81 1

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,

und	er penalties of perjury, make the following statement regarding my private business interests. (Type or print all information.)
Α.	May Fangupo Youth Worker 385-468-4452 Covered Person* Position* or County Division County Phone
В.	177 West Price Avenue Salt Lake City UT 84115 Covered Person's County Address Wasatch Youth Center (Turbuille Justice Services) Outside institution, entity, private business or person involved SuperUSOr Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract
	3534 South 700 West Salt Cake City UT 84119 801-265-3830 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.) MONITOR SUNEAUE PROGRAMS are being followed, wold group SESSIONS Let C.
	Man Lawyun Egyered Person's Signature
SUI	CAROL BLACK
[SE	AL] NOTARY PUBLIC STATE OF UTAH COMMISSION #697785 COMM. EXPIRES NOVEMBER 15, 2021 NOTARY PUBLIC, Residing in County State

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

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, under penalties of perjury, make the following statement regarding my private business interests. (Type or print all information.) Outside institution, entity, private business or person involved eacher Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract Outside institution, entity, business or person's address and phone number 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.) SUBSCRIBED and SWORN to before me this 24 day of NOTARY PUBLIC, Residing in **ALICIA MUNGUIA** lotary Public - State of Utah Comm. No. 696714 My Commission Expires on [SEAL] Jul 10, 2021

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.

*"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.

8.3



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. Daniel J. Martinez
Covered Person* Emergency Mire Yorth Services (385) 468-4610

Position* or County Division County Phone 1165 W Brandon wood Covered Person's County Address Murray UT 84123 B. Holiday Im Express
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 Suzul 5. Commerce Dr. Murray UT 94107

Outside institution, entity, business or person's address and phone number (801) 266-0800 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.) Part time, Front desk agent at hotel Covered Person's Signature SUBSCRIBED and SWORN to before me this **AUSTIN CLARK** Notary Public . State of Utah Commission # 697869 My Commission Expires November 23, 2021

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.

*"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.

8.4 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. LAUra Zepko Center for the Arts

Covered Person Position, or County Division for which you are employed or volunteering 385-468-1014 County/Volunteer's Phone SLC, UT 84101 50 W 200 S Covered Person's County Address/Volunteer's Address B. Cuisine Unlimited Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure part-time caterer/concessions worker
Covered person's status, relationship or commitment to the institution, entity, business or person named above 4641 S Cherry St SLC, VT 84123
Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above; I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I work several shifts monthly as a concessions employee for cuisine unlimited at Eccles theater. Eccles Theater is owned/operated by the salt Lake county center for the AAS, and cuisine Unlimited is the contracted food and beverage service for Eccles Theater. SUBSCRIBED and SWORN to before me this 22 day of January , 20/ LINDA C. DUFFY Notary Public State of Utah My Commission Expires on: June 16, 2018 Comm. Number: 676371

8.5 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. Kristina Popps, Rose Wagner Technical Director 385 468 1120 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 TATSE, Arts Fest, Music in the Box
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure 1st Vise - President, Stage Manager, and lighting designer, respectively 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.) - IATSE: I am the 1st VP of local 99, who has a contract with the county. To avoid conflict, I have informed Local 99 that I will attend no contract negotiation between SLCO CFA, and IATSE. I will stage manage the Arts Fest this Summer. Music in the Box I may design lights for a production, and do their shows in the Rose Blackbox SUBSCRIBED and SWORN to before me this PARKER C. STECK NOTARY PUBLIC, Residing in Notary Public State of Utah Commission Expires on: November 5, 2019 Comm. Number: 686065

[SEAL]

