-587-2156
	Address and phone number of the institution, entity, business or person named above
C	
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.
	I hold a personal interest that creates a potential or actual conflict with my public duties.
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section</i>
	is completed.)
	I PERFORM EDUCATIONAL ACTIVITIES AND DISCUSSIONS IN AN OUTDOOR LOCATION.
	THE ALTIVINES I PROJUTE MAN OR PURFORM ARE THE SAME AS WHAT I
	TEACH THROUGH THE CLARK PLANTMING.
	Covered Person's Signature
CII	72 td 10
30.	BSCRIBED and SWORN to before me this
	(with Island
	COLTER HILL NOTARY PUBLIC, Residing in
	Notary Public - State of Utah Comm. los (9813) Notary Public - State of Utah Comm. los (9813) Sqlt / Laice (149h)
[SE	[EAL] My Commission Expires on Dec 12. 2021 County State



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:

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

DISCLOSURE REQUIRED

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

- A. Receives or agrees to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County;
- B. Is an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County;
- 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;
- 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

(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.	Cody Lavery Modeler/Animator - Clark Planetarium - Production Dept 8014557408
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	11248 Blake cir, South Jordan, Utah, 84095
	Covered Person's County Address/Volunteer's Address
B.	ClaverTech 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 Sole Proprietor
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	11248 Blake cir, South Jordan, Utah, 84095 Address and phone number of the institution, entity, business or person named above
	Address and phone number of the institution, entity, business of 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.)
	ClaverTech LLC develops and sells Digital Products and/or Services to a variety of
	educational institutions that may include planetariums and science museums. These are
	not products and services that compete with any products or services marketed by Clark
	Planetarium.
	The state of the s
	Covered Person's Signature
SU	BSCRIBED and SWORN to before me this 24 th day of Sinusy, 20/8.
	N RY PUBLIC Harnah Pagan
	HANNAH MORGAN Commission No. 697579 NOTARY PUBLIC, Residing in
	Commission Expires OCTOBER 18, 2021 Salt Lake City UT
[SE	AL] STATE OF UTAH County State



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 ETI

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:

- 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;
- 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.

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90 (c.) 50 (c.) 20 (c.) 10 (c.)

Revised 10/17

(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.	Chris Roberts Education Program Specialist for Clark Planetarium / Community Services 385 468 1249
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	110 S 400 W, Salt Lake City, UT 84101
	Covered Person's County Address/Volunteer's Address
B.	Chris Roberts 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
	Self
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	4420 S Atherton Dr, Apt 14, Taylorsville, UT 84123
	Address and phone number of the institution, entity, business or person named above
C.	Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
	I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties.
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each busines
	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 covered person anticipates developing software and mobile applications for clients, including
	museums. In this capacity, the covered person does not have a business or transactional relationship with Salt Lake County.
	\mathcal{L}
	Covered Person's Signature
SU	BSCRIBED and SWORN to before me this 24th day of Januay, 2018.
	NOTARY PUBLIC, Residing in
	COMMISSION EXPIRES Salt (alle Court Utah
[SE	EAL] NOVEMBER 29, 2021 STATE OF UTAM County State



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:

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

DISCLOSURE REQUIRED

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

- A. Receives or agrees to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County;
- B. Is an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County;
- 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;
- 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.

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Council

2001 South State Street N2-200 Salt Lake City, UT 84114-4575

January 23, 2018

To the members of the County Council:

The following library employees have submitted conflict of interest forms.

Tia Wilcox

Margaret Mills

Alexandra Kelsy Thompson

Elizabeth Sollis

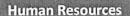
James Chipman

Ronald Patrick

Carol Ormond Office Manager Salt Lake County Library 8030 S. 1825 W. West Jordan, Utah 84088 801-944-7515

(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. Tia Wilcox Shelver at Ferriman Library 301-944-7562 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 5340 W Herriman Main & St Covered Person's County Address/Volunteer's Address 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 Employeed as a library Sentices Aide Covered person's status, relationship or commitment to the institution, entity, business or person named above Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I have a Job within the county Worary System and a second Job with a library out-side the county library stjerntem. The difference in policies and objectives have the potential to be a conflict of interest Covered Person's Signature SUBSCRIBED and SWORN to before me this 17th day of January ROBYN WAHLEN Notary Public . State of Utah NOTARY PUBLIC, Residing in Commission # 680208 My Commission Expires November 30, 2018 State



utch

Version Date: 3/19/2015



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.)

Margaret Mills	Library Manager/Library	801-944-7597
Covered Person*	Position* or County Division	County Phone
4740 W 4100 S		
Covered Person's County Address		
DDiVantage Early Head Start		
Outside institution, entity, private b	usiness or person involved	
	or Early Head Start Policy Council	
Describe covered person's status, er	mployment or investment in the outside institution, entity, priva	te business, or personal contract
	rsville, Utah 84129 Phone: (801) 966-0497	
Outside institution, entity, business	or person's address and phone number	
the nature of the economic interes	ssistance you are providing to the institution, entity, private busin st or employment you hold in the private business. Also descr person, etc. and Salt Lake County. Use more sheets if necessa s completed.)	ribe the relationship with or transaction
goals, and bring back information to	nity representative. I also provide information about how the li o the library about their needs. I have no economic interest or e saction between that organization and the county.	
	Covered Person's Signature	e e
BSCRIBED and SWORN to before me th	his /9 day of Taa ,20/8	
	12000.	
GLEN B. F NOTARY PUBLIC • S	ROACH Sefter 1	& front

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

County

utali

*"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."

Page 2 of 2

COMMISSION NUMBER 684619

GLEN B. ROACH
NOTARY PUBLIC - STATE OF UTAN
MY Commission Expires Sept. 16, 2019
COMMISSION NUMBER SEASTS

Version Date: 3/19/2015



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*.)

Margaret Mills	Library Manager/Library	801-944-7597
Covered Person*	Position* or County Division	County Phone
4740 W 4100 S		
Covered Person's County Address		
ChamberWest		
Outside institution, entity, private be	usiness or person involved	
	s and Board of Governors, member of Board of Ti nployment or investment in the outside institution, entity, pr	
3540 S 4000 W, Suite 240, We	est Valley City, UT 84120 801-977-8755	
	or person's address and phone number	
the nature of the economic interes	sistance you are providing to the institution, entity, private be t or employment you hold in the private business. Also de person, etc. and Salt Lake County. Use more sheets if nece completed.)	escribe the relationship with or transaction
memberships.		
	Covered Person's Signa	ture
SCRIBED and SWORN to before me th	is 19 day of Jin, 20/8.	
	Men	A Boals
GLEN	ROACH NOTABY BURLIC Posiding	
IN WARY PUBLIC		g in
[SEA] My Commission F	C • STATE OF UTAH Expires Sept. 16, 2019	i stal

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.

Page 2 of 2

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

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

GLEN B. ROACH
MOTARY PUBLIC • STATE OF UTAR
WY Commission Expires State 18, 2019
COMMISSION NUMBER 681619

April 25, 2021

(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. Alexandria Keley Thompson Pr. Coordinator - Library
Covered Person Position, or County Division for which you are employed or volunteering 801.944.7522 County/Volunteer's Phone 8030 S 1825 W, West Jordan, ut 84088
Covered Person's County Address/Volunteer's Address B. Kelsy Thompson Editing 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 renus Covered person's status, relationship or commitment to the institution, entity, business or person named above 2916 Brincer Rose., Ogden, UT 84403
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 own an editing business, which may conflict with my responsibilities as a PR coordinator at the County Library. Covered Person's Signature SUBSCRIBED and SWORN to before me this 20 day of January Notary Public . State of Utah Commission # 694538 Web-in My Commission Expires



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:

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

DISCLOSURE REQUIRED

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

- A. Receives or agrees to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County;
- B. Is an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County;
- Is an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County;
- D. Holds an investment or other financial interest that creates a potential or actual conflict between the interest and the covered person's public duties; or
- E. Hold some personal interest that creates a potential or actual conflict between the interest and the covered person's public duties.

