(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. Carolyn Hansen Director Division of Youth Services	3854684510				
Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone				
177 W Price Ave SLC, UT 84115	177 W Price Ave SLC, UT 84115				
Covered Person's County Address/Volunteer's Address					
B. Juvenile Justice Oversight Committee					
Outside institution, entity, private business or person in which the Covered Person has a personal or is required in the above section	business interest for which disclosure				
Board Member					
Covered person's status, relationship or commitment to the institution, entity, business or person nar	ned above				
N/A					
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 ide	entified in subsection (B) above:				
I receive or have agreed to receive compensation for assisting a person or business entity in a tra	• ,				
I am an officer, director, agent, employee or the owner of a substantial interest in a business en Lake County.	tity that is subject to the regulation of Sal				
I am an officer, director, agent, employee or owner of a substantial interest in a business entity to	hat 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 m	v public duties				
I hold a personal interest that creates a potential or actual conflict with my public duties.	y public duties.				
None of the above categories apply.					
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.)					
Meet quarterly to discuss outcomes of HB 235 and needs of youth in DJJS and DCFS cus	stody.				
declare under criminal penalty under the law of Utah that the foregoing is true and correct.					
Signed on the day of January , 2022 ,					
Date Month Year					
Salt Lake City, UT Salt Lake County					
City or other location, and state or county					
Carolyn Hansen					
Printed Name					
Carolyn J. Hansen Date: 2022.01.13 10:00:03 -07'00'					

Signature

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

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

Α.	Carolyn Hansen Director Division of Youth Services	3854684510				
71.	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone				
	177 W Price Ave SLC, UT 84115					
	Covered Person's County Address/Volunteer's Address					
В.	Shelter Kids, Inc.					
٥.	Outside institution, entity, private business or person in which the Covered Person has a personal or bus is required in the above section	iness interest for which disclosure				
	Board Member					
	Covered person's status, relationship or commitment to the institution, entity, business or person named	above				
	N/A					
	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 identif	ied in subsection (B) above:				
	I receive or have agreed to receive compensation for assisting a person or business entity in a transa					
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity Lake County.	that is subject to the regulation of Salt				
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that Salt Lake County.	does or anticipates doing business with				
	I hold an investment or other financial interest that creates a potential or actual conflict with my pro-	ublic duties.				
	I hold a personal interest that creates a potential or actual conflict with my public duties.					
	None of the above categories apply.					
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 - meet as needed to discuss needs of the youth served in After School, Milest SLCO DYS. Shelter Kids, Inc is a non profit partner who receives donations on behalf of SLC	Board member - meet as needed to discuss needs of the youth served in After School, Milestone and Shelter programs at				
	,					
I de	clare under criminal penalty under the law of Utah that the foregoing is true and correct.					
	13th January 2022					
Sig	ned on the Date day of Month , 2022 , Year ,					
	Salt Lake City, UT Salt Lake County					
at_	City or other location, and state or county					
Са	urolyn Hansen					
	nted Name					
Ca	arolyn J. Hansen Digitally signed by Carolyn J. Hansen Date: 2022.01.13 09:58:45 -07'00'					
_						

Signature

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

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

Α.	Carolyn Hansen	Director Division	n of Youth Services	3854684510			
•••	Covered Person	Position, or County Div	rision for which you are employed or volunteering	County/Volunteer's Phone			
	177 W Price Ave SLC, UT 84115						
	Covered Person's County	Address/Volunteer's Ad	ddress				
B.	Raise the Future						
	Outside institution, entity is required in the above so		son in which the Covered Person has a personal or bu	siness interest for which disclosure			
	Board Member	Board Member					
	Covered person's status, i	relationship or commitme	ent to the institution, entity, business or person name	d above			
	7414 S State Stre	eet Midvale, UT 8	34047				
	Address and phone numb	er of the institution, entit	y, business or person named above				
C.	Select the category that a	applies to yourself and th	e outside institution, entity, business or person identi	fied in subsection (B) above:			
	I receive or have ag	reed to receive compensa	tion for assisting a person or business entity in a trans	action involving Salt Lake County.			
		ctor, agent, employee or	the owner of a substantial interest in a business entity	y that is subject to the regulation of Salt			
	Lake County.	ctor agent employee or	owner of a substantial interest in a business entity tha	t does or anticinates doing husiness wit			
	Salt Lake County.		·				
			est that creates a potential or actual conflict with my putial or actual conflict with my public duties.	oublic duties.			
	None of the above of		itial of actual conflict with my public duties.				
D	_		ial conflicts of interest identified shows in the natur	a af tha ralationahin af anah husinasa			
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 - meet	ing quarterly to discus	s the needs of youth in foster care awaiting adop	otion.			
			•				
I de	clare under criminal penal	lty under the law of Utah	that the foregoing is true and correct.				
Sig	ned on the 13th day	of, 2022	2				
6	Date	Month Year	_,				
at _	Salt Lake City, UT Salt L	ake County					
	city or other location, and	state or county					
Ca	olyn Hansen						
Prin	ted Name						
Ca	rolyn J. Hanser	Digitally signed by Carolyn J. Date: 2022.01.13 09:55:39 -0	Hansen 7'00'				

Signature

(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.)

Carolyn Hansen Director Division of Youth Services	3854684510			
Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone			
177 W Price Ave SLC, UT 84115				
Covered Person's County Address/Volunteer's Address				
Utah Board of Juvenile Justice				
Outside institution, entity, private business or person in which the Covered Person has a personal or b is required in the above section	ousiness interest for which disclosure			
Board Member				
Covered person's status, relationship or commitment to the institution, entity, business or person name	ed above			
N/A				
Address and phone number of the institution, entity, business or person named above				
Select the category that applies to yourself and the outside institution, entity, business or person iden	tified in subsection (B) above:			
I receive or have agreed to receive compensation for assisting a person or business entity in a tran	nsaction involving Salt Lake County.			
I am an officer, director, agent, employee or the owner of a substantial interest in a business enti- Lake County.	ity that is subject to the regulation of Sal			
I am an officer, director, agent, employee or owner of a substantial interest in a business entity the Salt Lake County.	at does or anticipates doing business wit			
American Company of the Company of t	I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.			
None of the above categories apply.				
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.)				
Appointed board member of UBJJ. Meet monthly to discuss needs of youth and improvementally welfare systems.	ent of the juvenile justice and			
declare under criminal penalty under the law of Utah that the foregoing is true and correct.				
igned on the Tate day of Month , 2022 , Year ,				
Salt Lake City, UT Salt Lake County				
City or other location, and state or county				
arolyn Hansen				
rinted Name				
Carolyn J. Hansen Digitally signed by Carolyn J. Hansen Date: 2022.01.13 09:53:22 -07'00'				

Signature

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

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

Α	Carolyn Hansen	Director Div	ision of Yo	outh Services	3854684510
··· (Covered Person	Position, or Cour	ty Division for	which you are employed or volunteering	County/Volunteer's Phone
	177 W Price Ave	SLC, UT 84	115		
7	Covered Person's County	Address/Voluntee	er's Address		
B.	Optavia				
(Outside institution, entity, s required in the above se		or person in whi	ich the Covered Person has a personal or bus	iness interest for which disclosure
	Health Coach				
(Covered person's status, re	elationship or con	nmitment to the	institution, entity, business or person named	labove
	N/A				
7	Address and phone number	er of the institution	n, entity, busines	ss or person named above	
C.	Select the category that a	applies to yourself	and the outside	institution, entity, business or person identification	fied in subsection (B) above:
				ssisting a person or business entity in a transa	
				r of a substantial interest in a business entity	•
	•	ctor, agent, employ	yee or owner of	a substantial interest in a business entity that	does or anticipates doing business wit
	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.				
	None of the above ca	ategories apply.			
				ts of interest identified above, i.e., the nature stary. (This disclosure statement will not be	
	r			he United States looking to lose weight omy County position.	or maintain a healthy lifestyle.
I dec	lare under criminal penal	ty under the law o	f Utah that the f	oregoing is true and correct.	
Sion	ed on the day o	of January	2022		
	Date	Month	Year		
S	alt Lake City, UT Salt L	ake County			
Ci	ity or other location, and	state or county			
Car	olyn Hansen				
	ed Name				
Са	rolyn J. Hansen	Digitally signed by Ca Date: 2022.01.13 09:	rolyn J. Hansen 50:52 -07'00'		
					

Signature

(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	Tyra Armstrong Youth Worker S.L.County Division of Youth Service (385) 900-3101			
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone			
	3160 S. Branden Drive West Valley City, Utah 177 W. Price Ave SLC, UT 84115			
	Covered Person's County Address/Volunteer's Address			
В.	Rheems Replacement parts Distribution 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			
	Part time employee, packing heating parts			
	Covered person's status, relationship or commitment to the institution, entity, business or person named above			
	Rheems 475 3200 W STE D, Salt Lake City, UT 84119			
	Address and phone number of the institution, entity, business or person named above			
C.	Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:			
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.			
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt			
	Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with			
	Salt Lake County.			
	I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties.			
	None of the above categories apply.			
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			
υ.	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 part time at Rheems Replacement Parts distribution warehouse. My duties are to find heating parts in the ware house label & pack the products.			
I de	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.			
c:	aned on the 14 day of January , 2022			
Sig	Date Month Year			
at_	Salt Lake City Utah			
(City or other location, and state or county			
Ту	ra Armstrong			
Pri	nted Name			
	Typis Imspore			