S.60

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

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

A.	Justin Stewart	M	ayor Administration	
	Covered Person		sion for which you are employed or volunteering	County/Volunteer's Phone
				•
	Covered Person's Con	unty Address/Volunteer's Add	ress	
В.	Utah Association	of Nurse Anesthetists		
	Outside institution, er	ntity, private business or person	n in which the Covered Person has a personal or busir	ness interest for which disclosure
	is required in the above	e section		
	Legislative Consu	ltant		
			t to the institution, entity, business or person named a	bove
			,, ,, ,, , ,	
	9765 North Meado			
	Address and phone m	imber of the institution, entity,	business or person named above	
C.	Select the category the	hat 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	on for assisting a person or business entity in a transac	tion involving Salt Lake County.
	I am an officer, Salt Lake Count	director, agent, employee or the	ne owner of a substantial interest in a business entity the	nat is subject to the regulation of
			wner of a substantial interest in a business entity that d	oes or anticipates doing business
	with Salt Lake (County.		
	I hold an investi	nent or other financial interest	that creates a potential or actual conflict with my pub	olic duties.
	I nota a persona	interest that creates a potentia	al or actual conflict with my public duties.	
D.	entity or person with	iption of the actual or potential the County. Use more sheets	conflicts of interest identified above, i.e., the nature of incressary. (This disclosure statement will not be accessary.	of the relationship of each business excepted as valid unless this section
	is completed.)	be representing the inte	erests of the CRNAs before the Utah state le	egislature
				giorataro.
				140
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			1 + 1	. /
			Chush)	\sim
		0.4	Covered Person's Signature	
~~~			M11/10 10	e
SU	BSCRIBED and SWO	RN to before me this	_day of	
			0 11119000	
	MIC	CHELLE M HICKS		
	NOTAR	Y PUBLIC -STATE OF LITAH	NOTARY PUBLIC, Residing in	232 W ==
	Myc	Comm. Exp 06/15/2020 commission # 672015	MCI	(/7
[SE	EAL]		County	State

## 8.7

#### 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.)

Ur un	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. ( <i>Type or print all information</i> .)
Α.	Nicholas Dynn Senior Policy advisor / Council 385.468.7456
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	2001 S. State Street
	Covered Person's County Address/Volunteer's Address
В.	Code 4 Defense, LLC Emerging Leaders Initiative
	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure
	is required in the above section
	Member (Gode 4) Board member (Emerging Leaders)
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	15/64 Battle Orive Bluffdale, UT (Code 4) N/A (Pmersion
	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.)
	Cogle 7: I There of the
í	Energing Leaders: I am a member of the board. It is a nonprofit entity that educate millennials about government, a encourage
1	entity that educate millenning about government, a encourage
	civic engagement
	1 that
	1 2 2 m
	Covered Person's Signature  F. Door a pour of 18
SU	BSCRIBED and SWORN to before me this 5th day of February, 2018.
	LINDA C. DUFFY
	Notary Public State of Utah My Commission Expires on: NOTARY PUBLIC, Residing in
	June 16, 2018 Comm. Number: 676371 Sult Labor Utah
SI	County State



Comm. Number: 67637

(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. Aimee Winder Newton

Covered Person Position, or County Division for which you are employed or volunteering

6511 Pikes Peak Ct. Taylorsville 84129 801-808,5103 County/Volunteer's Phone Figco, Inc. Private Child Abuse Utah ChamberWest

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 LISH Pikes Peak Ct, TVILL 84129 2121 S. State St. Ste 202 SCC 84115

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 Figco, Inc. - no potential conflict of interest PCAU- The county has donated money to them in the past. Chamber West - The country has donated money before LINDA C. DUFFY Notary Public State of Utah My Commission Expires on: June 16, 2018

(385) 468-0354



A. Jordan Gray

8.9



#### 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*.)

Project Manager/ Facilities Division

Covered Person*	Position* or County Division	County Phone
2001 S State Street, Salt Lake	City, UT 84190	
Covered Person's County Address		
None		
Outside institution, entity, private bu	siness or person involved	
N/A		
Describe covered person's status, en	ployment or investment in the outside institution, en	ntity, private business, or personal contract
N/A		
Outside institution, entity, business o	or person's address and phone number	
the nature of the economic interest	istance you are providing to the institution, entity, properties or employment you hold in the private business. A person, etc. and Salt Lake County. Use more sheets completed.)	Also describe the relationship with or transaction
None		
	Covered Person)	s Signature
CRIBED and SWORN to before me th	is 18th day of January , 20	18.
Notary Publi	MCPHEETERS c State of Utah sion Expires on: nor 4, 2020 NOTARY PUBLIC, R	yhe Victhaet
[SEAL Comm. Nu	mber: 692580 Salt Lake	e County Clerk, Salt Lake City, 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.

*"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.

Version Date: 3/19/2015



P

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.	RYAN S. HENRIE PROJ. MANAGER - FM 385.468.0339
Covered Person's County Address  B. Outside institution, entity, private business or person involved  Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract  Outside institution, entity, business or person's address and phone number  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.)  N/A  SUBSCRIBED and SWORN to before me this	
В.	NONE
	Outside institution, entity, private business or person involved
	Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract
	Outside institution entity business or person's address and obone number
Ξ.	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.)
	N/A
	1 A Y E
	Covered Person's Signature
SUE	SCRIBED and SWORN to before me this day of , 20