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

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



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

Un	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
A.	anabeth solis, Manaetinas (MMINICATIONS WANAGER GOIGHATIS20
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	as siers with the start of the
В.	Covered Person's County Address/Volunteer's Address
	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
	Leave Member
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	100 - 2100 S SIE 100, SIII EIRECHY, OF OTHS 705400720
	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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	I am a member of their executive board - we
	typically meet monthly to review projects,
	Topico acco XIII (con 1110)
	financials and z-als.
	Covered Person's Signature
SU	BSCRIBED and SWORN to before me thisday of, 20
	MARHEA DILLE Notary Public – State of Utah NOTARY PUBLIC, Residing in
	Comm. No. 698415 My Commission Expires on SOLELIA ALL ALL ALL ALL ALL ALL ALL
[SE	[AL] Jan 10, 2022 County State

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

Un	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-10a-1 et seq., U.C.A., 1955 as aniented, i, the undersigned,
uno	der penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
A.	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	8020 S 1825 W. West Tordan UT 84008
	Covered Person's County Address/Volunteer's Address
В.	Utah Domestic Violence Coalition
	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure
	Media Consultant / Communications Consultant
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	Address and phone number of the institution, entity, business or person named above
	Address and phone number of the histitution, entity, business of 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.)
	is completed.)
	provide region some meaning
	I provide freelance media & communications work for Utah Dimectic Violence coaletion.
	Covered Person's Signature
SU	BSCRIBED and SWORN to before me this 22 day of, 20 _
	MARHEADILLE MARPILLA MILLE
	Notary Public – State of Utah Comm. No. 698415 NOTARY PUBLIC, Residing in
rer	My Commission Expires on Jan 10, 2022 County State

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

Ur	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business integest. (<i>Type or print all information</i> .)
A.	12 17 a hoth Solic Marketins Comminication C Marager 809447520
A.	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	9030 S 1825 W, MEST TOYAAN UT BADBE
	Covered Person's County Address/Volunteer's Address
В.	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure
	is required in the above section
	Advisons Committee Member
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	5160 Hanana Dr. Millaneek V 94106
	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. Shold a personal interest that creates a potential or actual conflict with my public duties.
D.	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.)
	Harrapate in advisory committee meetings (held PRN).
	meetines (held PRN).
	Covered Person's Signature
SU	BSCRIBED and SWORN to before me this
	May2hen Will
	MARHEA DILLE Notary Public – State of Utah NOTARY PUBLIC, Residing in
	Comm. No. 698415 My Commission Expires on Salt Lake
[SI	EAL] Jan 10, 2022 County State

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

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. JAMES CHIPMAN GRAPHIC DESIGNER, SChounty Library
Covered Person Position, or County Division for which you are employed or volunteering ROSO S. 1825 W. WEST JOEDAN, UT 84068
Covered Person's County Address Volunteer's Address B. CHUDREN'S LITERATURE ASSOCIATION OF UTILH 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 P.O. Box 1841 praper, UT 84020

Address and phone number of the institution, entity, business or person named above 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 DON'T RECIEVE DAY COMPENSATION FROM CLAU. THE CIBERRY COPPORTS CLASS BEEING BOOK Awards program. SUBSCRIBED and SWORN to before me this ROMAN D SANCHEZ NOTARY PUBLIC, Residing in NOTARY PUBLIC - STATE OF COMMISSION# 681540 [SEAL] COMM. EXP. 02-13-2019

(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.) GRAPHIC DESIGNER, SUCOUNTY LIBEARY A. JAMES (ALDMAN) Position, or County Division for which you are employed or volunteering 803090 1825 WEST WEST JORDAN Covered Person's County Address/Volunteer's Address B. COLLABORATIVE SUMMER LIBRARY PROGRAM (CSLP) Outside institution, entity, private business or person in which the Covered Person has a personal of business interest for which disclosure is required in the above section BOARD OF DIRECTORS NOUNTER Covered person's status, relationship or commitment to the institution, entity, business or person named above Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. 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 POU'T RECTIVE COMPENSATION FROM COLD WITH THE EXCEPTION OF TRAVEL EXPENSES TO BOOKED MEETINGS. THE CIBRARY SUPPORTS CSUP'S SUMMOR CIBRARY PROGRAM. 20 /8 SUBSCRIBED and SWORN to before me this ROMAN D SANCHEZ NOTARY PUBLIC, Residing in NOTARY PUBLIC • STATE OF UTAH COMMISSION# 681540 [SEAL] COMM. EXP. 02-13-2019

State

Version Date: 3/19/2015



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*.)

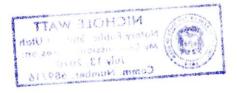
			001301.350
٨.	Covered Person*	Position* or County Division	801 385 3901 County Phone
	Covered reison	Position of County Division	County Frione
	Covered Person's County Address		
	1111	7 0 1	
3.	Outside institution, entity, private business or personal Called Lake 111	on involved	ver_
	GENELER SAIT LAKE M.	unicipal Service District	· · · · · · · · · · · · · · · · · · ·
	Describe covered person's status, employment or i	nvestment in the outside institution, entity, private	e business, or personal contract
39	Outside institution, entity, business or person's add	ress and phone number	
	Describe below the nature of the assistance you are the nature of the economic interest or employment between the business, institution, person, etc. an accepted as valid unless this section is completed.)	ent you hold in the private business. Also descri	be the relationship with or transaction
	Gevernment Argencys		
		Forald	Tel.
		Covered Person's Signature	
UB	SCRIBED and SWORN to before me this 1	y of January, 2018.	
ali	NICHOLE WATT	nichole	Watt
	Notary Public State of Utah My Commission Expires on:	NOTARY PUBLIC, Residing in	
5	SEAL] July 13, 2020 Comm. Number: 480714	SL	UT

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

County

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

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





January 24, 2018

BEN McADAMS

Salt Lake County Mayor

HOLLY YOCOM

Department Director Community Services

MARTIN JENSEN

Division Director Parks & Recreation 2001 S. State St. Suite S4-700 Salt Lake City, UT 84190 Salt Lake County Council 2001 S. State Street Salt Lake City, UT 84190

RE: 2018 Disclosure of Personal and Financial Interest Forms

Dear County Council,

Included in this packet are the, 2018 Disclosure of Personal and Financial Interest forms from Parks & Recreation. You will find submissions from the following employees:

Will Kocher Arthur Lovato

Amber Milne

Taylor Abegglen

Shyler Andreason

Rebecca Barley

Christine Buckley

Ashley Bowen

Jerry Brewster

Johnathan Davis

Gavin Eckert

Time Fernau

Tazshia Gibson

Christopher A. Gresh

Martin Jensen

Dianne L. Jensen-Booth

Adam Johnson

Jason Kehr

Keith J. LaCome

Benjamin Larsen

Jay P. O'fee

Mark Owen

Emilie Martinson

Julie Peck-Dabbling

Dustin Pimm

Josh Reusser (3 submissions)

Patrick Riley

Brian F. Schramm

Troy Watkins

Steve Young

If you require any further information please feel free to contact me.