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

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

A.	Chris Bereshnyi	Youth services		385-468-4500				
Λ.	Covered Person	Position, or County Division for	or which you are employed or volunteering	County/Volunteer's Phone				
	177 W Price Ave	177 W Price Ave SLC, UT 84115						
	Covered Person's County	y Address/Volunteer's Address						
В.	Humane Society	of Utah; Ruff Haven						
Д.	Outside institution, entity is required in the above se		hich the Covered Person has a personal or busi	ness interest for which disclosure				
	Volunteer							
	Covered person's status,	relationship or commitment to the	ne institution, entity, business or person named	above				
	4242 S 300 W M	urray 84107 801-261	-2919 ; 1370 S 400 W SLC 8411	5 801-251-6765				
	Address and phone numb	per of the institution, entity, busin	ness or person named above					
C.	Select the category that	applies to yourself and the outsi	de institution, entity, business or person identifi	ed in subsection (B) above:				
	I receive or have ag	reed to receive compensation for	assisting a person or business entity in a transac	ction involving Salt Lake County.				
		ector, agent, employee or the ow	ner of a substantial interest in a business entity	that is subject to the regulation of Salt				
		ector, agent, employee or owner	of a substantial interest in a business entity that	does or anticipates doing business with				
	I hold an investmen	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.						
	None of the above of		actual conflict with my public duties.					
	,—— <u>—</u>			- Cd - 1 d - 1 d - C - 1 1 d - d				
D.		Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed</i>)						
		nels, enrichment with cats.						
	7							
I d		alty under the law of Utah that th	e foregoing is true and correct.					
Sig	gned on the Tath Date day	of January , 2022 , Year ,						
	Youth Services, SLC							
at _	City or other location, and	d state or county	-					
Ch	ris Bereshnyi							
	nted Name	N						
	C							
Sig	nature							

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

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

Α.	Chris Bereshnyi	Youth services	385-468-4500			
n.	Covered Person 177 W Price Ave	Position, or County Division for which you are employed or volunteering SLC, UT 84115	County/Volunteer's Phone			
В.	-	Address/Volunteer's Address of Utah; Ruff Haven				
Б.	is required in the above se	, private business or person in which the Covered Person has a personal or businection	ness interest for which disclosure			
	Volunteer					
	•	relationship or commitment to the institution, entity, business or person named a				
		urray 84107 801-261-2919 ; 1370 S 400 W SLC 8411	5 801-251-6765			
	Address and phone numb	er 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 identifie	ed in subsection (B) above:			
	I receive or have ag	reed to receive compensation for assisting a person or business entity in a transac	tion involving Salt Lake County.			
	I am an officer, dire	ector, agent, employee or the owner of a substantial interest in a business entity t	hat is subject to the regulation of Salt			
		ctor, agent, employee or owner of a substantial interest in a business entity that d	oes or anticipates doing business with			
		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.				
	None of the above	categories apply.				
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				
		nels, enrichment with cats.				
I d	eclare under criminal pena	lty under the law of Utah that the foregoing is true and correct.				
	gned on the Date day	January 5 2022				
	Youth Services, SLC					
at .	City or other location, and	d state or county				
Ch	ris Bereshnyi					
Pri	nted Name					
Sig	gnature					

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

	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)
Α.	Frank Bedola Youth Services
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 11
B.	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Pulled Holl Board. Covered person's status, relationship or conditiment 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. None of the above categories apply.
D.	
I d	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.
Sig	aned on the 19 day of Aun 262,7 Month Year
at _	City or other location, and state or county
	Heart Beella / ned Name Deyl Della
Sig	nature

(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.)
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone Covered Person's County Address/Volunteer's Address B. Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Covered person's status, relationship or commitment to the institution, entity, business or person named above Address and phone number of the institution, entity, business or person named above
C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply.
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 Complete County Co
I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the Date day of Month Agent City or other location, and state or county Printed Name A City or other location and state or county
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 exists.

Abigail K Torres

(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. Abigail K Torres Youth Worker, Youth Services 385-468-4452 Position, or County Division for which you are employed or volunteering Covered Person County/Volunteer's Phone 177 W Price Ave. Salt Lake City, UT 84115 Covered Person's County Address/Volunteer's Address Pins & Ales 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 Bartender Covered person's status, relationship or commitment to the institution, entity, business or person named above 1776 W 7800 S West Jordan, UT 884088 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. None of the above categories apply. 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.) am a bartender for Pins & Ales, we must keep up with health code through the Salt Lake Couty Health Department. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the Date day of Month Salt Lake City, UT City or other location, and state or 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*.)

	15500	2000 - 20	ding my personal or business interest. (Type	
A. Annie Brant	-	outh Worker, Youth		801-419-2104
Covered Person			r which you are employed or volunteering	County/Volunteer's Phone
		e, SLC, UT 84115		
		ress/Volunteer's Address		
D			Service - Timpanogos Cave Nat	
is required in the	bove section	1	nich the Covered Person has a personal or bus	siness interest for which disclosure
Volunteer N	anager,	Education Specialis	st, and Lead Interpreter	
Covered person's	tatus, relatio	onship or commitment to the	e institution, entity, business or person named	labove
2038 W. Alp	ne Loop	Road, American F	Fork, UT 84003 801-756-5239	
Address and phon	number of	the institution, entity, busin-	ess or person named above	
C. Select the catego	y that applic	es to yourself and the outsid	e institution, entity, business or person identifi	fied in subsection (B) above:
I receive or	ave agreed t	o receive compensation for	assisting a person or business entity in a transa	action involving Salt Lake County.
I am an office Lake County		agent, employee or the own	er of a substantial interest in a business entity	that is subject to the regulation of Salt
	er, director, a	agent, employee or owner o	f a substantial interest in a business entity that	does or anticipates doing business with
	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.			
None of the		- 0.00000000000000000000000000000000000	etual 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. (<i>This disclosure statement will not be accepted as valid unless this section is completed</i>)			
interpretation, I	arassment	olunteers (VIPs) in order t reporting, SOP's, and JH growth. Maintain all pape	o support park management and goals. T IA's. Provide feedback on a monthly basis erwork for each ViP.	rain the VIP's in safety, s to help them succeed in their
and Park Servi	e mission o	oriented topics. Schedule	ide digital classroom programing revolvin rangers to visit local classrooms in persoworld connection for classroom topics.	
			aining on interpretation as well as cave ge lentor them to help improve ranger skills.	eology. Schedule them to
I declare under crimir	al penalty ur	der the law of Utah that the	foregoing is true and correct.	
Signed on the 19	_ day of _	nuary 2022		
Date	$-\frac{\text{day of}}{\text{Mo}}$	onth Year,		
Salt Lake City, U	É			
City or other locat	on, and state	e or county		
Annie Brantley				
Printed Name				
ANNE		Digitally signed by ANNE BRANTLEY		
Signature BRAN	LEY	Date: 2022.01.19 13:58:19		

Signature

(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	Corylyn Ybarra	Program Manage	er	435-468-4445	
	Covered Person	Position, or County Divi	sion for which you are employed or volunteering	County/Volunteer's Phone	
	177 W Price Ave SLC, Utah 84115				
	Covered Person's County	Address/Volunteer's Add	dress		
В.	Highland Springs	Speciality Clinic			
٥.	Outside institution, entity is required in the above so		on in which the Covered Person has a personal or bus	iness interest for which disclosure	
	Therapist				
	Covered person's status,	relationship or commitmen	nt to the institution, entity, business or person named	above	
	4460 Highland D	r. Suite 100, Salt l	Lake City, UT 84124 (800) 403-029	5	
	Address and phone numb	er of the institution, entity	, business or person named above		
C.	Select the category that	applies to yourself and the	outside institution, entity, business or person identifi	ied in subsection (B) above:	
	_		ion for assisting a person or business entity in a transa	• •	
	_		he owner of a substantial interest in a business entity		
	Lake County.		·	-	
	Salt Lake County.	ector, agent, employee or o	wner of a substantial interest in a business entity that	does or anticipates doing business with	
			t that creates a potential or actual conflict with my pu	ıblic duties.	
	<u></u>	•	ial or actual conflict with my public duties.		
	None of the above of				
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.)			
		d Springs Specialty Cen	ter- No conflict as we do not accept medicaid/ m	edicare clients.	
			·		
I de	eclare under criminal pena	lty under the law of Utah t	that the foregoing is true and correct.		
Sia	ned on the day	of			
JIE	Date Date	Month 'Year	_,		
	Salt Lake County, Utah				
at _	City or other location, and	d state or county			
Со	rylyn Ybarra				
	nted Name				
C	orylyn Ybarra	Digitally signed by Corylyn Y Date: 2022.01.19 10:25:29 -	/barra 07'00'		

(Use one form for each outside business entity or person you are associated with for which disclosure is required in the above section.)

