## 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.	Joyce R. Peterson District Attorney 385-468-7780 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone				
	35 East 500 SD., Salt Lake City UT 84111 Covered Person's County Address/Volunteer's Address				
	Precision Engineering Consultants, Inc.  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				
	Principal, Secretary Covered person's status, relationship or commitment to the institution, entity, business or person named above				
	3781 So. 3145 E.; SLC UT 84109  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.				
D.	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.				
	I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.  I hold a personal interest that creates a potential or actual conflict with my public duties.				
	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each busines entity or person with the County. Use more sheets if necessary. ( <i>This disclosure statement will not be accepted as valid unless this sectio is completed.</i> )				
	none				

SUBSCRIBED and SWORN to before me this 7th day of Jan

January

\_, 20<u>/9</u>.

[SEAL]

LAURA PRATT
MOTINY PUBLIC-STATE OF SEMICOMMISSIONS 093408
COMM. EXP. 03-26-2021

NOTARY PUBLIC, Residing in

Dalt Lake Count

State

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

## DISCLOSURE OF PERSONAL OR FINANCIAL INTEREST

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

A.	Linda Duffy	Clerk's Office - Council	Clerk	385-468-7363	
	Covered Person	Position, or County Division	for which you are employed or voluntee		
	Government (	Center, Room N2-700			
	Covered Person's Co	unty 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				
	Clerk of Session				
	Covered person's stat	tus, relationship or commitment to	he institution, entity, business or person	named above	
		outh, Holladay, Utah 84124			
	Address and phone no	umber of the institution, entity, bus	ness or person named above	**	
C.	Select the category t	hat applies to yourself and the outs	ide institution, entity, business or person	n identified in subsection (B) above:	
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.				
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County.				
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County.				
	I hold an investment or other financial interest that creates a potential or actual conflict with my public duties.  I hold a personal interest that creates a potential or actual conflict with my public duties.				
D.	Give a detailed descrentity or person with is completed.)	ription of the actual or potential con a the County. Use more sheets if ne	flicts of interest identified above, i.e., th cessary. (This disclosure statement will	e nature of the relationship of each business not be accepted as valid unless this section	
	I sometimes act as a liaison between my church and County government. In that capacity I have interacted with the Unified Police Department District Attorney's Office, Auditor's Office, Planning & Development Services, Treasurer's Office, Assessor's Office, and Surveyor's Office.				
	All of this is done on a voluntary basis and does not conflict with my role as Deputy Clerk.				
	Recently, the church County government	n and its neighborhood were annexelless likely.	d into Holladay City from unincorporat	ed Salt Lake County, making interaction with	
			Rinda C. Covered Person's Signature	Duffy	
SU	BSCRIBED and SWO	RN to before me this 4th day	of January,	20 <u>/9</u> .	
			Ha lone Il	adamada -	
-	Notary Pr	de Guomunapson ublic State of Utah nission Expires on:	NOTARY PUBLIC, Residing	in	
S	Comm.	rch 17, 2022 Number: 699463	County	State	



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

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

A. Allycen Farnsworth Executive Assistant, Surveyor's Office (385) 468-8244

Covered Person\* Position\* or County Division County Phone

2001 S. State Street, Suite N1-400, Salt Lake City, UT 84190

Covered Person's County Address

B. Salt Lake County Center for the Arts - Patron Services

Outside institution, entity, private business or person involved

Volunteer usher for four SLCo venues (Eccles Theater, Rose Wagner Center, Abravanel Hall, and Capital Theater)
Describe covered person's status, employment or investment in the outside institution, entity, private business, or personal contract

Salt Lake County Center for the Arts, Patron Services, 131 S. Main Street, Salt Lake City, UT 84111

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

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

I am a volunteer usher for various entertainment shows at four Salt Lake County venues (Eccles Theater, Rose Wagner Center, Abravanel Hall, and Capital Theater). I assist patrons to their seats, take tickets, stuff programs, work in the Coat Check areas, and check the venues after the events are over for belongings that may have been left behind. I do not receive any event tickets or other related discounts. I am able to see many of the shows, however, while working in this capacity.

SUBSCRIBED and SWORN to before me this

4th day of

, 20 19

Lisa Ann Van Buskirk
Notary Public State of Utah
My Commission Expires on:
December 23, 2020

Comm. Number: 692591

NOTARY PUBLIC, Residing in

NOTARY PUBLIC, Residing in

Salt Lake

State

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

County

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

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