Best regards,

Tazshia Gibson

Division Office Coordinator

Parks & Recreation

(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. Taylor Abeggian Program Coordintor

Covered Person Position, or County Division for which you are employed or volunteering 385-468-1896 County/Volunteer's Phone 10670 South 1000 East Sandy, UT 84094
Covered Person's County Address/Volunteer's Address B. Granite School District / Evergreen Tv. High
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 Tr. High coach
Covered person's status, relationship or commitment to the institution, entity, business or person named above 2500 South State Street 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.) Covered Person's Signature SUBSCRIBED and SWORN to before me this A day of NOTARY PUBLIC **ECEMBER 08, 20** STATE OF UTAH [SEAL]

ACCOUNT CORDS

ANTURO CORDS

COMMOSTOR ENVIRE

C

(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. SHYLER ANDREASON 2nd ASSISTANT GOLF PROFESSIONAL 385-468-1416

Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 2400 W. GARDNER LANE W. JORDAN, UT 84088
Covered Person's County Address/Volunteer's Address SHYLER ANDREASON

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 2379 W. Mong Calm De. PIVERTON, UT 84065
Address and phone number of the institution, entity, business or person named above 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 PROFESSIONAL GOLFER, I PLAY IN PROFESSIONAL GOLF TOURNAMENTS FOR MONBY. I AM SPONSORED BY COMPANIES TO PLAY IN THESE TOURNAMENTS. THESE TOURNAMENTS ARE OUTSING MY SCOPE OF EMPLOYMENT WITH SLCOUNTY. I DO NOT PLAY IN TOURNAMENTS ON COUNTY TIME. MY WINNINGS ARE REPORTED TO THE IRS. Covered Person's Signature SUBSCRIBED and SWORN to before me this 19TH day of JANUARY NOTARY PUBLIC, Residing in WHITNIE SHAPIRO Notary Public - State of Utah Comm. No. 696869 SALT LAKE

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

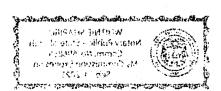
My Commission Expires on Sep 14, 2021

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

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. Rebecca Barley Adaptive Aquatic Manager B01-372-0451

Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 3402 S. 2000 E. Mill crock, UT 84109 Covered Person's County Address/Volunteer's Address B. Silverado Aspen Park Memory Care Community Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section employee
Covered person's status, relationship or commitment to the institution, entity, business or person named above H30 E. 4500 S. Salt Lake, City 1 UT 84117 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 work for the above listed care center which occasionally brings their residents to county facilities for activities. SUBSCRIBED and SWORN to before me this 23 day of NOTARY PUBLIC - STATE OF UTAH OTARY PUBLIC, Residing in My Comm. Exp. 10/13/2018 Commission # 680495 County [SEAL]

(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*.)

۸.	Christine C. Buckley Parks & Recreation 385.468.1685
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	1661 E Murray Holladay Road Holladay, Utah 84117
	Covered Person's County Address/Volunteer's Address
3.	Starfish Aquatics Institute (SAI) 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
	Starfish Aquatics Institude (SAI) Faculty 5 Star ranking
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	1 Diamond Causeway Ste 21-226 Savannah, Ga 31406
	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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	I'm a faculty member of Starfish Aquatics Institute (SAI) teaching Starfish Instructor Trainer Development Certification Course to private organizations, cities and county recreation departments who offer (SAI) a swimming lesson program.
	Salt Lake County recreation is affiliated with Starfish Aquatics Institute (SAI) to conduct swim lessons
	and lifeguard training
	Chris C Buckley
	Covered Person's Signature
SU	JBSCRIBED and SWORN to before me this 22 day of 2000, 2018.
	X d = N ==
	LINDSAY MONROE NOTARY PUBLIC Residing in
	Notary Public State of Utah Notary Public Notary Public Residing in
[2]	Comm. No. 610681 County State

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Comm. No. 610681

My Comm. Exp. 128 Aug 24 2012

(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.) Parks & Recreation
Position, or County Division for which you are employed or volunteering Harrison St. Midvale, UT 84047 Covered Person's County Address/Volunteer's Address Brigham Young University 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 Provo, UT Address and phone number of the institution, entity, business or person named above 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 teach in the Therapeutic Recreation of Management department at Brigham young University. Some of those students may become interns or employees at Salt Lake County Parks of Recrecition, but there is never any incentive given or coercion. SUBSCRIBED and SWORN to before me this 22M day of Vanuary NOTARY PUBLIC YOEN EPPERSON NOTARY PUBLIC, Residing in SSION EXPIRES JUNE 6, 2020 STATE OF UTAH [SEAL]

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

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. Terry Brewster Parks & Reseation 385-468-1805Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's P County/Volunteer's Phone 2001 S. State St. SLC, Ut.
Covered Person's County Address/Volunteer's Address B. PGA of America Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section PGA member - Class A

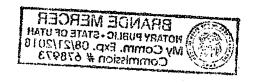
Covered person's status, relationship or commitment to the institution, entity, business or person named above 100 Avenue of Champions, Palm Beach Gardens, Florida Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the 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 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 PEA Class-A Golf Professional and play golf townsments for prize money. All winnings are reported to the I.L.S. as income. These townsments are outside of the Scope of my employment with Salt Lake County and are played on my personal time. I am sponsored by Varioùs golf companies to play in these events and asked to try products and give feedback on their performance. Covered Person's Signature SUBSCRIBED and SWORN to before me this ____day of ___ BRANDE MERCER NOTARY PUBLIC - STATE OF UTAH My Comm. Exp. 08/21/2018 Commission # 678973

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September 1988



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

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) which you are employed or volunteering B. Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Covered person's status, relationship or commitment to the institution, entity, business or person named above Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. 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.) erson's Signature Covere SUBSCRIBED and SWORN to before me this LISA B. DANIELS Notary Public State of Uta ARY PUBLIC, Residing in Commission Expires on November 11, 2019 Comm. Number: 685574 [SEAL] State

LISA 8. DANIELS
Notary Public State of Utah
My Commission Expires ont
November 11, 2019
Comm. Number 685574

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

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

A.	Gavin Eckert	Assistant Golf Profession	onal	385-468-1400
	Covered Person	Position, or County Division	for which you are employed or volunte	ering County/Volunteer's Phone
	421 East Vine Street	Murray, Utah 8410	7	
	Covered Person's Cou	inty Address/Volunteer's Address	j.	
В	PGA of America App	orentice - Gavin Eckert		
٥.	Outside institution, en is required in the abov	tity, private business or person in	which the Covered Person has a person	nal or business interest for which disclosure
	Play in Golf Tournam	ents, Teach Private Golf Lessons	and Test Different Golf Products	
	Covered person's statu	us, relationship or commitment to	the institution, entity, business or person	on named above
	1011 east 5205 south	Salt Lake City, Utah 84117		
	Address and phone nu	mber of the institution, entity, bu	siness or person named above	
C.	Select the category th	nat applies to yourself and the out	side institution, entity, business or perso	on identified in subsection (B) above:
	I receive or have	agreed to receive compensation	or assisting a person or business entity i	n a transaction involving Salt Lake County.
	I am an officer, of Salt Lake Count		wner of a substantial interest in a busine	ess entity that is subject to the regulation of
			r of a substantial interest in a business en	ntity that does or anticipates doing business
	with Salt Lake C		at creates a potential or actual conflict w	rith my public duties
			r actual conflict with my public duties.	and the production of the prod
D.				he nature of the relationship of each business ll not be accepted as valid unless this section
	to test different	s golf tournaments around the Sa golf products so i ca better infor- groups of all ages.	It Lake valley as a professional golfer. It has been the golfing community each year. At	Being a professional golfer I have the opportunity the golf course I provide private instructions for
				,
			(1)	
	e.		J /	
			Covered Person's Signature	
SU	BSCRIBED and SWO	RN to before me this 11 da	y ofJanuary	, 20_18
	STATE OF THE PARTY	NOTARY PUBLIC GISELA PICENO		Cull
	EMEN E	697291	NOTARY PUBLIC, Residin	g in
		OMMISSION EXPIRES SEPTEMBER 26, 2021	Salt Lake	<u> </u>
[S]	EAL]	STATE OF UTAH	County	State