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

Α.	Desiree Steadman-C Full time Family Therapist	801-842-4192
	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 W. Price Ave. South Salt Lake City, Utah 84115	
	Covered Person's County Address/Volunteer's Address	
В.	MEHR Therapeutic Counseling Services	
	Outside institution, entity, private business or person in which the Covered Person has a personal or busi	ness interest for which disclosure
	is required in the above section	
	Owner, Therapist	
	Covered person's status, relationship or commitment to the institution, entity, business or person named	above
	262 E. 3900 S. SU 115 Millcreek Utah 84107	
	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 identification.	ed in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction	ction involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity of Salt Lake County.	that is subject to the regulation of
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that of with Salt Lake County.	loes or anticipates doing business
	I hold an investment or other financial interest that creates a potential or actual conflict with my pu I hold a personal interest that creates a potential or actual conflict with my public duties.	blic duties.
n		of the relationship of each business
D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid un is completed.)		
	I am a therapist and business owner. I have some contracts that are involved with vaccompanies that pay my for my time through the Insurance Company of my clients. We with Stepping Stones, a placement Agency that takes some children who are in customers.	ly company has a contract
	I haven't had any conflicts in the past. I am very careful and don't anticipate any conwork about 5- 6 hours per week in my company, this is not during my work schedule	
d	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.	
SIE	ned on the 13 day of January , 2021 , Year	
s t	Sandy Utah in Salt Lake County	
	City or other location, and state or county	
_	saines Otas duram Onlla man	
ri:	esiree Steadman-Gallegos nted Name	
	Digitally signed by Dosiroo Steadman-Gallogos Dato: 2021.01.13 14:56:44 -07'00'	
	vaature	

(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.	German Ochoa Youth Worker	385-210-4450	
	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone	
	442 Old Springs Rd Ogden UT 84404		
	Covered Person's County Address/Volunteer's Address		
В.	Weber Human Services		
	Outside institution, entity, private business or person in which the Covered Person has a personal or busi is required in the above section	ness interest for which disclosure	
	German Ochoa		
	Covered person's status, relationship or commitment to the institution, entity, business or person named	above	
	237 26th St. Ogden Ut 84401		
	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:	
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction	ction involving Salt Lake County.	
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity	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 of	does or anticipates doing business with	
	Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my pu	blic duties	
	I hold a personal interest that creates a potential or actual conflict with my public duties.	one duties.	
	None of the above categories apply.		
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)		
	I work as group facilitator for Weber Human Services 2-4 hour per week.		
I de	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.		
Sig	aned on the 12 day of January , 2022 ,		
-	Date Month Year,		
at _	Salt Lake City		
(City or other location, and state or county		
Ge	erman Ochoa		
	nted Name		
G	erman Ochoa Digitally signed by German Ochoa Date: 2022.01.12 15:38:15 -07'00'		

Signature

Signature

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

	nder the provisions of the County Officers and Employees Disclosure Act der penalties of perjury, make the following statement regarding my person		
A.	Guillermo Garcia Youth Worker, Youth Services		909-520-4750
	Covered Person Position, or County Division for which you a	e employed or volunteering	County/Volunteer's Phone
	3660 South West Temple, SLC, Utah 84150		
	Covered Person's County Address/Volunteer's Address		
В.	HappiJac Company		
	Outside institution, entity, private business or person in which the Cove is required in the above section	ed Person has a personal or busine	ess interest for which disclosure
	Assembly Specialist		
	Covered person's status, relationship or commitment to the institution, e	ntity, business or person named al	oove
	505 North Kays Drive Kaysville, Utah 84037		
	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	d in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a per	son or business entity in a transact	ion involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a substate Lake County.	ntial interest in a business entity th	at is subject to the regulation of Salt
	I am an officer, director, agent, employee or owner of a substantial	interest in a business entity that do	oes or anticipates doing business with
	Salt Lake County. I hold an investment or other financial interest that creates a poten	tial or actual conflict with my pub	lie duties
	I hold a personal interest that creates a potential or actual conflict		ne duties.
	None of the above categories apply.		
D.	Give a detailed description of the actual or potential conflicts of interest entity or person with the County. Use more sheets if necessary. (<i>This a</i>		
	is completed.)		,
	I use hand tools to assemble parts for bed lifts for RVs.		
I d	eclare under criminal penalty under the law of Utah that the foregoing is	rue and correct.	
Sig	gned on the day of January , 2022 ,		
	Date Month Year		
at .	SLC, Utah		
	City or other location, and state or county		
Gι	uillermo Garcia Aranda		
	nted Name		
Gι	uillermo Garcia Aranda Digitally signed by Guillermo Garcia Aranda Date: 2022.01.19 15:56:32 -07'00'		

(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.)
. HELENE KALAL, FPSS AT YOUTH SERVICES	801-718-1479

A.	HELENE KALAL, FPSS AT YOUTH SERVICES	801-718-1479
	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 West Price Ave Salt Lake City, UT 84115	
	Covered Person's County Address/Volunteer's Address	
В.	MAMAN HELENE'S FAMOUS MEAT PIES LLC	
	Outside institution, entity, private business or person in which the Covered Person has a personal or busi is required in the above section	ness interest for which disclosure
	BUSINESS OWNER - HELENE KALALA	
	Covered person's status, relationship or commitment to the institution, entity, business or person named	above
	3694 SOUTH CRESPI, CT UNIT 15C SALT LAKE CITY, UT 84119 PH	ONE#: 801-915-2011
	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 identification.	ed in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction	ction involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity Lake County.	that is subject to the regulation of Salt
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that of	does or anticipates doing business with
	Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my pu	blic duties.
	I hold a personal interest that creates a potential or actual conflict with my public duties.	
	None of the above categories apply.	
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>)	
	I might come in contact with clients I serve at Salt Lake County/supply my product to Salt Lake	e County Employees
		77 %
I d	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.	
Sig	gned on the day of January 2022	
	Date Month Year	
at _	SALT LAKE CITY, UT	
	City or other location, and state or county	
HE	ELENE K.K. KALALA	
	nted Name	
Н	elene Kalala Digitally signed by Helene Kalala Date: 2022.01.18 00:44:48 -07'00'	

Signature

(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.) Youth Services Treatment Supervisor 385-468-4487 JD Green Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W. Price Ave, South Salt Lake City, UT 84116 Covered Person's County Address/Volunteer's Address Insight Counseling Services Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Owner/Operator Covered person's status, relationship or commitment to the institution, entity, business or person named above 963 N. 1025 E., Ogden UT 84404 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties, I hold a personal interest that creates a potential or actual conflict with my public duties. X None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I have not nor do I anticipate doing business with Salt Lake County I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{12}{Date}$ day of $\frac{January}{Month}$ Salt Lake City, UT City or other location, and state or county JD Green **Printed Name**

Signature

J. Douglas Green Digitally signed by J. Douglas Green Date: 2022.01.12 14:49:23 -07'00'

(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, §§ 17-10a-1 et seq., O.C.A., 1953 as amended, I, the undersigned, ler penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
A.	Leffery Allen Langworthy Division of Yorth Service 385-468-4610 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	8781 S. Redwood Rd St 100 West Jordan, UT 84088 Covered Person's County Address/Volunteer's Address
В.	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
	Riblical Conselor Covered person's status, relationship or commitment to the institution, entity, business or person named above
	4431 Lifeline Lane West Jordan UT 84088 801-280-8111 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. 1 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. 1 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.
	None of the above categories apply.
D.	entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)
	I work as a Biblical Counselor for a counseling agency associated with my church. I counsel people on how biblical priciples can help in our lives.
	accociated with my church. I councel people on how
	biblical priciples can help in our lives.
1 d	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.
Sig	and on the 13th day of January, 2007.
at .	Wat Tordan Division of Yorth Service C. City or other location, and state or county
Pri	Jeffery Langworthy nted Name
	Mh
Sig	is statement is a public document. It must be filed with the covered person's immediate supervisor, volunteer or community liaison,
111	is statement to a priorie accument. It mast be fred with the covered person's introduced appearable, rounded or community harden,

division director, department director or elected official, and the County Council. It must be filed when the potential conflict arises and re-

filed every January, as long as the potential conflict exists.