	A HOTOLALA
A	BESSIE TSORTANIDIS Notary Public State of Utah NOTARY MUBLIC Residing in
	Notary Public State of Utah My Commission Expires on: July 6, 2020
16	Comm. Number: 689845
	County

^{*&}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."

## 811

#### DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

[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.	Arla Vivona Fiscal Coordinator, Aging and Adult Services	385-468-3177
	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	2001 South State Street Ste. S1-600 Salt Lake City, UT 84190	
	Covered Person's County Address/Volunteer's Address	*
В.	No Private business of parson in which the Covered Person has a personal or business required in the above section	incss interest for which disclosure
	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 identifi	ed in subsection (B) above:
	l 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.  I am an officer, director, agent, employee or owner of a substantial interest in a business entity that with Salt Lake County.  I hold an investment or other financial interest that creates a potential or actual conflict with my put I hold a personal interest that creates a potential or actual conflict with my public duties.	does or anticipates doing business
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> )	
	Occasionally provide clothing alteration services for coworkers.	
	Covered Person's Signature	
SU	BSCRIBED and SWORN to before me this 18 day of January .2018	ē Ē
	MEREDITH JOHN Notary Public State of Viath My Commission Expires on: July 15, 2019 Comm. Number: 684052  MEREDITH JOHN NOTARY PUBLIC, Residing in Salt Lake City	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 refiled every January, as long as the potential conflict exists.

County

State

8.12

(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. :	Stephnie Gyllenskog Office of Regional Development	3854684854
	Covered Person Position, or County Division for which you are employed or volunteering 2001 S State St., Ste S2100	County/Volunteer's Phone
	Covered Person's County Address/Volunteer's Address	
В.	n/a	
	Outside institution, entity, private business or person in which the Covered Person has a personal or business required in the above section	siness interest for which disclosure
	Covered person's status, relationship or commitment to the institution, entity, business or person name	d above
	Address and phone number of the institution, entity, business or person named above	
С.	Select the category that applies to yourself and the outside institution, entity, business or person identification.	ified in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a trans	saction involving Salt Lake County.
70	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity.  I am an officer, director, agent, employee or owner of a substantial interest in a business entity tha	
	with Salt Lake County.  I hold an investment or other financial interest that creates a potential or actual conflict with my properties of the properties of	public duties.
Э,	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 is completed.</i> )	
	e.	
	An-	
	Covered Person's Signature	
SUE	BSCRIBED and SWORN to before me this 26 day of January 20_1	(F
	ERIKA S FIHAKI Notary Public State of Utah COMMISSION #698612	
·cr	My Commission Expires January 22, 2022 Salt Lake	LAT.
SE	AL] County	State

8,13



## SALT LAKE COUNTY DISCLOSURE STATEMENT

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

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

Under the provisions of the Utah Public Employees' and Officers' Ethics Act, §§ 67-16-1 et seq., U.C.A., 1953 as amended and 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*.)

pe	naities of perjury, make the following statement regarding my private business interests. ( Type or print all information.)
Α.	William E. Cosgrove, MD Board of Health.  County Employee Employed in (County Division) County Phone
	County Employee Employed in (County Division) County Phone
	3747 Prospector Circle, Cuttorwood Heights, Utnh 84/21
	Employee's Address
В.	
	Outside institution, entity, private business or person involved
	Describe county employee's position or investment in the outside institution, entity, private busine ss, or personal contract
	bescribe county employee's position or investment in the outside institution, entity, private business, or personal contract
	Outside institution, entity, business or person's address and phone number
	,
С.	Describe below the nature of the assistance you are providing to the institution, entity, private business or person named
	above, or describe the nature of the economic interest or employment you hold in the private business. Also describe the
	relationship with, or transaction between, the business, institution, person, etc. and Salt Lake County. Use more sheets if
	necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)
	100
	(e/2Codacorr
	Employee Signature
	1111
	SUBSCRIBED and SWORN to before me this day of, 20, 20, 20, 20
	* Oally Threat
	HEATHER EDWARDS
	NOTARY PUBLIC, STATE OF UTAM  My Comm. Exp April 28, 2020
	Commission # 688784
	[SEAL] County State
	[

This statement is a public document. It must be filed with the officer's, employee's, or board member's immediate supervisor, division director, department director or elected official, and the COUNTY COUNCIL. It must be filed when the potential conflict arises.

institution, or person

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

Under the provisions of the Utah Public Employees' and Officers' Ethics Act, §§ 67-16-1 et seq., U.C.A., 1953 as amended and 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.)

١.	JEFFREY WARD
	Covered Person* Position* or County Division County Phone
	4049 Aura Dr. SCC W
	Covered Person's County Address
	none
	Outside institution, entity, private business or person involved
	NONE
	Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract
	NUNE
	Outside institution, entity, business or person's address and phone number
	Describe below the nature of the assistance you are providing to the institution, entity, private business or person namedabove, or describes 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 in necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)