COMMISSION EXPIRES

SEPTEMBER 26, 2021

STATE OF UTAM

(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.	Tim Fernau	Riverbend Head Golf Profession		385-468-1460
	Covered Person	Position, or County Division for w	hich you are employed or volunteering	County/Volunteer's Phone
	12800 South 1040 Wes	st, Riverton, Utah 84065		
		y Address/Volunteer's Address		
В.	Professional Golfers As	sociation of America		
	Outside institution, entity is required in the above s		h the Covered Person has a personal or busin	ess interest for which disclosure
	Member of the P.G.A.			
	Covered person's status,	relationship or commitment to the in	stitution, entity, business or person named a	bove
	Utah Section PGA Offi	ce. 580 West 3300 South SLC, Utah	84115 801-566-1005	
	Address and phone numb	ber of the institution, entity, business	or person named above	
C.	Select the category that	applies to yourself and the outside in	nstitution, entity, business or person identifie	d in subsection (B) above:
	I receive or have ag	greed to receive compensation for ass	isting a person or business entity in a transact	tion involving Salt Lake County.
		ector, agent, employee or the owner	of a substantial interest in a business entity the	nat is subject to the regulation of
	Salt Lake County.	ector, agent, employee or owner of a	substantial interest in a business entity that de	oes or anticipates doing business
	with Salt Lake Cou	unty.		
		nt or other financial interest that crean nterest that creates a potential or actual	tes a potential or actual conflict with my pub	olic duties.
		-		
D.			of interest identified above, i.e., the nature of ary. (This disclosure statement will not be ac	
	is completed.)	•		
			I golf tournaments and receive cash for placi syment scope and not on County time. On oc	
		in the golf tournament and being a P.		customs i receive gon product nom
			Λ Λ	
tim terror			11	
		10 5	Covered Person's Signature	,00
CII	DCCDIDED 4 CWODX	I to he form me this 19th	MM 3018.	
30	BSCRIBED and SWORN	I to before me thisday of	, 20 18.	$\Lambda_{\Lambda_{\Lambda_{\Lambda}}}$
		SHANNON GARDNER	, compall,	Moher
		Notary Public - State of Utah Comm. No. 691364	NOTARY PUBLIC, Residing in	
		My Commission Expires on	Salt Lake	UT
[SE	EAL]	Oct 23, 2020	County	State

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

	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)
Α.	Tozshea Gibson Division Office Covaling For St5.468.1901 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	9245400W 18318 SL, UT 84101 MC-Sute SH-700 Covered Person's County Address/Volunteer's Address
B.	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
(Hazshia ashley (C.C. C.C.) No Physical address. 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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	I have covered a few parks & nec related things
	I have covered a few parks & nec related things no money, and or onything of that sort has ever been made from these blog posts.
	Covered Rerson's Signature
SU	BSCRIBED and SWORN to before me this
	Jours & Person
	JOYCE R. PETERSON Notary Public State of Utah My Commission Expires on:
1	My Commission Expires on: June 11, 2018 Comm. Number: 677231 County State

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

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

A.	Christopher A. Gresh	Assistant (Golf Professional	385-468-1400		
	Covered Person	Position, or County Divis	sion for which you are employed or volunteering	County/Volunteer's Phone		
	421 East Vine Street		Murray, Utah 84107	····		
	Covered Person's Count	y Address/Volunteer's Add	dress			
В.	PGA of America- Chri	stopher A. Gresh		n v neo zamina tapo ve		
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which discl is required in the above section						
Play in Golf Tournament, Teach Private Golf Lessons & Test Different Golf Products Covered person's status, relationship or commitment to the institution, entity, business or person named above						
	Covered person's status,	relationship or commitmen	nt to the institution, entity, business or person named a	above		
	10044 South Flint Dri		Utah 84904			
	Address and phone numb	per of the institution, entity	, business or person named above			
C.	Select the category that	applies to yourself and the	e outside institution, entity, business or person identific	ed in subsection (B) above:		
	I receive or have ag	greed to receive compensati	ion for assisting a person or business entity in a transac	tion involving Salt Lake County.		
	I am an officer, dir Salt Lake County.	ector, agent, employee or t	he owner of a substantial interest in a business entity t	hat is subject to the regulation of		
	I am an officer, dire		wner of a substantial interest in a business entity that d	loes or anticipates doing business		
	with Salt Lake Cou	•	st that creates a potential or actual conflict with my pul	blic duties		
			ial or actual conflict with my public duties.	one duties.		
D.			al conflicts of interest identified above, i.e., the nature of sifnecessary. (This disclosure statement will not be a			
	I play in various golf tournaments around the Salt Lake Valley as a professional golfer. At the golf course I provide private instruction for individuals and groups of all ages. Being a professional golfer I have the ability to test multiple products so I can better inform the golfing community each year.					
	and genning deminin	,, ,				
O(.G)						
			Covered Person's Signature			
SU	BSCRIBED and SWORN	N to before me this11	_day of			
		NOTARY PUBLIC GISELA PICENO	NOTARY PUBLIC, Residing in			
		697291	Sait Lake	T		
[S]		OMMISSION EXPIRES EPTEMBER 26, 2021	County	State		
		STATE OF UTAH				

NOTARY PUBLIC GISELA PICENO GOTZOS COMMISSION EXPIRES SEP TEMBER 26, 2021 STATE OF UTAH

(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.)

	der the provisions of the County Officers and Employees Disclosure Act, §§ 1/-16a-1 et seq., U.C.A., 1953 as amended, 1, the undersigned,
un	der penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
A.	MARTIN SENSEN 585 468 1814
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	20015. STATE ST. 34700
	Covered Person's County Address/Volunteer's Address
В.	WASARH SOCLER CLUB
Ь.	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
	1188 SANUTSPLFX DR. KAYKURUE , UT 199905
	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:
о.	
	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 Salt Lake County.
	I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
	Thold 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 MEMBERZ, WE GO BUTSNESS WITH COMPANTES THAT DO BUTSNESS W/ SLLD.
	DOARD MEMBERS, WE BU BUSINES WITH COMPANYES
	TU- 0. 0. 71. 18- 18/ 5/10
	IMIT UD BULLSNESS OU SCOOT
	•
	Medicaless
	Covered Person's Signature
211	BSCRIBED and SWORN to before me this Athay of Conuary , 20 18
30.	BSCRIBED and SWORN to before me this day of the day of
	almo atundara
	INA LANDRY NOTARY PUBLIC - STATE OF UTAM NOTARY PUBLIC - STATE OF UTAM
	My Comm. Exp 06/07/2020
SE	AL] Commission # 690406 County State