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

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

Α.	Julianna Potter	Program Manager, Y	outh Services	385-468-4512	
	Covered Person	Position, or County Division for	or which you are employed or volunteering	County/Volunteer's Phone	
	177 W Price Ave	;			
	Covered Person's County Address/Volunteer's Address				
В.	Utah Nonprofit A	ssociation			
	Outside institution, entity is required in the above se		which the Covered Person has a personal or busine	ess interest for which disclosure	
	Board Member				
	Covered person's status,	relationship or commitment to the	he institution, entity, business or person named ab	pove	
	P.O. Box 65782	Salt Lake City, Utah 8	4165 (801) 596-1800		
	Address and phone numb	per of the institution, entity, busin	ness or person named above		
C.	Select the category that	applies to yourself and the outsi	de institution, entity, business or person identified	l in subsection (B) above:	
	_		r assisting a person or business entity in a transacti	• •	
	I am an officer, dire	-	ner of a substantial interest in a business entity th	•	
	Lake County. I am an officer, dire	ector, agent, employee or owner	of a substantial interest in a business entity that do	es or anticipates doing business with	
	Salt Lake County. I hold an investment	nt or other financial interest that	creates a potential or actual conflict with my publ	lic duties.	
			actual conflict with my public duties.		
	None of the above of	categories apply.			
D.		Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)			
I serve on the board of the Utah Nonprofit Association. They provide services to nonprofits throughout				ughout the state. They are	
subject to local regulations, including those of Salt Lake County.					
			· · · · · · · · · · · · · · · · · · ·		
I de		alty under the law of Utah that th	e foregoing is true and correct.		
Sig	ned on the day	of January , 2022			
	Date	Month Year			
at _	South Salt Lake, UT		_		
(City or other location, and	d state or county			
Jul	ianna Potter				
	nted Name	Digitally signed by fullness Dates	•		
<u> </u>	ilianna Potte	Digitally signed by Julianna Potter Date: 2022.01.13 08:20:37 -07'00'			

Signature

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

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

Α.	Kent G. Larson Family Therapist	385-468-4518	
	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone	
	177 West Price Ave. Salt Lake City, UT 84115		
	Covered Person's County Address/Volunteer's Address		
В.	Kent G. Larson, Counseling Services		
٠.	Outside institution, entity, private business or person in which the Covered Person has a personal or bus is required in the above section	iness interest for which disclosure	
	This is a private therapy practice.		
	Covered person's status, relationship or commitment to the institution, entity, business or person named	above	
	3578 West 4850 South Taylorsville, UT 84129		
	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 identif	ied in subsection (B) above:	
	I receive or have agreed to receive compensation for assisting a person or business entity in a transa	ction involving Salt Lake County.	
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity Lake County.	that is subject to the regulation of Salt	
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that Salt Lake County.	does or anticipates doing business with	
	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.		
	None of the above categories apply.		
D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relations entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as values is completed.)			
	I do a private counseling business from a private office in my home. In this practice, I mostly occasionally with youth. In these cases I don't see any clients that I have seen at youth servireferrals. If such conflict exists in a client requesting services, I refer them elsewhere or back Services.	ces and I don't do any self	
I de	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.		
Sig	ned on the Date day of Month , 2022 , Year		
	Taylorsville, UT Salt Lake County		
at _	City or other location, and state or county		
	nt G. Larson, L.C.S.W.		
	nted Name		
	ent G. Larson Digitally signed by Kent G. Larson Date: 2022.01.12 19:10:05 -07'00'		
	nature		

(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. Kira Coelho Afterschool Program Supervisor (385) 258-7241 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W. Price Ave. (3610 S.) South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Door Dash 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 Current Employee Covered person's status, relationship or commitment to the institution, entity, business or person named above N/A, Independent Worker, (559) -786-2666 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. None of the above categories apply. 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.) deliver food from local restaraunts N/A I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{13}{Date}$ day of $\frac{January}{Month}$, $\frac{2022}{Year}$ Salt Lake County Youth Services City or other location, and state or county Kira Coelho

Signature

Printed Name

Kira Coelho

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.

Digitally signed by Kira Coelho

Date: 2022.01.13 13:58:37 -07'00'

(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.)

Laura Ellsworth	Family Peer Support Specialist	801-300-1162
Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
3636 South Cor	nstitution Blvd. Ste. 103	
Covered Person's Cour	nty Address/Volunteer's Address	
3rd District Cou	rt Juvenile Drug Treatment Team	
	ty, private business or person in which the Covered Person has a personal or bus section	iness interest for which disclosure
Family Peer Su	pport Specialist JDTC team member	
Covered person's status	s, relationship or commitment to the institution, entity, business or person named	above
3rd District Juve	enile Court Matheson Courthouse, SLC, UT	
Address and phone nun	nber of the institution, entity, business or person named above	
Select the category that	at applies to yourself and the outside institution, entity, business or person identif	ied in subsection (B) above:
	agreed to receive compensation for assisting a person or business entity in a transa	
	irector, agent, employee or the owner of a substantial interest in a business entity	
I am an officer, di	rector, agent, employee or owner of a substantial interest in a business entity that	does or anticipates doing business
Salt Lake County	ent or other financial interest that creates a potential or actual conflict with my p	ablic dusies
	ent or other financial interest that creates a potential or actual conflict with my puinterest that creates a potential or actual conflict with my public duties.	iblic duties.
L		
None of the above	e categories apply.	
Give a detailed descrip	e categories apply. tion of the actual or potential conflicts of interest identified above, i.e., the nature he County. Use more sheets if necessary. (This disclosure statement will not be a	of the relationship of each business accepted as valid unless this section
Give a detailed descrip entity or person with t is completed.) Acting in my role as offer resources and	tion of the actual or potential conflicts of interest identified above, i.e., the nature	accepted as valid unless this section nily insight to the JDTC team,
Give a detailed descrip entity or person with t is completed.) Acting in my role as offer resources and	a Salt Lake County Youth Services Family Peer Specialist, I provide fan connect youth and family to potential services. As I am supporting the you	accepted as valid unless this section nily insight to the JDTC team,
Give a detailed descrip entity or person with t is completed.) Acting in my role as offer resources and	a Salt Lake County Youth Services Family Peer Specialist, I provide fan connect youth and family to potential services. As I am supporting the you	accepted as valid unless this section nily insight to the JDTC team,
Give a detailed descripentity or person with t is completed.) Acting in my role as offer resources and treatment team in m	tion of the actual or potential conflicts of interest identified above, i.e., the nature he County. Use more sheets if necessary. (<i>This disclosure statement will not be a</i> a Salt Lake County Youth Services Family Peer Specialist, I provide fan connect youth and family to potential services. As I am supporting the you y capacity at SLCO Youth Services, there is no conflict of interest.	accepted as valid unless this section nily insight to the JDTC team,
Give a detailed descripentity or person with t is completed.) Acting in my role as offer resources and treatment team in medical actions of the complete of t	tion of the actual or potential conflicts of interest identified above, i.e., the nature the County. Use more sheets if necessary. (This disclosure statement will not be a a Salt Lake County Youth Services Family Peer Specialist, I provide fan connect youth and family to potential services. As I am supporting the youth youth at SLCO Youth Services, there is no conflict of interest.	accepted as valid unless this section nily insight to the JDTC team,
Give a detailed descripentity or person with t is completed.) Acting in my role as offer resources and treatment team in mediate and the completed of the complete of the com	tion of the actual or potential conflicts of interest identified above, i.e., the nature he County. Use more sheets if necessary. (<i>This disclosure statement will not be a</i> a Salt Lake County Youth Services Family Peer Specialist, I provide fan connect youth and family to potential services. As I am supporting the you y capacity at SLCO Youth Services, there is no conflict of interest.	accepted as valid unless this section nily insight to the JDTC team,
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Give a detailed descripentity or person with t is completed.) Acting in my role as offer resources and treatment team in metatreatment team in metatreatment team in metatreatment team. The contract of the	tion of the actual or potential conflicts of interest identified above, i.e., the nature he County. Use more sheets if necessary. (<i>This disclosure statement will not be a</i> a Salt Lake County Youth Services Family Peer Specialist, I provide fan connect youth and family to potential services. As I am supporting the you you capacity at SLCO Youth Services, there is no conflict of interest. The provided fan connect youth and family to potential services as I am supporting the young capacity at SLCO Youth Services, there is no conflict of interest. The provided fan connect you have a supporting the young capacity at SLCO Youth Services, there is no conflict of interest. The provided fan connect you have a supporting the young capacity at SLCO Youth Services, there is no conflict of interest.	accepted as valid unless this section nily insight to the JDTC team,
Give a detailed descripentity or person with t is completed.) Acting in my role as offer resources and treatment team in medical declare under criminal pergued on the 12 day.	tion of the actual or potential conflicts of interest identified above, i.e., the nature he County. Use more sheets if necessary. (<i>This disclosure statement will not be a</i> a Salt Lake County Youth Services Family Peer Specialist, I provide fan connect youth and family to potential services. As I am supporting the you you capacity at SLCO Youth Services, there is no conflict of interest. The provided fan connect youth and family to potential services as I am supporting the young capacity at SLCO Youth Services, there is no conflict of interest. The provided fan connect you have a supporting the young capacity at SLCO Youth Services, there is no conflict of interest. The provided fan connect you have a supporting the young capacity at SLCO Youth Services, there is no conflict of interest.	accepted as valid unless this section nily insight to the JDTC team,

Signature

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 MARIA CONCEPCION PAREDES- POZAS DIVISION OF YOUTH SERVICES (385)414-1963
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
911 FARMINGTON CROSSING FARMINGTON UT. 84025 Covered Person's County Address/Volunteer's Address
C
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
PARENT COMMUNITY LIASON MAGNA ELEMENTARY Covered person's status, relationship or commitment to the institution, entity, business or person named above
25005. STATE STREET SUCUTAH 84115 Address and phone number of the institution, entity, business or person named above
C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt
Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with
Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.
I hold a personal interest that creates a potential or actual conflict with my public duties.
None of the above categories apply.
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.)
- wa
Translater for parents of students
Ohe hour perday.
how perday.
The first of the control of the cont
I declare under criminal penalty under the law of Utah that the foregoing is true and correct.
Signed on the 13 day of ANDARY 2022 Month Year
MAGNA UTAH
City or other location, and state or county
MARIA CONCEDEION VAREOFS- YOZAS
Printed Nague
AMALE COL
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, und the County Council. It must be filed when the potential conflict arises and refiled every January, as long as the potential conflict exists.

