

7.3.1

# DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

A. DAVID E GEE Cultural Center Budget Committee (801) 560-2099  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
150 S. 200 E. #6103 SLC UT 84111  
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

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

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

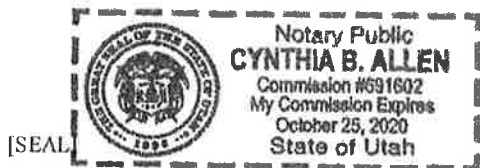
- ☐ I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- ☐ I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.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

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

My daughter Shnleane GEE is a member of Mayor's Staff.  
I am a Board Member of Red Butte Garden and  
Pioneer Theatre Company, both of which receive  
ZAP Funds

[Signature]  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 28th day of February, 2018.



[Signature]  
NOTARY PUBLIC, Residing in

Salt Lake  
County

Utah  
State

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

7.3.2

**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

A. MICHAEL PETERSON TRCC 801-718-1421  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

6663 CRISTOBAL ST.  
Covered Person's County Address/Volunteer's Address

B. CITY OF COTTONWOOD HEIGHTS  
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

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

2275 E. BENJAL BLVD.  
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.)

Michael Peterson  
Covered Person's Signature

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



[SEAL]

Ina Landry  
NOTARY PUBLIC, Residing in  
Salt Lake County UT  
County State

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

7.3.3

**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

A. Tawnee McCay TRCC 801-634-7692  
 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
3364 Kollman Way Riverton, UT 84065  
 Covered Person's County Address/Volunteer's Address

B. Riverton City  
 Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section  
Riverton City Council member  
 Covered person's status, relationship or commitment to the institution, entity, business or person named above  
12830 S. 1700 W. Riverton, UT 84065  
 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.)

Tawnee McCay  
 Covered Person's Signature

SUBSCRIBED and SWORN to before me this 3<sup>rd</sup> day of April, 2018.



[SEAL]

Ina Landry  
 NOTARY PUBLIC, Residing in  
Salt Lake UT  
 County State

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

7.3.4

**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

A. Ron BIGELOW TRCC 801-232-0373  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
4658 So. Water Wood Drive  
Covered Person's County Address/Volunteer's Address

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

Mayor  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
3600 Constitution Blvd.  
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.)

Ron Bigelow  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 30<sup>th</sup> day of April, 2018.



Inna Landry  
NOTARY PUBLIC, Residing in  
Salt Lake UT  
County State

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



7.3.5

**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

A. D. BLAIR CAMP TRCC Advisory Board 801-264-2600  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
5025 So. STATE ST. MURRAY UT 84107  
Covered Person's County Address/Volunteer's Address

B. NONE  
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. N/A  
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.)*

[Signature]  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 30<sup>th</sup> day of April, 2018

[SEAL]



Ina Landry  
NOTARY PUBLIC, Residing in  
Salt Lake County UT  
County State

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

7.3.6

**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

A. Jacqueline M. Biskupski TRCC Board 801-535-7743  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
451 S. State St. Dr PO Box 145474 SLC, UT 84114  
Covered Person's County Address/Volunteer's Address

B. SLC Corp.  
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  
Mayor  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
451 S. State St.  
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.)

Jacqueline M. Biskupski  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 30<sup>th</sup> day of April, 2018.



[SEAL]

Ina Landry  
NOTARY PUBLIC, Residing in  
Salt Lake UT  
County State

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

7.3.7

**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

A. JOSEPH E. HATCH TRCC ADVISORS BOARD (801) 268-404  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

5320 S 900 E SUITE 120, SALT LAKE CITY, UT 84117  
Covered Person's County Address/Volunteer's Address

B. LAW PRACTICE & UTAH LABOR COMMISSION APPEALS 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

LAW PRACTICE / OWNER ; LABOR COMMISSION / EMPLOYEE  
Covered person's status, relationship or commitment to the institution, entity, business or person named above

LAW PRACTICE / ABOVE ; LABOR COM 160 E 300S 84114  
Address and phone number of the institution, entity, business or person named above

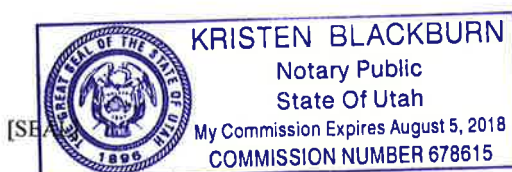
C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:

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

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

SOME OF MY LAW PRACTICE CLIENTS HAVE DEALINGS WITH SALT LAKE COUNTYS; OCCASSIONALL SALT LAKE COUNTY IS A PARTS BEFORE THE LABOR COMMISSION APPEALS BOARD

SUBSCRIBED and SWORN to before me this 30th day of April, 2018.  
Covered Person's Signature



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

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



7.3.8

**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

A. Annie Keller District Attorney Law Clerk  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
35 East 500 South, Salt Lake City, UT 84111  
Covered Person's County Address/Volunteer's Address

B. We Are Yoga  
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  
Part time employee  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
2645 E. Parleys Way #100 Salt Lake City, UT 84109 801-419-0286  
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.)

Teach yoga currently 1 hr per week

[Signature]  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 12<sup>th</sup> day of April, 2018.



[SEAL]

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

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



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

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

A. Annie Keller District Attorney Law Clerk  
Covered Person\* Position\* or County Division County Phone

35 east 500 south, salt lake city, UT 84111  
Covered Person's County Address

B. Jewish Community Center  
Outside institution, entity, private business or person involved

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

2 N Medical Dr, Salt Lake City UT 84113 801-581-0098  
Outside institution, entity, business or person's address and phone number

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

Teach yoga twice a week at JCC & affiliate location, Friendship Manor.

Annie Keller  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 12<sup>th</sup> day of April, 2018.



[SEAL]

Emily Gaitin  
NOTARY PUBLIC, Residing in  
Salt Lake County, Utah  
County State

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

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

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

7.3.9

**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

A. Christina Mullins CASA 801 803 4071  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
2516 S 8000 W Magna, UT 84044  
Covered Person's County Address/Volunteer's Address

B. ~~The District Attorneys office~~ CASA  
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  
Covered person's status, relationship or commitment to the institution, entity, business or person named above  
450 S State Street SLC, UT 801 574 1472  
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:

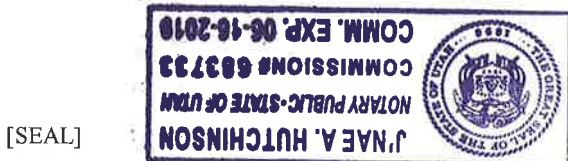
- ☐ I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- ☐ I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- ☐ 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 visit with CASA kids, which are appointed to me. It is filed with the courthouse. I also send reports of each visit to the Guardian Ad Litem and the CASA Supervisor Heather Allen via email.

Christina Mullins  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 23 day of APRIL, 2018.



[Signature]  
NOTARY PUBLIC, Residing in  
SALT LAKE UT  
County State

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

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

A. Austin Memmott D.A. Law Clerk - West Jordan  
Covered Person\* Position\* or County Division County Phone

West Jordan, Utah  
Covered Person's County Address

B. Office of Guardian Ad Litem  
Outside institution, entity, private business or person involved

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

cheris@utcourts.gov  
Outside institution, entity, business or person's address and phone number

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

I will be doing work for the Guardian Ad Litem Summer Legal Clinic for school credit through the College of Law. I will be doing law clerk tasks, including going to court hearings & working on cases.

Austin Memmott  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 4 day of May, 2018.

[SEAL]



[Signature]  
NOTARY PUBLIC, Residing in  
SALT LAKE UT  
County State

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

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

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



**DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST**

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

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

Lori  
Field  
Oakley

A. Lori Field Oakley  
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone  
1770 E Millbrook Rd. Salt Lake City, UT 84106  
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

\_\_\_\_\_  
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:

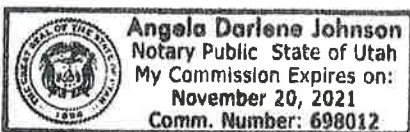
- ☐ I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
- ☐ I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
- ☐ 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.)

Cultural Core Budget Committee

[Signature]  
Covered Person's Signature

SUBSCRIBED and SWORN to before me this 20<sup>th</sup> day of February, 2018.



Angela Darlene Johnson  
NOTARY PUBLIC, Residing in  
USA Utah  
County State

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