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A Committee of the Comm

(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.	Diane L. Jensen-Booth	2nd Asst. Golf Professional		385-468-1460
	Covered Person	Position, or County Division for which	n you are employed or volunteering	County/Volunteer's Phone
	12800 South 1040 West	Riverton, UT 84065		
	Covered Person's County	Address/Volunteer's Address		
B.	Professional Golfers As	ssociation of America		
	Outside institution, entity is required in the above s	r, private business or person in which the ection	e Covered Person has a personal or busi	ness interest for which disclosure
	Apprentice of the PGA			
	Covered person's status,	relationship or commitment to the instit	ution, entity, business or person named	above
	Utah Section PGA office	te 580 west 3300 South SLC, UT 84	115	
	Address and phone numb	er of the institution, entity, business or p	person named above	
C.	Select the category that	applies to yourself and the outside instit	ution, entity, business or person identifi	ed in subsection (B) above:
	I receive or have ag	reed to receive compensation for assisting	ng a person or business entity in a transac	ction involving Salt Lake County.
	I am an officer, dire Salt Lake County.	ector, agent, employee or the owner of a	substantial interest in a business entity	that is subject to the regulation of
		ctor, agent, employee or owner of a subs	stantial interest in a business entity that of	loes or anticipates doing business
	with Salt Lake Cou	nty. at or other financial interest that creates:	a potential or actual conflict with my pu	blic duties.
		terest that creates a potential or actual co		
D.		on of the actual or potential conflicts of it. County. Use more sheets if necessary.		
		essional who plays in PGA affiliated gol		
	tournaments and being	County employment scope, and not on co a PGA representative.	ounty time. On occasion I receive golf	product from vendors for playing in go
	tourisments and comp	a r or r r oprocessimility or		
			1	
		•	Covered Person's Signature	n-Bookl
	nganmen tawany		1	
SU.	BSCRIBED and SWORN	to before me thisday of	/ANJINRY , 20/8.	11
	JAI	CQUELINE BRESLAWSKI Notary Public State of Utah	NOTARY PUBLIC, Residing in	hurki
		Comm. No. 678648		,
{ÇE	[AL]	omm. Expires Aug 11, 2018	SACT LAKE County	State
FOT	" LL]		County	

(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*.)

. Adam Johnson	Riverbend Golf Course F	First Assistant Golf Professional	385-468-1460
Covered Person		r which you are employed or volunteering	County/Volunteer's Phone
12800 South 104	0 West Riverton, UT 8406	\$5	
Covered Person's Count	y Address/Volunteer's Address		
Professional Gol	fers' Association		
Outside institution, entit		nich the Covered Person has a personal or busi	ness interest for which disclosure
is required in the above			
Member of the P	AND ASSESSMENT		
Covered person's status,	relationship or commitment to the	e institution, entity, business or person named	above
		outh SLC, UT 84115 801-566-1009	5
Address and phone num	ber of the institution, entity, busine	ess or person named above	
. Select the category that	applies to yourself and the outside	e institution, entity, business or person identifi	ied in subsection (B) above:
I receive or have a	greed to receive compensation for	assisting a person or business entity in a transact	ction involving Salt Lake County.
I am an officer, dir Salt Lake County.	ector, agent, employee or the own	er of a substantial interest in a business entity	that is subject to the regulation of
	ector, agent, employee or owner of	f a substantial interest in a business entity that of	does or anticipates doing business
with Salt Lake Co	unty.		
		reates a potential or actual conflict with my pu ctual conflict with my public duties.	iblic duties.
		icts of interest identified above, i.e., the nature	of the relationship of each business
entity or person with the is completed.)	e County. Use more sheets if nece	essary. (This disclosure statement will not be a	accepted as valid unless this section
I am a PGA Golf	Professional who plays in	PGA Affiliated Golf Tournaments an	d receive cash for placing in
payout. These Po	GA Affiliated Golf Tournam	ents are outside my Salt Lake Coun oduct from vendors for playing in the	ity employment scope and no
PGA representat		oduct from veridors for playing in the	s gon tournament and being t
, 5, , , , , , , , , , , , , , , , , ,			
		, , /	
		Adam Linesia	
		Covered Person's Signature	
UDSCRIPED and SWORN	N to before me this <u>20</u> day o	of SANUARY, 2018.	
UBSCRIBED and SWORI	v to before the this day o		
	NOTADY BURLING	Liverto	ON UTOU
	NOTARY PUBLIC IVAN CHAVARRIA	NOTARY PUBLIC, Residing in	11 -
	696266 COMMISSION EXPIRES	SOLY LAKK	UTON
SEAL)	JULY 25, 2021	County	State

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

Un und	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)
A.	Jason Kelw Sports Coordinator, Parks Reseation 801 864 0969 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	31 L Street # 406 Sic UT 84103 Covered Person's County Address/Volunteer's Address
В.	Sterling Furniture Property Holdings 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
	On- Site Apartment Manager Covered person's status, relationship or commitment to the institution, entity, business or person named above
	2051 5 1100 E Sult Lake City, UT 801 467 1579 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.	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.)
	Sterling Furniture is a business in Salt Lake County.
	I do not have any direct links or ties to anyone specific
	who would have a conflict with solt lake county. I
	simply manage an apartment complex nights, weekends, and
	On-call. Covered Person's Signature
SU	BSCRIBED and SWORN to before me this 23 day of 3 d
[SI	ANDREW VELARDE NOTARY PUBLIC, Residing in NOTARY PUBLIC, Residing in State of Utah Comm. No. 687041 My Comm. Expires Jan 29, 2020 State

ANUREW VELARDE Notary Public State of Utah Outrin No. 687041 My Comm. Espires Jun 23, 2020

(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*.)

Α.	A. Keith J. LaCome 1st Assisstant Golf Professional	385-468-1440
	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	6080 Wasatch Blvd, Salt Lake City, UT 84121	
	Covered Person's County Address/Volunteer's Address	
В.	B. PGA of America - Keith J. LaCome	
	Outside institution, entity, private business or person in which the Covered Person has a personal or business required in the above section	ess interest for which disclosure
	Golf Instructor, Golf Product Testing, Professional Golf Tournaments	
	Covered person's status, relationship or commitment to the institution, entity, business or person named at	oove
	149 e 7720 s Midvale, UT 84047	
	Address and phone number of the institution, entity, business or person named above	
C.	C. Select the category that applies to yourself and the outside institution, entity, business or person identified	d in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a transact	ion involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity the	at 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 do	pes 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 pub I hold a personal interest that creates a potential or actual conflict with my public duties.	lic duties.
	1 hold a personal interest that creates a potential of actual conflict with my public duties.	
D.		
	entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be act is completed.)	cepted as valia uniess this section
	I am a Private Golf Instructor for which I receive compensation. I play golf tournaments as a Profession	al Golfer and I test various golf
	products so i can have a better understanding of the product we sell to pass on to the consumer.	
	ha I live	
	Covered Person's Signature	
SU	SUBSCRIBED and SWORN to before me this 23 day of 300 day of 300 , 20 .	
	NOTARY PUBLIC TO RIGHT WIND	illo
	KRISTINE WINFIELD NOTARY PUBLIC, Residing in	wy
	COMMISSION EXPIRES Salt lake	Whah
[S]	SEAL1 OCTOBER 20, 2021 County	State

. .