Signature

(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.) Family Therapist Division of Youth Services Lorri Lake 801-718-7736 Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave Salt Lake City Ut 84115 Covered Person's County Address/Volunteer's Address Mind, Body & Spirit Counseling, PLCC Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Owner Covered person's status, relationship or commitment to the institution, entity, business or person named above 825 E 4800 S Suite 133 Murray UT. 84107 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. None of the above categories apply. 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.) Provid mental health services I declare under criminal penalty under the law of Utah that the foregoing is true and correct. day of January Signed on the Date Year Salt Lake City City or other location, and state or county Lorri Lake/ Printed Norne

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

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

Α.	Mary Fackrell	Fiscal Manager, You	ith Services	385-468-4504	
• ••	Covered Person	Position, or County Division f	or which you are employed or volunteering	County/Volunteer's Phone	
	177 West Price A	Ave., South Salt Lake,	UT 84115		
	Covered Person's County Address/Volunteer's Address				
В.	Salt Lake County	Salt Lake County Aging Services			
ъ.	Outside institution, entity is required in the above so	y, private business or person in vection	which the Covered Person has a personal or busin	ness interest for which disclosure	
	Meals on Wheels	s Volunteer			
	Covered person's status,	relationship or commitment to t	he institution, entity, business or person named	above	
	2001 State St., S	SLC, UT 84114 385	-468-3200		
	Address and phone numb	er of the institution, entity, busi	ness or person named above		
C.	Select the category that	applies to yourself and the outsi	de institution, entity, business or person identific	ed in subsection (B) above:	
	I receive or have ag	reed to receive compensation for	r assisting a person or business entity in a transac	tion involving Salt Lake County.	
	I am an officer, dire	ector, agent, employee or the ow	ner of a substantial interest in a business entity t	hat is subject to the regulation of Sa	
	I am an officer, dire	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 wi			
	Salt Lake County. I hold an investmen	nt or other financial interest that	creates a potential or actual conflict with my pul	hlic duties	
	I hold a personal in	terest that creates a potential or	actual conflict with my public duties.	one danes.	
	None of the above of	categories apply.			
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.)				
		Meals on Wheels Volunteer			
	L				
I Ge		lty under the law of Utah that th	e foregoing is true and correct.		
Sig	-	of January , 2022			
	Date	Month Year			
1 at	177 W Price Ave, South	Salt Lake, UT 84115	_		
(City or other location, and	l state or county			
	ry Fackrell				
	ted Name	District to the second to the			
M	ary Fackrell	Digitally signed by Mary Fackrell Date: 2022.01.12 16:17:22 -07'00'			

Signature

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

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

Α.	Phillip Campbell Case Manager, Division of Youth Services	385-231-9403		
	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone		
	650 E. Vine St.			
	Covered Person's County Address/Volunteer's Address			
В.	Murray City			
	Outside institution, entity, private business or person in which the Covered Person has a personal or busin is required in the above section	ess interest for which disclosure		
	Employee - Facilities Maintenance Supervisor			
	Covered person's status, relationship or commitment to the institution, entity, business or person named al	pove		
	5025, S State St, Murray, UT 84107			
	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	d in subsection (B) above:		
	I receive or have agreed to receive compensation for assisting a person or business entity in a transact	ion involving Salt Lake County.		
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity the Lake County.	at is subject to the regulation of Salt		
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that do	es or anticipates doing business with		
	Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my pub	lio duties		
	I hold a personal interest that creates a potential or actual conflict with my public duties.	ne duties.		
	None of the above categories apply.			
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be act is completed.</i>)			
I am employed by the Murray City Government as a Facilities Maintenance Supervisor. Murray City resides via County and may have arrangements with the county. The nature of my employment with both employers meanot be involved in any material directly concerning the other.				
I de	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.			
	16			
Sig	ned on the Date day of Month , 2022 , Year ,			
at _	South Salt Lake, UT			
	City or other location, and state or county			
Ph	illip Campbell			
	nted Name			
P	hillip Campbell Digitally signed by Phillip Campbell Date: 2022.01.16 03:26:06 -07'00'			
	· · · · · · · · · · · · · · · · · · ·			

Signature

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

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

Α.	Phillip Campbell Case Manager, Division of Youth Services	385-231-9403									
• ••	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone									
	650 E. Vine St.										
В.	Covered Person's County Address/Volunteer's Address										
	Recovery Ways										
	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										
	Social Work Internship										
	Covered person's status, relationship or commitment to the institution, entity, business or person named above										
	5288 Allendale Dr, Murray, UT 84123										
	Address and phone number of the institution, entity, business or person named above										
C.	Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:										
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.										
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Sa										
	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 w 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.										
_	None of the above categories apply.										
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section										
	is completed.)										
	I am enrolled in a clinical internship as part of my master of social work program. Recovery Warmental health treatment organization with several locations in Murray UT. As Recovery Ways of County region it likely has some interactions with the county. Due to the nature of my role in but unlikely that a conflict will be present.	operates within the Salt Lake									
I de	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.										
	40										
Sig	ned on the Date Month , 2022 , Year										
,	South Salt Lake, UT										
at _	City or other location, and state or county										
	•										
	illip Campbell ted Name										
	hillip Campbell Digitally signed by Phillip Campbell Date: 2022.01.16 03:32:37 -07'00'										
	Timp Campocin Date: 2022.01.16 03:32:37 -07'00'										

Signature

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

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

A. Chris Faaliliu	Youth Worker	501-680-1697								
Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone								
4644 S Urban	Corner Cove #09, Murray, Utah 84107									
Covered Person's Cor	Covered Person's County Address/Volunteer's Address									
Open Arms Yo	Open Arms Youth and Adult Services Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section									
Outside institution, er										
Proctor Parent	:									
Covered person's stat	Covered person's status, relationship or commitment to the institution, entity, business or person named above									
3007 South W	3007 South West Temple Suite H, Salt Lake City, Utah 84115 (801)679-9956									
Address and phone nu	imber of the institution, entity, business or person named above									
C. Select the category t	hat applies to yourself and the outside institution, entity, business or person identifi	ied in subsection (B) above:								
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.									
3	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 S									
Lake County.	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 valt Lake County.									
	I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.									
I hold a persona	l interest that creates a potential or actual conflict with my public duties.									
None of the abo	ve categories apply.									
	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.)									
Proctor 1	parent for Youth in custody.									
Note that the state of the second of the sec	enalty under the law of Utah that the foregoing is true and correct.									
Signed on the $\frac{23}{\text{Date}}$	day of January , 2022 Month , Year ,									
Salt Lake City, Utah										
City or other location,	and state or county									
Christopher Faaliliu										
rinted Name										
Christopher Faal	iliu Digitally signed by Christopher Faaliliu Date: 2022.01.23 04:34:15 -07'00'									
ignature										

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

Un	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned,
unc	ler penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
	Covered Person Position or County Division for which you are employed or volunteering Covered Person's County Address/Volunteer's Address
В.	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure
	is required in the above section
	Covered person's status, relationship or commitment to the institution, entity, business or person named above SSHH OUTH 4385 West Yearn'S UT 84118 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.
	None of the above categories apply.
D.	entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)
	Work at South Kearns Elem
Ld	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.
	gned on the $\frac{12}{\text{Date}}$ day of $\frac{0}{\text{Month}}$, $\frac{2012}{\text{Year}}$
at .	Kearns, UTah
,	City or other location, and state or county
Pr	nted Name
Si	enature/

(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.) County Division for which you are employed or volunteering Covered Person's County Address/Volunteer's Address Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section eacher 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 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. None of the above categories apply. 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.) x at South Klains Elementary I declare under criminal penalty under the law of Utah that the foregoing is true and correct. City or other location, and state or county Signature

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

Under the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.) A. Chris Brothers S.L.C. Youth Services 8018376293

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

177 W Price Ave SIC, VT & U 115

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

Grante School 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 Para Carcator Covered person's status, relationship or commitment to the institution, entity, business or person named above 2500 S State Street 2500 S State Street

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. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section I work intre school during the day in the F.A. Unit. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{1}{Date}$ day of $\frac{1}{Month}$, $\frac{22}{Year}$, at $\frac{Currs}{City}$ or other location, and state or county Chris Brothers
Printed Name Signature

(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, ler penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)
A.	Hoidi Sastosi 5.1. C. Youth Sosvices 801-702-3474 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.	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
	Para Educator Covered person's status, relationship or commitment to the institution, entity, business or person named above
	2500 so state Stocet 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. None of the above categories apply.
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	I work in the BD unit at hearns Je High during the day;
1.1.	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.
	12
Sig	ned on the $\frac{1}{\text{Date}}$ day of $\frac{1}{\text{Month}}$, $\frac{2000}{\text{Year}}$
at _	City or other location, and state or county
Prin	Hoidi Sortori
	V. Sartori
Sig	nature

(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. Lennedy Sartori SLC Wath Services 80 - 637-6739
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 West Price Ave. SLC, UT 84/15 Covered Person's County Address/Volunteer's Address B. Granite School 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 SPED PowaEducator

Covered person's status, relationship or commitment to the institution, entity, business or person named above 2500 South State Street 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. None of the above categories apply. 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 work at RIH during the day as a SPED Aide in the F.A. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{13}{Date}$ day of $\frac{1}{Month}$, $\frac{2.22}{Year}$, at Veurns Utah

