8.1

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

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 private business interests. ( <i>Type or print all information</i> .)
um	
A.	Kalph Chamness Chief Deputy 385-468-7755
	Covered Person* Position* of County Division County Phone
	2001 South State Street, Suite 53-600, She, MTJM190-1210
	Covered Person's County Address
B.	Ging Champers
D,	Outside institution, entity, private business or person involved
	Director
	Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract
	Ytah Transit Anthory, 669 West 200 South, She, UT8410
	Outside institution, entity, business or person's address and phone number
C.	, , , , , , , , , , , , , , , , , , , ,
	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.)
	Sponse
	Covered Person's Signature
	22
SU	JBSCRIBED and SWORN to before me this O day of O, 20/7.
	1 8021
-	JOYCE R. PETERSON Chycu W Veln
G	Notary Public State of Utah
P	My Commission Expires on: June 11, 2018  Satt Lake  UT
[S]	Comm. Number: 677231 County State
TI	

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 persists.

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

Un	der the provisions of the County Off der ponalties of perjury, make the fol	icers and Emplo llowing statemer	yees Disclosure Ant regarding my p	Act, §§ 17-16a-1 et secrivate business intere	q., U.C.A., 1953 as a sts. ( <i>Type or print a</i>	mended, I, the undersigned, <i>Il information</i> .)
A.	Kalph Wormness	<u> </u>	Chief De	County Division	385-46	County Phone
	Covered Person*	100	Position* of		T 7 100	County Phone
	LOUI SOUTH STN	TE Shed	55-60	0,52C, U	T84190.	-1210
	Covered Person's County Address	/	/	1		
В.	Eng Chamae	15				
	Outside institution, entity, private b	usiness or perso	n involved			
	Cty Manaya					
	Describe covered person's status, en Holland City Outside institution entity, business	4580	South 2	2300 East,		or personal contract  M 89/17
C.	the nature of the economic interes between the business, institution, p accepted as valid unless this section	et or employment person, etc. and	nt you hold in the Salt Lake County	private business. A	lso describe the relat	tionship with or transaction
	Spouse					
				M	~~	
		0.5		vered Person's Signa	iture	
SU	BSCRIBED and SWORN to before	me this 20	day of	le	, 20/7.	
[S	JOYCE R. PETERS Notary Public State of My Commission Expir June 11, 2018 Comm. Number: 67	f Utah es on:	S Co	DIARY PUBLIC, Re	siding in	State