MOTARY PUBLIC KRISTIAL SHIP STAND SOLVEN COMMISS ON EXPIRES OCTOBER OO, 2021
STATE OF UTAN

(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	Benjamin Larsen	Program Coordinator		(385)468-1375
••	Covered Person	Position, or County Division for	which you are employed or volunteering	County/Volunteer's Phone
	2266 Evergreen Av	enue Millcreek, UT 84109		
	Covered Person's County	Address/Volunteer's Address		
В.	Jordan School Dist	rict		
	Outside institution, entity is required in the above s		nich the Covered Person has a personal or busi	ness interest for which disclosure
	Coach/advisor			
	Covered person's status,	relationship or commitment to the	e institution, entity, business or person named	above
		iew Drive West Jordan, U		
	Address and phone numb	per of the institution, entity, busine	ess or person named above	
C.	Select the category that	applies to yourself and the outside	e institution, entity, business or person identifi	ed in subsection (B) above:
	I receive or have ag	reed to receive compensation for	assisting a person or business entity in a transaction	ction involving Salt Lake County.
		ector, agent, employee or the own	er of a substantial interest in a business entity	that is subject to the regulation of
	Salt Lake County. I am an officer, dire	ector, agent, employee or owner of	a substantial interest in a business entity that	does or anticipates doing business
	with Salt Lake Cou			1.1'11
			reates a potential or actual conflict with my pu ctual conflict with my public duties.	blic duties.
D.			cts of interest identified above, i.e., the nature essary. (This disclosure statement will not be a	
	involvement with Sorganization in reg	Salt Lake County Pool rent gards to these transactions	an High School. Other teams in the calls but, I am not involved in any caps. There could be a potential for a cod to include aquatics. At the current	eacity for either inflict of interest
			_	
			My Mar	
			Covered Person's Signature	
		71		
SU	BSCRIBED and SWORN	to before me this 22 day of	2010	
			Mande Mexico	R
		ANDE MERCER	NOTARY PUBLIC, Residing in	
	NOTAR MV Co	Y PUBLIC - STATE OF UTAH omm. Exp. 08/21/2018 mmission # 678973	Saltlake	114
SE	COL	mmission # 678973	County	State

BRANDE MERCER HOTARY PUBLIC - STATE OF STAN My Comm. Exp. 08/21/2018 Commission # 678973

(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. JAY P. O'FEE 2ND ASSISTANT GOLF PROFESSIONAL (385)468-1440

Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 6080 S. WASATCH BLUD. SLC, UT 84121
Covered Person's County Address/Volunteer's Address PGA OF AMERICA

Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Covered person's status, relationship or commitment to the institution, entity, business or person named above 2584 E. SUNDOWN AVE. SLC UT 84121 (801) 661 8499
Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section AS AN ASSISTANT GOLF PROFESSIONAL WITHIN SALT LAKE COUNTY, I is completed.) PLAY IN PROFESSIONAL EVENTS, TEACH PUDIVIDUAL & GROUP GOLF LESSONS AS WELL AS TESTING & USING VARLOUS EQUIPMENT IN THE INDUSTRY THAT ASSISTS IN GROWING THE GAME OF GOLF FROM MULTIPLE COMPANIES SUCH AS FOOTSOY, TITLEIST, DAKKEY, TAYLORMADE, & TRAVIS MATHEW SUBSCRIBED and SWORN to before me this NOTARY PUBLIC TERRA NICOLE RAME Y PUBLIC, Residing in 681613 COMMISSION EXPIRES FEBRUARY 2, 201 [SEAL]

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

STATE OF UTAH

(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.)

	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)
A.	MARK OWEN GOLF 385-468-1411
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 9600 5 7400 W W.T. W.T. BAOGO
	Covered Person's County Address/Volunteer's Address
B.	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
	149 OLIVE BERRY LANE DRAPER UT 84020
	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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	I AM A PROFESSIONAL GOLFER IN THE PGA. I PLAY
P	ROFESSIONAL TOURNAMENTS FOR MONEY, I AM
5	SPONSORED BY COMPANIES TO PLAY IN THESE EVENTS
T	HESE EVENTS ARE ON MY TIME, OUTSIDE OF THE SCOP OF SAN LAKE COUNTY. AN OF MY WINNINGS ARE
6	SANT LAKE COUNTY: ACC ST
9	REPORTED TO THE IRS.
	Covered Person's Signature
SU	BSCRIBED and SWORN to before me this
[SI	NOTARY PUBLIC PATRICK JARVIS 682495 COMMISSION EXPIRES FEBRUARY 9, 2019 STATE OF UTAH NOTARY PUBLIC, Residing in Sut lulue County State
-	

Ay Commission Expires on: June 11, 2018 Comm. Number: 677231

(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*.)

der penames of perjury, make the following statement regarding my personal of business interest. (19)	
EMILIE MARTINSON PARKS & RECREATION	385-468-1294
Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
855 W. CALIFORNIA AVE., SALT LAKE CITY, UT 84104	
Covered Person's County Address/Volunteer's Address	
UTAH STATE BOARD OF EDUCATION (ACEESS COMMITTEE)	
Outside institution, entity, private business or person in which the Covered Person has a personal or be is required in the above section	ousiness interest for which disclosure
ADVISORY COMMITTEE MEMBER	
Covered person's status, relationship or commitment to the institution, entity, business or person name	ned above
250 E. 500 S. SALT LAKE CITY, UT 84111	
Address and phone number of the institution, entity, business or person named above	
Select the category that applies to yourself and the outside institution, entity, business or person iden	ntified in subsection (B) above:
I receive or have agreed to receive compensation for assisting a person or business entity in a train	nsaction involving Salt Lake County.
I am an officer, director, agent, employee or the owner of a substantial interest in a business ent Salt Lake County.	ity that is subject to the regulation of
I am an officer, director, agent, employee or owner of a substantial interest in a business entity the	nat does or anticipates doing business
with Salt Lake County.	, muklio dutico
I hold an investment or other financial interest that creates a potential or actual conflict with my I hold a personal interest that creates a potential or actual conflict with my public duties.	public duties.
Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nate entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not lis completed.</i>)	ure of the relationship of each business be accepted as valid unless this section
Though my involvement with this advisory committee to the Utal (USBE) is not directly associated to any work with Salt Lake Countitional & Unity Fitness Center as my employer on the USB	unty, I have listed Sorenson E website.
Any meetings I attend on behalf of this committee are done outs speak on behalf of Salt Lake County or Sorenson Multicultural & vising the USBE. This document is being submitted in the event	Unity Fitness Center whe
Covered Person's Signature	
BSCRIBED and SWORN to before me this 23 ^{to} day of January , 20]	<u>8</u>
\sim	
JOYCE R. PETERSON NOTARY PUBLIC Residing in	elen

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

Salt Lake



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:

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

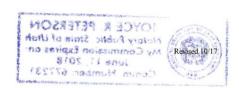
DISCLOSURE REQUIRED

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

- A. Receives or agrees to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County;
- B. Is an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County;
- 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;
- Holds an investment or other financial interest that creates a potential or actual conflict between the interest and the covered person's public duties; or
- E. Hold some personal interest that creates a potential or actual conflict between the interest and the covered person's public duties.