City or other location, and state or 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 penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
A. Alexus Averett Youth leader 385-226-6154
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
4324 5 4800 W West walley City Ut 84120
Covered Person's County Address/Volunteer's Address
B. Maverix Center Centennial Management 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
USher
Covered person's status, relationship or commitment to the institution, entity, business or person named above
3/005 Decker Lake Dr, west Wiley JT 64119 / 861-988-8888. 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.
None of the above categories apply.
D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)
I am an usher, taking tickets and helping grests when
Tam an usher, taking tickets are helping grests when needed. I believe this gob will not worker be a conflict couse shifts are at night (dinner time) or if they are
a cick are at night (dinner time) or if they are
early shifts it is usually on the weekends.
60112 24:48 17 12 0200112 011 2150 AGG 193102
I declare under criminal penalty under the law of Utah that the foregoing is true and correct.
Signed on the VI day of January . 22, Year
* Kearne UT
City or other location, and state or county
Alexus Averett
30000
Signature

Covered I 3443 Covered I	Reich Person 3 So.	ert Pos	Youth	Service			CI SOLIAL C	ir ousine	ess inter	CSL (1)p	e or prini	all inform	u,	
3443 Covered I		. 05	tion or C	ounty Divi	sion for s	SP which vo	Data	Speci	i aliç	teering			1 - 114 B	one
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This														
	Is The nstitution, o ed in the abo			ritage ess or perso	Yark on in whi	ch the C	overed P	erson ha	ıs a pers	onal or bu	siness in	erest for v	vhich disclo	osure
	lasind			20 6	empl	oyee	.\							
Covered 1	person's sta	itus, relati	onship or	commitme	nt to the	institutio	on, entity							
260	ا and phone i	nnysi	ا <u>ق</u> المانية	<u>Avenu (</u>	<u>) </u>	, 5	LL	UT	8	4108				
I am Lak I am Sali I ho I ho Nor Give a d entity or is comple	m an officer ke County. m an officer t Lake Cou old an inves old a persor ne of the ab letailed desor r person wi	director, director, nty. timent or al interes ove categoription of the the Con	agent, em agent, em other finant that crea ories appl the actua inty. Use	ployee or oncial interestes a potenty. I or potentimore sheet	the owner of st that cretial or act	r of a su a substal eates a p tual conf ets of inte ssary. (7	bstantial inter otential (lict with erest lder	interest in a bor actual my publicatified abosure sto	in a bus busines conflic lic dutio	iness entity the with my es. the nate will not be	ty that is: at does or public du are of the accepte	anticipate anticipate attes. relationsh d as valld	alt Lake Co the regulati s doing bus ip of each b unless this	ion of siness
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	ler criminal e <u>Ø 18</u> Date		_			toregoir	ig is true	and con	rect,					
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This statement is a public document. It must be filed with the consered necessite immediate conservices voluntaes as community linkers

and beneficially of the conference of the con-

DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

Signature

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. Caroline Petric Para Educator Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
Covered Person's County Address/Volunteer's Address
B. Mill Creek Elementary
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
Employee Covered person's states, relationship or commitment to the institution, entity, business or person named above
Mill Creek Elementary 385-646-2285
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: 1 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 Sal
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 wit
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.
None of the above categories apply.
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 at Millcreek Elementary as a para Educator and also in the afterschool program, there is no Conflict of interest.
Educator and also in the afterischool program,
there is no conflict of interest.
l declare under criminal penalty under the law of Utah that the foregoing is true and correct.
Signed on the $\frac{61}{\text{Date}}$ day of $\frac{18}{\text{Month}}$, $\frac{22}{\text{Year}}$.
at
City or other location, and state or county
Cardine Petrie
Printed Name Petrie
Signature Pelne

This statement is a public document. It must be filed with the covered person's immediate supervisor, volunteer or community liaison.

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

Un	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, ler penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
A.	Clarissa Cardenas Youth Services Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 4904 W. C. h. Erry Wood L. h. West Valley VT 84120
В.	Covered Person's County Address/Volunteer's Address Frante Schools District (West Kearns Elementary) Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure
	Paraed votator THE Covered person's status, relationship or commitment to the institution, entity, business or person named above
	2500 S. State Street SLC, VT 94115 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. None of the above categories apply.
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'M an all helping teach erg and students.
	clare under criminal penalty under the law of Utah that the foregoing is true and correct.
Sig	ned on the Date day of January, 2022, Month
nt	West valley city ity or other location, and state or county
?rin	larissa Cardenas .
ign	AMM Cullus

(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.)

nd	er penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
١.	Covered Rerson Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	31825. Wrdgewood Pd S.L.C. Ut. 84106 Covered Person's County Address/Volunteer's Address
В.	11 11 6 6 01 +1
	B. H. A. Covered person's status, relationship or commitment to the institution, entity, business or person named above
	3701 5 1 00 E. Mill Creek Ut. 84/06 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 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. None of the above categories apply.
1	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.) Which at Mill Creek Element The Property of the P
	I declare under criminal penalty under the law of Utah that the foregoing is true and correct.
	Signed on the 19 day of, 2022
	at Mill Cycek - Utah City or other location, and state or county
	Printed Name Printed Name Signature

(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, ler penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
Α.	Dallin Higgs Youth Leader 801-512-9206 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	5707 Hill Stone Drive
	Covered Person's County Address/Volunteer's Address
В.	Athles Academy
	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	Covered person's status, relationship of commitment to the institution, entity, business of person named above
	Address and phone number of the institution, entity, business or person named above (801) 438-46
С.	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.
	None of the above categories apply.
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business
	entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)
	is completed.)
	Work as a recess aide/substitute teacher for a Charter School. I do not believe this is a conflict total to being in different school districts and no information is disclosed between them.
	I do not believe this is a conflict tot due to being in different
	school districts and no information is disclosed between them
	,
l de	clare under criminal penalty under the law of Utah that the foregoing is true and correct.
Sig	ned on the 13 day of January, 2022, Month Year
	Learne lit
at	Eity or other location, and state or county
rii	Dall'in Higgs
200	DOILIN HIGGS OUDINE
Sig	nature

(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.) Deborah Kiesewi Youth Services Position, or County Division for which you are employed or volunteering Covered Person County/Volunteer's Phone 177 W. Price Ave, Salt Lake City, UT Covered Person's County Address/Volunteer's Address Celebrity Home Loans 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 Mortgage Loan Processor Covered person's status, relationship or commitment to the institution, entity, business or person named above 3130 W Maple Loop Dr. #201, Lehi, UT 84043 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. None of the above categories apply. 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 process mortgage loans. I gather documents from clients and fulfill conditions for specific loan programs. I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Signed on the $\frac{20}{\text{Date}}$ day of $\frac{\text{January}}{\text{Month}}$, $\frac{2022}{\text{Year}}$,

Salt Lake City, UT

City or other location, and state or county

Deborah Michelle Kiesewetter

Printed Name

Signature

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

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

Α.	Jacob Baesler	After School Program Academ	ic Instructor	(360) 969-1147
١.	Covered Person	Position, or County Division for which you a	re employed or volunteering	County/Volunteer's Phone
	415 #1 s Univers	sity St Salt Lake City UT, 84102		
	Covered Person's County	Address/Volunteer's Address		
3.	Granite School D	istrict		
	Outside institution, entity is required in the above s	, private business or person in which the Cove	red Person has a personal or busin	ness interest for which disclosure
	Elementary Scho	ol Teacher		
	Covered person's status,	relationship or commitment to the institution,	entity, business or person named a	ibove
	2500 s. State St	Salt Lake City, UT 84115-3110	(385) 646-5000	
	Address and phone numb	er of the institution, entity, business or person	named above	
٦.	Select the category that	applies to yourself and the outside institution,	entity, business or person identifie	ed in subsection (B) above:
	100 CC	reed to receive compensation for assisting a pe		
		ctor, agent, employee or the owner of a substa		
		ctor, agent, employee or owner of a substantial	interest in a business entity that d	oes or anticipates doing business w
		t or other financial interest that creates a poter terest that creates a potential or actual conflict		olic duties.
	None of the above	categories apply.		
Э.		on of the actual or potential conflicts of interest County. Use more sheets if necessary. (<i>This</i>		
		cher at David Gourley Elementary School at David Gourley. I do not believe there is		o help out with the After
	24	Ity under the law of Utah that the foregoing is Sanuary 2022	true and correct.	
	ned on the Date day	Month , Year ,		
t _	Salt Lake City			
(City or other location, and	state or county		
ac	ob Baesler			
rir	ited Name			
38	aesler, Jacob D	Digitally signed by Baesler, Jacob D Date: 2022.01.21 13:27:28 -07'00'		
Sign	nature			

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

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

A. Karen Allbor youth services Salt Lake

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

177 w Price ave Salt Lake city ut Covered Person's County Address/Volunteer's Address B. Salt lake city school 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 Accounting Admin Assistant Covered person's status, relationship or commitment to the institution, entity, business or person named above 440 e 100 s . Salt Lake City UT 801-578-5899 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. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I am employed by SLCSD in the accounting department. I am responsible for all accounts receivables for the district. I am also the assistant to the finance director and other assigned duties as needed. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the Date day of January Salt Lake City, Ut City or other location, and state or county Karen Allbor

Signature

Printed Name

Karen Allbor

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.