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8.2

## 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,

A. Brailey C. Johnson  District Attorneys office  Covered Person* Position* or County Division  2001 S. Statt Sq. S3-600, SLC 4th B 34190  Covered Person's County Address  B. Utah National Guard  Outside institution, entity, private business or person involved  The Advicate (military Attorney)  Describe covered person's status, employment or investment in the outside institution, entity, private business or person's address and phone number  (801) 430-449  C. Describe below the nature of the assistance you are providing to the institution, entity, private business or the nature of the economic interest or employment you hold in the private business. Also describe the between the business, institution, person, etc. and Salt Lake County. Use more sheets if necessary. (The accepted as valid unless this section is completed.)  Provide military legal addice to units and Sollier reliable with alaboral bund. Perform of the Soldier reliable with alaboral bund. Perform of the Soldier reliable.  Covered Person's Signature.	Com Lilla Mar.
Covered Person's County Address  B. Wish National Guard  Outside institution, entity, private business or person involved  Tright National Guard  Describe covered person's status, employment or investment in the outside institution, entity, private business  Utah National Guard 12953 5 Minusterian In , Pry  Outside institution, entity, business or person's address and phone number  (801) 430-44  C. Describe below the nature of the assistance you are providing to the institution, entity, private business or the nature of the economic interest or employment you hold in the private business. Also describe the between the business, institution, person, etc. and Salt Lake County. Use more sheets if necessary. (This accepted as valid unless this section is completed.)  Provide military legal admice to units and Solder relationships and thomas of the solder relationships.  Covered Person's Signature.	(385) 468-7763
Covered Person's County Address  B. Utah National Guard  Outside institution, entity, private business or person involved  Tudge Advocate (military Attorney)  Describe covered person's status, employment or investment in the outside institution, entity, private business or outside institution, entity, business or person's address and phone number  (801) 433-44  C. Describe below the nature of the assistance you are providing to the institution, entity, private business or the nature of the economic interest or employment you hold in the private business. Also describe the between the business, institution, person, etc. and Salt Lake County. Use more sheets if necessary. (This accepted as valid unless this section is completed.)  Provide military legal advice to units and Soldler validation of the National business. Perform of the Soldler relationship.  Covered Person's Signature.  Covered Person's Signature.	County Phone
Outside institution, entity, private business or person involved  Trigge Adrocate (military Attorney)  Describe covered person's status, employment or investment in the outside institution, entity, private business or person's address and phone number  Outside institution, entity, business or person's address and phone number  (301) 430-44  C. Describe below the nature of the assistance you are providing to the institution, entity, private business or the nature of the economic interest or employment you hold in the private business. Also describe the between the business, institution, person, etc. and Salt Lake County. Use more sheets if necessary. (This accepted as valid unless this section is completed.)  Frought military legal admice to units and Soldler rule which had and broad broad. Perform of the Soldler rule and thinning.  Covered Person's Signature.	
Outside institution, entity, private business or person involved  They Advocate (military Attorney)  Describe covered person's status, employment or investment in the outside institution, entity, private business or person's address and phone number  Outside institution, entity, business or person's address and phone number  (801) 430-44  C. Describe below the nature of the assistance you are providing to the institution, entity, private business or the nature of the economic interest or employment you hold in the private business. Also describe the between the business, institution, person, etc. and Salt Lake County. Use more sheets if necessary. (This accepted as valid unless this section is completed.)  From the military legal admits the units and Soldler with and hardonal business. Perform or the Soldler relationship.  Covered Person's Signature.	
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Covered Person's Signature	relationship with or transaction
Covered Person's Signature	ded duples
Covered Person's Signature	
21	1-
SUBSCRIBED and SWORN to before me this <u>2/</u> day of	
JOYCE R. PETERSON Notary Public State of Utah My Commission Expires on: June 11, 2018 Comm. Number: 677231  JOYCE R. PETERSON NOTARY PUBLIC, Residing in Salt Lake County	State

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

A.	Sadie Pyne Covered Person*	Position or County Division	County Phone
	335 S · 200 6 · #3 Covered Person's County Address	Bantiful, UT 84010	
В.	Outside institution, entity, private business or person	HOSPITAL on involved	
	Describe covered person's status, employment or in	id IC+ nvestment in the outside institution, entity, private	business, or personal contract
	50 N- Medical Dr. Outside institution, entity, business or person's add	SLC, VT 94132 Q	01-587-8230
C.	Describe below the nature of the assistance you are the nature of the economic interest or employme between the business, institution, person, etc. an accepted as valid unless this section is completed.)	ent you hold in the private business. Also describ	e the relationship with or transaction
	Greet a direct pat	rents à visitors.	
	2		
	ž.	Covered Person's Signature	me
SUB	SCRIBED and SWORN to before me this 27 da	y of DECEMBER, 2017.	16
	J'NAE A. HUTCHINSO  NOTARY PUBLIC-STATE OF UTA  COMMISSIONS 68373	NOTARY PUBLIC, Residing in	(W)
	COMM. EXP. 06-16-201	1	UTAH
		County	State

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A.	Linda Lucero DA's Office-WJ
	Covered Person* Position* or County Division County Phone
	7308 So. Ogal Hill Dr. West Jordan Ut 84081 Covered Person's County Address
В.	United States Postal Service
	Outside institution, entity, private business or person involved
	Part-time
	Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract
	Salt Lake City, 4+ (801)973-5501
	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.)
	Data Entry Operator - Enter information from scanned images of mail pieces that could not go through the machine.
	Covered Person's Signature
SUE	SCRIBED and SWORN to before me this and day of January . 20 18.
	ERIKA DIDERICKSEN NOTARY PUBLIC - STATE OF UTAH NOTARY PUBLIC, Residing in
	SEAS Commission # 681002 Saxt Lake Utah
	County State

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