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

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



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

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) Position, or County Division for which you are employed or volunteering Covered Person's County Address/Volunteer's Address Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Covered person's status, relationship or commitment to the institution, entity, business or person named above Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) Covered Person's Signature SUBSCRIBED and SWORN to before me this day of NOTARY PUBLIC, Residing in OTARY PUBLIC - STATE OF UTAH ly Comm. Exp. 08/21/20 Commission # 678973 State

[SEAL]

(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.	Dustin Pimm	Assistant Golf Profession	nal	801-856-0816
	Covered Person	Position, or County Division for w	hich you are employed or volunteering	County/Volunteer's Phone
		V. Taylorsville, UT 84123		
	Covered Person's Cou	unty Address/Volunteer's Address		
В.	Professional Go	olfers America (PGA)		
	outside institution, er is required in the above		h the Covered Person has a personal or busin	ness interest for which disclosure
	Class B-8 Assis	stant Golf Professional (Apprentice)	nstitution, entity, business or person named	ohovo
				bove
		Champions Palm Beach Gardens, FL 3 umber of the institution, entity, business		
	•	•		
C.	Select the category t	hat applies to yourself and the outside in	nstitution, entity, business or person identifica-	ed in subsection (B) above:
	I receive or have	e agreed to receive compensation for ass	isting a person or business entity in a transact	ction involving Salt Lake County.
	I am an officer, Salt Lake Coun		of a substantial interest in a business entity t	that is subject to the regulation of
	I am an officer,	director, agent, employee or owner of a	substantial interest in a business entity that of	loes or anticipates doing business
	with Salt Lake (tes a potential or actual conflict with my pu	blic duties.
		al interest that creates a potential or actual		one dances
D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relating or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as is completed.)				of the relationship of each business ccepted as valid unless this section
	required to repo and they provide	ort all of my winnings to the IRS. I am s	A of America. I play in golf tournaments for sponsored by golf equipment companies to le them with feedback. These tournaments a my own time and not on county time.	play in these tournaments
				7
			(1) 1./1	/ 、
			Covered Person's Signature	~~
SU	BSCRIBED and SWC	ORN to before me this <u>10th</u> day of	January , 20 18 .	
	007	DEBBIE BIANA	ablou To	m
		DEBBIE PIMM NOTARY PUBLIC-STATE OF UTAH	NOTARY PUBLIC, Residing in	111.1.
		COMMISSION# 696936	Salt Lake	Wall
[SI	EAL]	COMM. EXP. 09-15-2021	County	State

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

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

A.	Joshua Reusser Aquatics Manager, Parks and Recreation 385-468-1544
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	1044 East Sugarmont Dr. Salt Lake City, UT 84106
	Covered Person's County Address/Volunteer's Address
B.	Queer Utah Aquatic Club, Inc. (QUAC)
	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure s required in the above section
	Swim Coach
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	638 Scenic Hills Drive North Salt Lake, UT 84054
	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	1 15 Common 1 1 common confidence de servición de servición de servición de servición de la common de comm
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 volunteer swim coach for QUAC. I also am an aquatics manager at the facility where QUAC practice I receive no compensation for coaching. QUAC does pay for my USMS membership and QUAC membership dues. All billing and contract questions and dealings between Salt Lake County Parks and Re and QUAC, go through our other aquatics coordinator or facility director.
	Covered Person's Signature
SU	SCRIBED and SWORN to before me this day of, 20 8.
	INA LANDRY NOTARY PUBLIC, Residing In
	My Comm. Exp 06/07/2020
[SE	

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INA LANDRY
NOTARY PUBLIC - STATE OF UTAH
My Comm. Exp 06/07/2020
Commission # 080/09

(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.	Joshua Reusser	Aquatics Manager, Parks and Recreation	385-468-1544
	Covered Person Positi	on, or County Division for which you are employed or volunteering	County/Volunteer's Phone
		Dr. Salt Lake City, UT 84106	
	Covered Person's County Addre	ess/Volunteer's Address	
B.			
	Outside institution, entity, privat is required in the above section	te business or person in which the Covered Person has a personal or business	ness interest for which disclosure
	Board member on the R	ose Park Community Council	
		ship or commitment to the institution, entity, business or person named	above
	768 Oakley St. Salt Lake	e City, UT 84116	
		e institution, entity, business or person named above	
C.	Select the category that applies	to yourself and the outside institution, entity, business or person identifie	ed in subsection (B) above:
	I receive or have agreed to	receive compensation for assisting a person or business entity in a transact	tion involving Salt Lake County.
	I am an officer, director, ag	gent, employee or the owner of a substantial interest in a business entity t	hat is subject to the regulation of
	Salt Lake County. I am an officer, director, ag	gent, employee or owner of a substantial interest in a business entity that d	oes or anticipates doing business
	with Salt Lake County.	er financial interest that creates a potential or actual conflict with my pul	
		nat creates a potential or actual conflict with my public duties.	one duties.
D.	Give a detailed description of the entity or person with the Count is completed.)	e actual or potential conflicts of interest identified above, i.e., the nature of y. Use more sheets if necessary. (<i>This disclosure statement will not be actual or potential conflicts of interest identified above</i> , i.e., the nature of your conflicts of the property of	of the relationship of each business excepted as valid unless this section
	county to advocate for the that involve the Salt Lake	nember on the Rose Park Community Council. The Council e citizens within the Rose Park neighborhood. I recuse re County Parks and Recreation division. Any communica would at most be an invite to present at a community me	nyself from any decisions ition I have with Salt Lake
		Covered Person's Signature	
SUI	SSCRIBED and SWORN to before	re me this day of January, 2018.	
			•
	INA LA	NDRY NOTARY PUBLIC, Residing in	
	My Comm. Exp	SIAIE OF GIANT I	

INA LANDRY
NOTARY PUBLIC -STATE OF UTAM
My Comm. Exp 08/07/2020
Commission # 680/108



(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.	Joshua Reusser Aquatics Manager, Parks and Recreation	385-468-1544
	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	1044 East Sugarmont Dr. Salt Lake City, UT 84106	
	Covered Person's County Address/Volunteer's Address	
B.	Starfish Aquatics Institute (SAI) Outside institution, entity, private business or person in which the Covered Person has a personal or bus	· · · · · · · · · · · · · · · · · · ·
	is required in the above section	iness interest for which disclosure
	Independent contractor for SAI teaching StarGuard Instructor Classes and perfo	rming occasional audits
	Covered person's status, relationship or commitment to the institution, entity, business or person named	above
	PO Box 525, Lincolnshire, IL 60069	
	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 identifi	ied in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction	ction involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity Salt Lake County.	that is subject to the regulation of
	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 pu	ablic duties
	I hold a personal interest that creates a potential or actual conflict with my public duties.	ione duties.
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be a is completed.</i>)	of the relationship of each business accepted as valid unless this section
	I perform occasional audits and teach StarGuard Instructor classes for authorize compensated by SAI for each audit or class taught. I do not perform SAI contract County facilities. Nor do I receive compensation from SAI for in-house instructor taught at Salt Lake County facilities. Salt Lake County is an authorized provider of	ted audits for Salt Lake development courses
	Covered Person's Signature	-
SUE	BSCRIBED and SWORN to before me this 23rd day of	
	, 20-3	
	Ina Landy	
	INA LANDRY NOTARY PUBLIC, Residing IT	
[SE.	My Comm. Exp 06/07/2020	State

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

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

A.	Patrick Riley Asst. Golf Prof		385-458-1500
	Covered Person Position, or Cour	nty Division for which you are employed or volunteering	County/Volunteer's Phone
	4197S. 1300W. Taylorsville, Utah 84123		
	Covered Person's County Address/Voluntee	er's Address	
D	Professional Calfors Association Of Association	in (D.C.A.)	
В.	Professional Golfers Association Of Ameri Outside institution, entity, private business	or person in which the Covered Person has a personal or b	usiness interest for which disclosure
	is required in the above section	T.	
	Class B-8 Asst. Golf Professional (Appren	ntice)	
	Covered person's status, relationship or com	nmitment to the institution, entity, business or person nam	ed above
	Address and phone number of the institution		
	•	***************************************	
C.	Select the category that applies to yourself	and the outside institution, entity, business or person iden	tified in subsection (B) above:
	I receive or have agreed to receive con	npensation for assisting a person or business entity in a tran	nsaction involving Salt Lake County.
		yee or the owner of a substantial interest in a business enti	ty that is subject to the regulation of
	Salt Lake County.	yee or owner of a substantial interest in a business entity th	at does or anticipates doing business
	with Salt Lake County.		
		l interest that creates a potential or actual conflict with my	public duties.
	I hold a personal interest that creates a	a potential or actual conflict with my public duties.	
D.	entity or person with the County. Use more	potential conflicts of interest identified above, i.e., the nature sheets if necessary. (This disclosure statement will not be	
	is completed.)		
		0	
		Tatruck Ricey	
		Covered Person's Signature \(\mathcal{O} \)	
SU	JBSCRIBED and SWORN to before me this	9th day of January , 2018	3
		Neldon Da	
-	DEDDIE DIMI	suasu pr	
100	DEBBIE PIMM	NOTARY PUBLIC, Residing in	1.1.1
ONE.	NOTARY PUBLIC STATE OF UTAH	Salt lake	utah