Digitally signed by Karen Allbor Date: 2022.01.20 14:49:42 -07'00'

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

Ui	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.	Kieresti Thomas SLCO Youth Services - ASP 801-792-8580 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	177 West Price, Avenue South Salt Lake, Ut 84115 Covered Person's County Address/Volunteer's Address
В.	Granite. School 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
	Behavior unit Para Covered person's status, relationship or commitment to the institution, entity, business or person named above
	31050 South Montclair Street, Magna, ut 84044 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.
	None of the above categories apply.
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.)
	not applicable at matheson dr.
	ours educator cal
	2000
I de	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.
	ned on the 20 day of Fanuary 2,022
at _	matheson Tr High Magna, ut
K	Sylenesti Thomas
rir	nted Name
1	Sperest Thomas
o i R	181149

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

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

Α.	Krista Maroudas Youth Services
•••	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	177 W Price Avenue, Salt Lake City, UT
	Covered Person's County Address/Volunteer's Address
В.	Westminster College, Salt Lake Community College
٠.	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
	Adjunct Professor
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	Westminster College - 1840 S 1300 E Salt Lake City, UT 84105
	Address and phone number of the institution, entity, business or person named above
C.	Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.
	I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties.
	None of the above categories apply.
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.)
	Salt Lake Community College Address - 4600 Redwood Road, Salt Lake City, UT 84123
	I work as an adjunct professor at Westminster College in the History and Education Departments. I work at Salt Lake Community College as an adjunct professor in the History department.
I de	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.
Sig	aned on the day of, 2022
	Date Month Year
at_	Salt Lake City
(City or other location, and state or county
Kri	ista Maroudas
Pri	nted Name
Sia.	matura

(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.)

Ţ	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.)
1	Kristin peerus Youth Services (801) 910-9055 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	6797 W. Sirius Place West Inden UT 84081
	Covered Person's County Address/Volunteer's Address
I	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
	Special Education teacher Covered person's status, relationship or commitment to the institution, entity, business or person named above
	2500 S. State Street Sut Value Crty VT 84/15
	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:
12 m	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 Sal
	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 wit
	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.
	None of the above categories apply.
I	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.)
	special education teneral on
	special education teacher out
,	declare under criminal penalty under the law of Utah that the foregoing is true and correct.
5	Signed on the Date day of Jan. , 2027.
	Yearns, UT
а	City or other location, and state or county
	Kristin Peercu
$\overline{\mathbf{P}}$	rinted Name
	X. Perser
S	igniture
1	The second is the second of th

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. Leesa Harvey After School Program Teacher/SLC (80) (664091 Covered Person Postion, or County Division for which you are employed or volunteering County/Volunteer's Phone
105/9 (1) 54355 1.1110 HT 011100
Covered Person's County Address/Volunteer's Address
B. Crantle School 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
Covered person's status, relationship or commitment to the institution epitity, business or person named above
Address and phone number of the institution, entity, business or person named above City, Utah 84115
C. Seject 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.
Lake County. 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 value.
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.
None of the above categories apply.
D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)
I teach 5th Grade at Magna.
I teach Lego League, Math Olympiads, and tutor
with the after School Program.
I declare under criminal penalty under the law of Utah that the foregoing is true and correct.
Signed on the 13 day of January , 2022 Month Year
at Magna Utah City or other location, and state or county
Leesa V. Harves
Lesa V Harry 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 refiled every January, as long as the potential conflict exists.

(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 Farrie V. Harvey, After School Salt Lake 385 - 229-2 Covered Person Position, or County Division for which you are employed or volunteering County Volunteer's Phone
Satt Lake 16329 West 3435 South, West Valley City, W
B. Stante School 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
Covered person's status, relationship or commitment to the institution, entity, business or person named above
2500 South State, Salt Lake City, Utah 84115 Address and phone number of the institution, entity, business or person named above
C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: 1 receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. 1 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 1 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. None of the above categories apply.
D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)
I teach coding at Magna Elementary + West Valley STEM. I also, guest teach at both
schools. I am the Lego League Coach
at Magna Elementary
I declare under criminal penalty under the law of Utah that the foregoing is true and correct,
Signed on the 3 day of Jah, 2022 Month Year
at Magna, UT 84044 City or other location, and state or county
Karrie V. Harvey Finderstame V. Harvey 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 refiled every January, as long as the potential conflict exists.

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

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

Α	Kyana Hamilton SLCo Youth Services Afterschool Program	801-703-8852
71.	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	177 West Price Avenue / South Salt Lake, UT 84115	
	Covered Person's County Address/Volunteer's Address	
В.	Matheson Jr. High	
р.	Outside institution, entity, private business or person in which the Covered Person has a personal or bus is required in the above section	iness interest for which disclosure
	Office Manager	
	Covered person's status, relationship or commitment to the institution, entity, business or person named	above
	Juvenile Justice Services Division, 801-954-9200	
	Address and phone number of the institution, entity, business or person named above	The state of the s
C.	Select the category that applies to yourself and the outside institution, entity, business or person identif	ied in subsection (B) above:
٠.	I receive or have agreed to receive compensation for assisting a person or business entity in a transa	
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity	
	Lake County.	
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that Salt Lake County.	does or anticipates doing business with
	I hold an investment or other financial interest that creates a potential or actual conflict with my pu	iblic duties.
	I hold a personal interest that creates a potential or actual conflict with my public duties.	
	None of the above categories apply.	
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>)	accepted as valid unless this section
	Not Applicable Manager at Mathes	on Sr.
Ld	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.	
	The state of the control of the state of the	
	Date day of, Year ,	
at_	Salt Lake City, UT 84119	
(City or other location, and state or county	
Kya	ana Hamilton	
	nted Name	
Sig	nature	

(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.) Hunter Sartori SLCo Youth Services - Afterschool Program 385-419-9429 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 West Price Avenue | South Salt Lake, UT 84115 Covered Person's County Address/Volunteer's Address Granite School 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 Instructional Assistant Covered person's status, relationship or commitment to the institution, entity, business or person named above 2500 South State Street | 385-646-5000 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. None of the above categories apply. 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.) Instructional Assistant at Matheson Jr. Not Applicable I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the Date day of Month, 2022 Matheson Jr. High School - Magna, UT City or other location, and state or county Hunter Sartori Printed Name

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

Un	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
Α.	1/ 201 1/1 5/6 1/1 1/1 5 1 0+1 1/1
Λ.	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	177 West Price Querine South Salt Lake VT 84/15 80167
	Covered Person's County Address/Volunteer's Address
B.	Grante School 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
	Parn
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	3650 South Montcheen Street, Marra VI 84044
	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.
	None of the above categories apply.
Б	
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.)
	Not applicable
	Paraeducertor at Matheson Sr.
Lde	clare under criminal penalty under the law of Utah that the foregoing is true and correct.
	ned on the 18 day of 01 ,202,7- Month Year
	City or other location, and state or county
	Menous Ca Morales ind Name Macule M
Prir	ited Name
	Maulen
Sigi	nature /

(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.	Tristen Tharp	SLCo Youth Services	s- After School Program	801-520-2113
	Covered Person	Position, or County Division fo	r which you are employed or volunteering	County/Volunteer's Phone
	177 West Price A	venue South Salt La	ke, UT 84115	
	Covered Person's County	Address/Volunteer's Address		-
В.	Granite School D	istrict		
٥.	Outside institution, entity is required in the above se		hich the Covered Person has a personal or busines	s interest for which disclosure
	Paraeducator			
	Covered person's status, r	relationship or commitment to th	e institution, entity, business or person named abo	ove
	3650 Montclair St	t, Magna, UT 84044 (385) 646-5290	
	Address and phone number	er of the institution, entity, busin	ess or person named above	
C.	Select the category that a	applies to yourself and the outsid	le institution, entity, business or person identified	in subsection (B) above:
			assisting a person or business entity in a transaction	
			ner of a substantial interest in a business entity tha	
	Lake County.		,	
	I am an officer, directly Salt Lake County.	ctor, agent, employee or owner o	f a substantial interest in a business entity that doe	s or anticipates doing business with
	I hold an investmen		creates a potential or actual conflict with my public	c duties.
	I hold a personal int	terest that creates a potential or a	ctual conflict with my public duties.	
	X None of the above c	categories apply.		
D.			icts of interest identified above, i.e., the nature of t	
	is completed.)	County. Use more sheets if nec	essary. (This disclosure statement will not be acce	epted as valid unless this section
	N/A Par	neducativ	at Matheson S	V.
		or officer of		
I de	clare under criminal penal	lty under the law of Utah that the	foregoing is true and correct.	
Sig	Date day of	Month , Year		
	Matheson Jr High - Magr	na - UT		
	City or other location, and	I state or county		
Tris	sten Tharp			
	nted Name			
	THAT -	+		
Sig	nature	La Charles		
Sig	ned on the 18 day of Date Matheson Jr High - Magnicity or other location, and sten Tharp Inted Name	Month , Year ,	e foregoing is true and correct.	