	F)
	Covered Person's Signature

This statement is a public document. It must be filed through the covered person's chain of command to the immediate supervisor, volunteer or community liaison, division director, department head or elected official, district attorney's office 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

day of

SUBSCRIBED and SWORN to before me this

HEATHER EDWARDS
NOTARY PUBLIC -STATE OF UTAH
My Comm. Exp April 28, 2020
Commission # 688784

*"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.



# SALT LAKE COUNTY DISCLOSURE STATEMENT

8.15

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

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

Under the provisions of the Utah Public Employees' and Officers' Ethics Act, §§ 67-16-1 et seq., U.C.A., 1953 as amended and 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*.)

	County Employee	Employed in (County Division) County Phone	14
-			
	Employee's Address	21	
В.			_
	Outside institution, entity, private business or p	person involved	
		OARD OF HEALTH	
	Describe county employee's position or investigation of the second secon	tment in the outside institution, entity, private busine ss, or personal \$109 , 801-455-7706	contract
	Outside institution, entity, business or person'	's address and phone number	
C.	above, or describe the nature of the economic relationship with, or transaction between, the	ou are prov iding to the institution, entity, private business or person interest or employment you hold in the private business. Also describusiness, institution, person, etc. and Salt Lake County. Use more of be accepted as valid unless this section is completed.)	ribe the
	¥.		
		KuerellKBoyth	
		Employee S	Signature
	SUBSCRIBED and SWORN to	before me this day of anum, 20	018.
	HEATHER EDWARDS	3 Coolin Edwards	
	My Comm. Exp April 28, 2020	NOTARY PUBLIC, Re	siding in
	Commission # 688784	- Attlake u	tah
	[SEAL]	County	State

## Mayor's Office: Council Agenda Item Request Form

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

Date Received	
(office use)	

Date of Request	02.07.18
Requesting Staff Member	Michelle Hicks
Requested Council Date	02.13.18
Topic/Discussion Title	Disclosure Statements
Description	Carlton Christensen
	Andrea Valverde
	Valerie Walton
Requested Action ¹	Consent
Presenter(s)	
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

**Erin Litvack** 

Deputy Mayor, County Services

Rick Graham

Deputy Mayor, Operations

**Karen Hale** 

Deputy Mayor, Community & External Affairs

Darrin Casper

Deputy Mayor, Finance & Administration February 7, 2018

Aimee Winder-Newton Salt Lake County Council 2001 South State Street Salt Lake City, Utah 84190

Dear Charwoman Winder-Newton,

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

- Carlton Christensen Utah Foundation, Salt Lake City Mosquito Abatement District, Utah Center for Neighborhood Stabilization, Salt Lake Valley Emergency Communications Center, Salt Lake Valley Emergency Communications Center
- Andrea Valverde Utah Coalition of La Raza, Voto Latino Chapter at the University of Utah, Utah Democratic Hispanic Caucus
- Valerie Walton Former Employee of the Housing Authority of the County of Salt Lake (2007-2013)

Respectfully,

Erin Litvack
Deputy Mayor/CAO

mh/

(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.) Carlton J Christensen Department Director- Regional Transportation, Housing and Economic Development 385-468-7032 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 2001 S State Street Suite S2-100; PO Box 144575 Salt Lake City, UT 84114-4575 Covered Person's County Address/Volunteer's Address Utah Foundation Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Board of Trustees - Representing Salt Lake County Covered person's status, relationship or commitment to the institution, entity, business or person named above 150 S State Street, Suite 444; Salt Lake City, UT 84111 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. 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.) Utah Foundations provides independent research and analysis on public policy, making recommendations to government and other policy issues facing our community. Salt Lake County is a member of the Utah Foundation and I have been asked to represent them by the Mayor on their Board of Trustees day of __ SUBSCRIBED and SWORN to before me this _ **ERIKA S FIHAKI** NOTARY PUBLIC, Residing in **Notary Public** 

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 COMMISSION #698612

ommission Expires January 22,

[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.)

Carlton J Christensen Department Director-Regional Transportation, Housing and Economic Development 385-468-7032 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone

2001 S State Street Suite S2-100; PO Box 144575 Salt Lake City, UT 84114-4575

Covered Person's County Address/Volunteer's Address

### Salt Lake City Mosquito Abatement District

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 appointed by Salt Lake City Mayor/Council representing City Council District 1

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

2020 N. Redwood Road; Salt Lake City, UT, 84116 (801)355-9221

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

C.	Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.

I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.

I hold a personal interest that creates a potential or actual conflict with my public duties.

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

The Salt Lake City Mosquito Abatement District (SLCMAD) is a Special Service District with its own mission, bylaws, taxing status, and governing authority. Because its boundaries closely mirror Salt Lake City, its members are appointed by the Mayor and City Council. The Board is responsible for overseeing the district's budget, mission, and daily activities. The District has broad powers to act expediently to meet the emergency needs of rapid mosquito development and avoidance of public health and nuisance hazards. The SLCMAD may take all necessary and proper steps for the extermination of mosquitoes, flies, crickets, grasshoppers and other insects and to abate as nuisances all stagnant pools of water or other breeding places. Salt Lake County collects taxes on behalf of the board, and they also may participate in tax increment project areas involved with Salt Lake City.