County

State

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

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seg., 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.) 385.468.1434 Brian F. Schramm Golf Course Manager County/Volunteer's Phone Position, or County Division for which you are employed or volunteering Covered Person 6080 S. Wasatch Blvd, Salt Lake City, UT 84121 Covered Person's County Address/Volunteer's Address Professional Golfers Association of America-PGA Professional-Brian F. Schramm 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 PGA of America Member Covered person's status, relationship or commitment to the institution, entity, business or person named above 100 Avenue of the Champions, Palm Beach Gardens, FL 33418 Address and phone number of the institution, entity, business or person named above 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.) As a member of the Professional Golfers Association I play in professional events, teach golf lessons, public appearances, written material, product test various equipment to assist in product development for the game of golf for companies likeTitleist, Footjoy, Travis Mathew, Linksoul, Oakley, and other golf related product manufacturer's. Covered Person's Signature SUBSCRIBED and SWORN to before me this Z3_day of _ NOTARY PUBLIC CARRIE CRYER 680482 [SEAL] OMMISSION EXPIRES OCTOBER 02, 2018 STATE OF UTAH

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

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

A.	Troy Watkins	Head Golf Professiona		385-468-1500
	Covered Person	Position, or County Division for	which you are employed or volunteering	County/Volunteer's Phone
		W. Taylorsville, UT 84123		
	Covered Person's Co	unty Address/Volunteer's Address		
В.	Professional G	olfers America (PGA)		
	Outside institution, en is required in the above		ich the Covered Person has a personal or busi	ness interest for which disclosure
	Class A P.G.A.	. Member		
	Covered person's stat	tus, relationship or commitment to the	institution, entity, business or person named	above
		Champions Palm Beach Gardens, FI		
	Address and phone no	umber of the institution, entity, busine	ss or person named above	
C.	Select the category t	that applies to yourself and the outside	institution, entity, business or person identifi	ied in subsection (B) above:
	I receive or have	e agreed to receive compensation for a	ssisting a person or business entity in a transa	ction involving Salt Lake County.
	I am an officer, Salt Lake Coun		er of a substantial interest in a business entity	that is subject to the regulation of
		director, agent, employee or owner of	a substantial interest in a business entity that	does or anticipates doing business
		ment or other financial interest that creat interest that creates a potential or ac	eates a potential or actual conflict with my putual conflict with my public duties.	ıblic duties.
D.	Give a detailed description or person with is completed.)	ription of the actual or potential conflic in the County. Use more sheets if neces	ets of interest identified above, i.e., the nature ssary. (This disclosure statement will not be a	of the relationship of each business accepted as valid unless this section
	am required to tournaments an	report all of my winnings to the IRS. and they provide me with equipment to	e PGA of America. I play in golf tournament I am sponsored by golf equipment companie test and provide them with feedback. These y and are played on my own time and not on	s to play in these tournaments are played
			1	
			Covered Person's Signature)
SU	BSCRIBED and SWC	ORN to before me this10thday o	f January , 20 18	
_			Dilda D	1/1
	NOTARY	BBIE PIMM PUBLIC-STATE OF UTAH SSION# 696936	NOTARY PUBLIC, Residing in	Ut
SI	COMM.	EXP. 09-15-2021	County	State

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

	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)
A.	Steve Yound 385-468-1400
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	421 E Vine St. Murray Utah 84107
	Covered Person's County Address/Volunteer's Address
B.	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
	A-1 member
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	561-624-8400
	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	
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	As a professional at the golf course I provide private lessons for individuals and
	As a professional at the golf course I provide private lessons for individuals and groups of all ages. Being a professional I have the ability to test various productions
	so as to better inform the golfing public each year.
	All-
	Covered Person's Signature
SU	BSCRIBED and SWORN to before me this 11 day of January, 20 18.
	forance Mercel
	BRANDE MERCER NOTARY PUBLIC, Residing in
· ·	My Comm. Exp. 08/21/2018
[SI	EAL] Commission # 678973 County State

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2-STATE OF UTAH XD. 08/21/2018 20 # 678973	My Commission
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(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section. If multiple forms for multiple outside business entities or persons are submitted, only one form need be signed and notarized.)

Ur	nder the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
	Will Kochere Pardes and Recreation
A.	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.	Sugare House Community 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
	VICE Charp
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	Address and phone number of the institution, entity, business or person named above
C.	Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of
	Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business
	with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
	I hold a personal interest that creates a potential or actual conflict with my public duties.
D.	entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section
	Jugar House residents with both SCC and SCCO governments as It perfaces to community concerns.
	Jugae 170005 - Lessel de la commencia concernos.
	governments as It periodes to community constituting
	William
	Covered Person's Signature
SU	UBSCRIBED and SWORN to before me this 26 day of January, 2018. by Willie Carson Koch
	AMY BETH BJORGE AMUS Presson
	Notary Public State of Utah NOTARY PUBLIC, Residing in
	April 15, 2018 Comm. Number: 676489 Salt Lake Utah
[S	EAL] County State



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:

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

DISCLOSURE REQUIRED

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

- A. Receives or agrees to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County;
- Is an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County;
- Is an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County;
- 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.

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

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. Arthur Lova to Supervisor Parks Department
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 3383 So 300 Eq. Salt Lake City UT.
Covered Person's County Address/Volunteer's Address T. 05 Legal process

Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure L Serve Court papers, On my off Arst how Soul in SI county Jail and other County Facilities Covered person's status, relationship or commitment to the institution, entity, business or person named above 2195 W. 5400 To Toylorsville UT 84129 801-964-9393
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.) Covered Person's Signature SUBSCRIBED and SWORN to before me this 25th day of Jan Jury **EDITH VIGIL** NOTARY PUBLIC . STATE OF UTAH COMMISSION NO. 687290 [SEAL] COMM. EXP. 02/18/2020

(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. Amber Milne Program Manager - Parts a Rec 395-460-1835

Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone Magna Recreation Center (P+R 54700) 3270 5 8400W, Magna UT 846444 Covered Person's County Address/Volunteer's Address B. Starfish Aquatics 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 SAI Starfish Swim Instructor Trainer - Faculty - 5 star Covered person's status, relationship or commitment to the institution, entity, business or person and above 1 Diamond Causeway Ste 21-226, Savannah, GA 31406 877-465-4545
Address and phone number of the institution, entity, business or person named above 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 My position at starfish does not cause a conflict with my duties at 9LCO PBR. is completed.) Covered Person's Signature SUBSCRIBED and SWORN to before me this _____day of __ 20 197 **B BEESLEY** Notary Public . State of Utah Commission # 673083 COMM. EXP. 01-20-2018 [SEAL]

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Commission # 673083
COMM. EXP. 01-20-2018

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