(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.)
1 Teresa L Kitchen 801-550-9479
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
580 East Vine St Unit 3A murray Ut 84107
Covered Person's County Address/Volunteer's Address
B. Preschool Services - Grante School 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
Lead teacher Covered person's status, relationship or commitment to the institution, entity, business or person named above
1 20 10 10 77 07
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 Sait 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 Satt
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.
None of the above categories apply.
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.)
work for preschool Services 11 years No conflect:
No confiect.
I declare under criminal penalty under the law of Utah that the foregoing is true and correct.
Signed on the Date day of
at City or other location, and state or county
Teresa L Kitchen Printed Name O OLO D
a sue d
Signature

filed every January, as long as the potential conflict exists.

(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.) County/Volunteer's Phone Covered Person

Position, or County Division for which you are employed or volunteering 177 West Price Avenue South Salt Lake, Ut 94115
Covered Person's County Address/Volunteer's Address Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Teachers Assictant Covered person's status, relationship or commitment to the institution, entity, business or person named above Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. 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.) Teachers Asst. at Matheson Jr. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the low day of annay - . 2011. at Mathein Jr. High School, Magna Ut
City or other location, and state or county This statement is a public document. It must be filed with the covered person's immediate supervisor, volunteer or community liaison, This statement is a public document. It must be filed when the potential conflict arises and the County Council. It must be filed when the potential conflict arises and re-

Signature

(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.) **Emily Jones** Youth Services Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 177 W Price Ave. Salt Lake City UT Covered Person's County Address/Volunteer's Address Malstrom Salon 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 Hair Stylist Covered person's status, relationship or commitment to the institution, entity, business or person named above 535 South 700 East Salt Lake City, UT 84102 Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I am a Hair Stylist and work for Malstrom Salon. I have been there for 11 years. I cut men's and women's hair as well as color and style hair. I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the 21 Date Salt Lake City City or other location, and state or county **Emily Jones** Printed Nam,

(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.	Darla Scott	Emergency H	ire Youth Worker	385-468-4500	
	Covered Person	Position, or County l	Division for which you are employed or volunteering	County/Volunteer's Phone	
	3660 S. West T	emple, SLC, UT	84115		
	Covered Person's Coun	ty Address/Volunteer's	Address		
В.	Granite School	District			
	Outside institution, enti	ty, private business or p section	erson in which the Covered Person has a personal or b	pusiness interest for which disclosure	
	Nutrition Specia	ılist			
	Covered person's status	s, relationship or commi	tment to the institution, entity, business or person nam	ned above	
	2500 S. State S	treet, SLC, UT 8	34115 385-646-5000		
	Address and phone num	nber of the institution, en	ntity, business or person named above		
C.	Select the category that	at applies to yourself and	I the outside institution, entity, business or person iden	ntified in subsection (B) above:	
	I receive or have agreed to receive compensation for assisting a person or business entity in a 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 Sala				
	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 wit 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. None of the above categories apply.				
D					
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)				
		meals to the youth at	the school.		
I de	eclare under criminal per	nalty under the law of U	tah that the foregoing is true and correct.		
Sig	ned on the 22	y of February 20	022		
~-6	Date	Month , Ye	ar '		
at _	Salt Lake City, Utah				
	City or other location, an	nd state or county			
Da	rla Scott				
Prir	nted Name				
D	arla Scott	Digitally signed by Darla Date: 2022.01.22 08:33			
o:		7	N. SONE DESIGNACIONA.		

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

Un und	nder the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
A.	Kelly Price After School teacher 801-696-9081
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	11596 S. Moring Point Way South Jordan 11. 8400
	Covered Person's County Address/Volunteer's Address
В.	Granite District, Pleasant Green Elementary
	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
	6th grade teacher
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	8201 W. 2700 S. Magna, Ut. 84044
	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.
_	None of the above categories apply.
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section
	is completed.)
	no conflict
	6th grade teacher at Pleasant Green Elementary
I dec	clare under criminal penalty under the law of Utah that the foregoing is true and correct.
Sign	ned on the ON 2 day of O\ Nonth , 2022
	Magna salt Lake county Utah
at	ity or other location, and state or county
	1/ 11
D=!*	Kelly Price
rrint	ted Name
	Kerly puce
Sign	nture / /

(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. Manla yna Roberton ASP Youth leader
Covered Person Position, or County Division for which you are employed or volunteering 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 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. 1 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. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) as a para-educator I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the 24 day of Jan at Magnu Slavety
City or either location, and state or county Signature

(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. Bobbie Jacobson Peer member - Pleasant green 461 (801) 647-3844

Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 7856 w. Britain dr. magnet of 84044 Covered Person's County Address/Volunteer's Address Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section Covered person's status, relationship or commitment to the institution, entity, business or person named above 4600 5 Redwood road, taylorsville, 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. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) no conflict as employee at SLCC I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the Date day of knowly . 2022 at Magner : Utanh
City of other location, and state or county Bobbic Tacobson Signature

(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.) Person's County Address/Volunteer's Address Outside institution, entity, private business or person in which is required in the above section Covered person's status, relationship or commitment to the institution, entity, business or person named above Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. None of the above categories apply. 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.) grade teacher, no conflict I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

(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. Sara Van Roosen daal Youth. Leader - Data Spec. - YS 801. 450. 9374

Covered Person Position, or County Division for which you are employed or volunteering ASP County/Volunteer's Phone 2844 S 8560 W, Magna UT 84044
Covered Person's County Address/Volunteer's Address

3 Magna United CTC B. Caranite School District Pleasant Green Elem Towns

Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclo (3) Parent Rep Plannina Commissioner Covered person's status, relationship or commitment to the institution, entity, business or person named about 177 W Price Ave, Sugar 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. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) No conflict as a Paraeducator) I serve as a Flanning Commissioner for Magna Metro
Township - Volunteer position - No conflict known
) Parent Rep & Chair of the PR Work Group for Magna United CTC - Volunteer - No conflict known I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the Date day of Jamay 2022 at Magna, Salt Lake County
City or other location, and state or county Sara Van Rousendaal

(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. Elysia Adams ASP Youth Leader

Covered Person Position, or County Division for which you are employed or volunteering 801.403.6063 8753 Soapberry Drive Magna Ut 84044
Covered Person's County Address Volunteer's Address B. Grante School District Pampered Chef
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 Para Educator — Independent Consultant

Covered person's status, relationship or commitment to the institution, entity, business or person named above I Pampered Char Drive, Addison, 12 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. None of the above categories apply. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) as fara Educator or Independent Consultant I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the $\frac{24}{Date}$ day of $\frac{1}{Month}$, $\frac{2022}{Year}$ at Magna, Ut 84044 Salt Lake County
City or other location, and state or 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.)

Unc und	er penaltics of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
A.	Erin Killpack Special Eddled Ton Teacher 801-862-03325 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	391 W. Durfee St. Grantsville, UT 84029 Covered Person's County Address/Volunteer's Address
В.	Grante School 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
	Special Education Teacher Covered person's status, relationship or commitment to the institution, entity, business or person named above 2500 S. State Street Salt Lake City, UT 84115-3110 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: 1 receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. 1 am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Sal Lake County. 1 am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with the category of the owner of a substantial interest in a business entity that does or anticipates doing business with the category of the owner of a substantial interest in a business entity that does or anticipates doing business with the category of the owner of a substantial interest in a business entity that does or anticipates doing business with the category of the owner of a substantial interest in a business entity that does or anticipates doing business with the category of the owner of a substantial interest in a business entity that does or anticipates doing business with the category of the owner of a substantial interest in a business entity that does or anticipates doing business with the category of the owner of a substantial interest in a business entity that does or anticipates doing business with the category of the owner of a substantial interest in a business entity that does or anticipates doing business with the category of the owner of a substantial interest in a business entity that does or anticipates doing business with the category of the owner of a substantial interest in a business entity that does or anticipate of the category of the owner of a substantial interest in a business entity that does or anticipate of the category of the owner of a substantial interest in a business entity that does or anticipate of the category of the owner of a substantial interest in a business entity that does or anticipate of the cat
••	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. None of the above categories apply.
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.)
	Special Education teacher, No conflict.
I de	celare under criminal penalty under the law of Utah that the foregoing is true and correct.
Sig	ned on the ZI day of Jerniary, ZeZZ, Month Year
at_	Magna, WT City or other location, and state or county
E Driv	rin Killpack Med Name RILDack
G	run Kill pack
Sig	nature

(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.)

inder penalties of perjury, make the following statement regarding my personal or business interest. (Type or print all information.)
Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
2313 S. 1500 W. Woods Cross UT 84087
Covered Person's County Address/Volunteer's Address
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
4th grade teacher
Covered person's status, relationship or commitment to the institution, entity, business or person named above
8201 W 2700 S Magna, UT 84044
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.
None of the above categories apply.
D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)
No conflict as a 4th grade teacher.
100 00111111111111111111111111111111111
I declare under criminal penalty under the law of Utah that the foregoing is true and correct.
I declare under criminal penalty under the law of Utah that the foregoing is true and correct.
I declare under criminal penalty under the law of Utah that the foregoing is true and correct. Signed on the 24 day of January . 2022 Date Month Year
Signed on the 24 day of January . 2022. Month Year
Signed on the 24 day of January . 2022 Month Year At Magna UT City or other location, and state or county
Signed on the 24 day of January . 2022 Month Year At Magna UT City or other location, and state or county
Signed on the 24 day of January . 2022. Month Year