SUBSCRIBED and SWORN to before me this _

5 day of Febru

**ERIKA S FIHAKI Notary Public** State of Utah **COMMISSION #698612** 

Commission Expires January 22, 2022

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.)

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.) Carlton J Christensen Department Director- Regional Transportation, Housing and Economic Development 385-468-7032 A Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 2001 S State Street Suite S2-100; PO Box 144575 Salt Lake City, UT 84114-4575 Covered Person's County Address/Volunteer's Address B. Salt Lake City Mosquito Abatement District Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disc is required in the above section Board member - Representing government sector Covered person's status, relationship or commitment to the institution, entity, business or person named above 6880 S 700 W: Midvale, UT 84047 (801) 316-9112 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.) Utah Center for Neighborhood Stabilization is parent non-profit organization set up jointly by Utah Bankers Association and Utah League of Credit Union to promote and assist with affordable housing and economic development. It includes Utah Center for Affordable Housing, Utah Small Business Growth Initiative, Housing Plus. They own, develop and assist other non-profit housing providers as well as small businesses with assistance to create housing and employment. I serve as a board member representing government. _day of Febr 20 18 SUBSCRIBED and SWORN to before me this = **ERIKA S FIHAKI** NOTARY PUBLIC, Residing in **Notary Public** State of Utah

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

**COMMISSION #698612** 

Commission Expires January 22, 2022

[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. Carlton J Christensen Department Director- Regional Transportation, Housing and Economic Development 385-468-7032

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

2001 S State Street Suite S2-100; PO Box 144575 Salt Lake City, UT 84114-4575

Covered Person's County Address/Volunteer's Address

### Salt Lake Valley Emergency Communications Center

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

Board Member appointed by Mayor McAdams to represent Salt Lake County's interest on the board

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

### 5360 Ridge Village Dr; West Valley City, UT 84118

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

С.	Sele	ect 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.
	П	I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.  I hold a personal interest that creates a potential or actual conflict with my public duties.

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

Board member representing Salt Lake County on operational and budgetary decisions in that government agency established for the processing and dispatching of 911 and other emergency calls.

SUBSCRIBED and SWORN to before me this 5 day of February 2018

ERIKA S FIHAKI
Notary Public
State of Utah
COMMISSION #698612
My Commission Expires January 22, 2022

NOTARY PUBLIC, Residing in

Salt Lake

State

[SEAL]

DISCLOSURE OF PERSONAL OR I	FINANCIAL	INTEREST
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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.) e Myor's Office 385-468-701 or County Divisity for which you are employed or volunteering County/Volunteer's Phone 2001 South State Street Ste N2-100 is required in the above section Treasurer Covered person's status, relationship or commitment to the institution, entity, business or person named above 801-613-8257 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.) No actual or potential conflicts of interest that I can identify. SUBSCRIBED and SWORN to before me this NOTARY PUBLIC, Residing in MICHELLE M HICKS NOTARY PUBLIC -STATE OF UTAH My Comm. Exp 06/15/2020 Commission # 672015

(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.) for which you are employed or volunteering Ste. N2-100 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 Co. 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. l 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 dufies. 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 There are no actual or potential conflicts of interest that I can ebruali SUBSCRIBED and SWORN to before me this MICHELLE M HICKS **QTARY PUBLIC -STATE OF UTAH** My Comm. Exp 06/15/2020 Commission # 672015 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.) Position, or County Division for which you are employed or volunteering 2001 South State Street Ste N2+00 Utah Demourativ Hispanic Cavas
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 2nd Viu Chair
Covered person's status, relationship or commitment to the institution, entity, business or person named above 801-792-7131 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. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) No actual or potential conflicts that I can identify. SUBSCRIBED and SWORN to before me this MICHELLE M HICKS Commission # 672015

(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 Disclos under penalties of perjury, make the following statement regarding r	ure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned,
Vale cil Walton, Mayor	's Office 385-468-7144
Covered Person Position, or County Division for whic	h you are employed or volunteering County/Volunteer's Phone
2001 S State Street S	SLC, UT Suite N4-930
Covered Person's County Address/Volunteer's Address	
B. Housing Authority of Outside institution, entity, private business or person in which the	F The County of Salt Can business interest for which disclosure
is required in the above section	1 2
Former employee	(2007-2013)
Covered person's status, relationship or commitment to the insti	
3013 3, 111am 9118	er, SCC UT
Address and phone number of the institution, entity, business or	person named above
C. Select the category that applies to yourself and the outside insti	tution, entity, business or person identified in subsection (B) above:
I receive or have agreed to receive compensation for assisti	ng a person or business entity in a transaction involving Salt Lake County.
I am an officer, director, agent, employee or the owner of a Salt Lake County.	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 sub with Salt Lake County.	ostantial interest in a business entity that does or anticipates doing business
I hold an investment or other financial interest that creates thold a personal interest that creates a potential or actual of	
	interest identified above, i.e., the nature of the relationship of each business. (This disclosure statement will not be accepted as valid unless this section
employed by the Housing Authority from 2007 perceived conflict of interest with competitive Procurement Standards, I will continue to rec	use myself from participating as a scorer on any an applicant until five years have passed since my last
	Covered Person's Signature
SUBSCRIBED and SWORN to before me thisday of	July 20 K
MICHELLE M HICKS  NOTARY PUBLIC -STATE OF UTAH  My Comm. Exp 06/15/2020  Commission 1-372015	NOTARY PUBLIC Residing in
[SEAL]	County State

# Mayor's Office: Council Agenda Item Request Form

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

Date Received	
(office use)	

Date of Request	January 31, 2018
Requesting Staff Member	Alison Weyher
Requested Council Date	next available
Topic/Discussion Title	Disclosure forms for Public Works and Municipal Services Staff
Description	Attached please find disclosure forms and letters from Division Directors for Public Works and Municipal Services Staff
Requested Action ¹	accept
Presenter(s)	
Time Needed ²	
Time Sensitive ³	
Specific Time(s) ⁴	
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 Mayor Rick Graham Deputy Mayor Chief Operations Officer



Rolen Yoshinaga
Division Director
Brittany Allen
Associate Division Director
Mike Durfee

Chief Building Official

January 22, 2018

Aimee Winder Newton, chair Salt Lake County Council 2001 South State Street Salt Lake City, UT 84114

Dear Chairwoman Newton:

Attached please find notarized Disclosure statements for the following Planning and Development Services Division employees:

Spencer Hymas Brittany Allen Brent Ursenbach

Please do not hesitate to contact me if you have further questions.

Sincerely,

Rolen Yoshinaga

Director



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*.)

Position* or County Division	County Phone
The state of the s	
s or person involved	Α.
ment or investment in the outside institution, entity, private	business, or personal contract
son's address and phone number	
mployment you hold in the private business. Also describ	e the relationship with or transaction
e event that a development application is sub	mitted to Salt Lake County
	70
Covered Person's Signature	
day of JANUAM, 20 B.	
ate of Utah  Figures on:  NOTARY PUBLIC, Residing in	×11
	ment or investment in the outside institution, entity, private son's address and phone number se you are providing to the institution, entity, private business mployment you hold in the private business. Also describe, etc. and Salt Lake County. Use more sheets if necessary leted.)  my spouse that invests in real estate. Some a event that a development application is submit, I would disclose my interest to my immediately day of Jawayay, 20 S.  Covered Person's Signature

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.

SPR

^{*&}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."



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.	Botton* AIR Prince 3 Development 385408 L01082  Covered Person* County Division County Phone
	2001 S. State St NB-1000 SLC, UT 84190 Covered Person's County Address
В.	Outside institution, entity, private business or person involved  MINIO OSTUMPS BEST MISCUTS  Outside institution, entity, private business or person involved
	FAMILY YVI (DMPANY OPERATED BY MY MUSICAND BIS SISTER BY Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract
	5505 S. RILLY UN MUVRAY UT 8AIDT 801-244-4337 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.)
	for hilping him. My husbands company sometimes
	for hilping him. My husbands company sometimes provides mascuts or other promotional Hems to county agencies upp, and UFA. His company was providing these before We met to I do not profit from these transaction
	UPD, and UFA. this company was providing these before
	Mr met 3 1 (10 Met brount thom mar hansaction
	Covered Person's Signature
SUB	SCRIBED and SWORN to before me this S day of ANARY, 2018.
1	DEBORAH K. JONES DEBORAH K. Jones
	Notary Public State of Utah Comm. Exp.: Feb. 8, 2021  NOTARY PUBLIC, Residing in
N N	Comm. Number: 693472

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.

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

of sold



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.)

Brent Ursenbach **Building Inspector** 385-468-6694 Covered Person* Position* or County Division County Phone

2001 S State St, N3-600 Salt Lake City, Utah 84190

Covered Person's County Address

Consulting Services: Building System- Mechanical, Fuel Gas, Energy; Design, Construction, Commissioning and Operations Outside institution, entity, private business or person involved

Part time-sole proprietor

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

1283 W 10550 S, South Jordan, Utah 84095 801-446-4899

Outside institution, entity, business or person's address and phone number

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.)

Sole proprietor working as an instructor, consultant and expert witness in building design, construction, operations; focused on mechanical and fuel gas systems, energy efficiency, sustainability and high performance building. Includes instruction and training services for educational seminars and classes, presented to design professionals, contractors, and code officials. No services provided for projects under construction within the jurisdiction of Salt Lake County Township Services. No services provided during hours working for Salt Lake County.

SUBSCRIBED and SWORN to before me this

**DEBORAH K. JONES** Notary Public State of Utah Comm. Exp.: Feb. 8, 2021

Comm. Number: 693472

NOTARY PUBLIC, Residing in

County

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

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**Ben McAdams** 

Mayor

Rick Graham

Deputy Mayor of Operations

Scott R. Baird, P.E.

Director, Public **Works Department** 

Kade D. Moncur, P.E., CFM

Director, Flood Control Engineering Division

FLOOD CONTROL **ENGINEERING DIVISION** 

Government Center 2001 South State Street Suite N3-120 Salt Lake City, Utah 84190

T 385-468-6600 F 385-468-6603

slco.org/flood-control

January 22, 2018

Aimee Winder Newton, chair Salt Lake County Council 2001 South State Street Salt Lake City, UT 84114

Dear Chairwoman Newton:

Attached, please find notarized Disclosure Statements for the following Flood Control and Engineering Division employees:

- 1. Hannah Murphy
- 2. Robert Bevan
- 3. Melvin Davis

Please do not hesitate to contact me if you have further questions.

Sincerely,

Digitally signed by Nauc Morrica. Date: 2018.01.22 13:33:10-07'00'

Kade Moncur, PE, CFM

**Division Director** 

Flood Control and Engineering



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

A.	Hannah Murphy Hydrologic Technician 385-468-6641 Covered Person* Position* or County Division County Phone	
	Sout Lake county Govt Center 2001 S. State St. Suite N3-120 SUGUT Covered Person's County Address	84190
В.	Trader Joe's Outside institution, entity, private business or person involved	
	crew member (part time employee)	

634 East 4005 Salt Lake City UT Outside institution, entity, business or person's address and phone number

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.)

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

I complete basic tasks in a specialty grocery store such as seving customers, cashiering, stocking produce, and cleaning areas of the store. I don't see any common or shared overlap between this work and my work as a Hydro seeh at the county, but completed this regardless.

7 day of KATRENA FREEMAN NOTARY PUBLIC, Residing in

SUBSCRIBED and SWORN to before me this

[SEAL]

Notary Public State of Utah My Commission Expires on: October 23, 2021 Comm. Number: 697562

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

County

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

on MB

Version Date: 3/19/2015



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.	Engineering Designer Robert Beyon
	Covered Person MARPosition* or County Division MARCounty Phone
	N3-600
	Covered Person's County Address
B.	Equity Real Estate
	Outside institution, entity, private business or person involved
	Realtor
	Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract
	1218 East 7800 South, Suite 105, Salt Lake City, Utah 801-859-7425
	Outside institution, entity, business or person's address and phone number
C.	Describe below the nature of the assistance you are providing to the institution, entity, private business or person named above, or describe the nature of the economic interest or employment you hold in the private business. Also describe the relationship with or transaction between the business, institution, person, etc. and Salt Lake County. Use more sheets if necessary. ( <i>This disclosure statement will not be accepted as valid unless this section is completed.</i> )
	I have a real estate license that I associate with Equity Real Estate - Solid
SUB	Covered Person's Signature  SCRIBED and SWORN to before me this Wind day of January 2016.  INA LANDRY  SOUTHWAY PUBLIC - STATE OF UTMAN  Sty Commission & 690408  Suff Lake County  County/###### County

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

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(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 un	nder the provisions of the County Officers and Employees Disclosure Act. §§ 17-16a-1 et seq., U.C.A., 1953 as amended, 1, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. ( <i>Type or print all information</i> .)
A.	MELVIN DAUIS Juspector GOI-554-1295 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
В.	2001 56 State SLC, Ufah \$4190  Covered Person's County Address/Volunteer's Address  High School Sports Office County Address or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
	The pendent Contractor  Covered person's status, relationship or commitment to the institution, entity, business or person named above  13540 50 2140 W RIVERTON W. S4065  Address and phone number of the institution, entity, business or person named above
C.	
	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 o Chica ate flight School Base ball to Foot half
	Covered Person's Signature
SU	BSCRIBED and SWORN to before me this 22 day of ANIAPI . 2018
[SI	DEBORAH K. JONES Notary Public State of Utah Comm. Exp.: Feb. 8, 2021 Comm. Number: 693472  DEBORAH K. JONES NOTARY PUBLIC, Residing in SALTIALE County State

#### January 22, 2018

Aimee Winder Newton, chair Salt Lake County Council 2001 South State Street Salt Lake City, UT 84114

Dear Chairwoman Newton:

Attached please find notarized Disclosure statements for the following Salt Lake County Landfill Division employees:

Karen Shaeffer Louis Pavlos

Please do not hesitate to contact me if you have further questions.

Sincerely,

John Ioannou

Solid Waste Management



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*.)

Karen Shaeffer	Scale house Supervisor	385-468-6376		
Covered Person*	Position* or County Division	County Phone		
6030 W California Ave SLC U	JT 84104			
Covered Person's County Address				
Aggressive Carpet Cleaning				
Outside institution, entity, private business or person involved				
Co- Owner				
Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract				
3274 W 6610 S West Jordan, UT 84084				
Outside institution, entity, business	or person's address and phone number			
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.)  This is a carpet cleaning business that is owned my my husband and myself. I do the books on a monthly basis.				
	-Karen Sha	410		
	Cavered Person's Signat	ure		
SCRIBED and SWORN to before me t	Gonzalez NOTABY PUBLIC Residue	005 WV ENA		
My Commission February 3 Comm. Number	Expires on: , 2019	e ut		

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

County

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

SPER

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. (Type or print all information.)
A.	Louis AV/03 Inspector # Jalt dake Solid Waste # 385-469-6
	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
В	Adina Salt Lake 780 South 5600 West S.L.C. UT. 84104
13	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
	Craig Dolton 801-322-1234
	Address and phone number of the institution, entity, business or person named above
Ċ.	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.)
	puis aulas
	Covered Person's Signature
SU	BSCRIBED and SWORN to before me this 18 day of 2018
	Cloud curt
	CAROL E. METZ NOTARY PUBLIC, Residing in
	NOTARY PUBLIC & STATE OF UTAH COMMISSION NO 697285 Salt hake Utah
SE	COMM. EXP. 10-13-2021 County State

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

SICE



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

A.	Covered Person*  Position* or County Division  County Phone
	Covered Person's County Address  Covered Person's County Address
B,	Outside institution, entity, private business or person involved
	Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract
	Outside institution, entity, business or person's address and phone number
C.	Describe below the nature of the assistance you are providing to the institution, entity, private business or person named above, or describe the nature of the economic interest or employment you hold in the private business. Also describe the relationship with or transaction between the business, institution, person, etc. and Salt Lake County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)
	inactive consulting company
	Λ0 1.
	Covered Person's Signature
SUB:	SCRIBED and SWORN to before me this SHM day of CAULANY, 2018.
	SEAL)  KATRENA FREEMAN Notary Public State of Utah My Commission Expires on: October 23, 2021  NOTARY PUBLIC, Residing in  Aut Lada County
	October 23, 2021 Comm. Number: 697562 County County State  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 orises and re-filed every January, as long as the potential conflict persists.

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

ough



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. Michael Barrett Program Manager 385-468-7097
Covered Person* Position* or County Division County Phone

2001 South State Street, Suite N4-930, Salt Lake City, UT 84190

Covered Person's County Address

B. Barrett & Cross, Baldauf Excavating

Outside institution, entity, private business or person involved

Expert Witness - Barrett & Cross, General Engineering, General Building Contractor Qualifier Baldauf Excavating

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

Barrett & Cross, 30 N Gould Street, STE 10263, Sheridan, WY 82801 801-301-4106. Baldauf Excavating, Richfield, Utah 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.)

Managing Member, Barrett & Cross -I serve as an expert witness in litigation for the construction industry. Baldauf Excavating - I am the General Engineering, General Building Qualifier. There is no relationship or transactions, potential or otherwise, between these companies and Salt Lake County

Covered Person's Signature

SUBSCRIBED and SWORN to before me this

day of

, 20

Not My

Notary Public State of Utah My Commission Expires on: October 23, 2021 Comm, Number: 697562

NOTARY PUBLIC, Residing in

County

State

Version Date: 3/19/2015

^{*&}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.

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State

Version Date: 3/19/2015



0.01

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*.)

Philippe Lanouette	Chief Deputy, County Surveyor's Office	385-468-8242	
Covered Person*	Position* or County Division	County Phone	
2001 S State St, Suite N1-			
Covered Person's County Addre	SS		
Silver Fork Pipeline Corp.			
Outside institution, entity, priva	te business or person involved		
	Board of Directors (unpaid, volunteer position)		
Describe covered person's statu	Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract		
P.O. Box 71592, SLC, UT 84			
Outside institution, entity, busin	ess or person's address and phone number		
the nature of the economic int	isiness or person named above, or describe scribe the relationship with or transaction ssary. (This disclosure statement will not be		
the contract of the contract o	aber of a 7-member Board of Directors of a non-profit, private, nomic interest with Salt Lake County.	, community water distribution company.	
	Covered Person's Signati	Hab	
JBSCRIBED and SWORN to before m	ne this 5th day of February, 2016.		
No	sa Ann Van Buskirk lary Public State of Utah NOTARY PUBLIC, Residing	n Bullille	
[SEAL]	Commission Expires on: December 23, 2020	IT	

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

County

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Comm. Number: 69259

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

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*.)

Α.	Philippe Lanouette	Chief Deputy, County Surveyor's Office	385-468-8242		
	Covered Person*	Position* or County Division	County Phone		
	2001 S. State St, Suite N1-4 Covered Person's County Address				
В.	Listener's Community Radio of Ut Outside institution, entity, private				
	On-air volunteer at not-for-profit community radio station  Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract				
	1971 W. North Temple, SLC	, UT 84116 801-363-1818			
	Outside institution, entity, busine	ss 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 nature of the economic interest or employment you hold in the private business. Also describe the relationship with or transacti between the business, institution, person, etc. and Salt Lake County. Use more sheets if necessary. (This disclosure statement will not accepted as valid unless this section is completed.)					
		miscellaneous volunteer assistance. No transactions, econ			
		Povered Person's Si	ignature ignature		
SUE	BSCRIBED and SWORN to before me	this 5th day of February, 20/13	8.		
	[SEAL]	Lisa Ann Van Buskirk Notary Public State of Utah My Commission Expires on: December 23, 2020 Comm. Number: 692591			

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