

SALT LAKE COUNTY DISCLOSURE STATEMENT

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

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

Under the provisions of the Utah Public Employees' and Officers' Ethics Act, §§ 67-16-1 et seq., U.C.A., 1953 as amended and the County Officers and Employees Disclosure Act, §§ 17 -16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, under penalties of perjury, make the following statement regarding my private business interests. (*Type or print all information*.)

Α.	Arlyn Bradshaw	County Council		(385) 468-7454		
	County Employee	Employed in (Cou	nty Division)	County Phone		
	2001 S State Street, Suite N2-200 Salt Lake City, UT 84190					
	Employee's Address					
B.	Best Friends Animal Society					
	Outside institution, entity, private business or person involved					
	Executive Director					
	Describe county employee's position or investment in the outside institution, entity, private busine ss, or personal contract					
	2005 South 1100 East, Salt Lake City, UT 84106					
	Outside institution, entity, business or person's address and phone number					
	relationship with, or transaction between, the business, institution, person, etc. and Salt Lake County. Use more sheets if necessary. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>) Best Friends Animal Society of Utah: Best Friends is a coalition partner with Salt Lake County Animal Services Salt Lake City Airport Advisory Board A member of my household is employed by the Salt Lake Legal Defender Association					
		77		Emplo	yee Signature	
	SUBSCRIBED a	nd SWORN to before me this	day of		, 20	
				NOTARY PUBLI	C, Residing in	
	[SEAL]		County		State	

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

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.) Position, or County Division for which you are employed or volunteering County/Volunteer's Phone Majority 51 LLC, KAOT LLC, Brighem Young University

Outside Institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure Covered person's status, relationship or commitment to the institution, entity, business or person named above Orem, UT

Address and phone number of the institution, entity, business or person named above C. Select the category that applies to yourself and the outside 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.

Note of the cook of the cook 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 None of the above is completed.) Covered Person's Signature SUBSCRIBED and SWORN to before me this _ NOTARY PUBLIC -STATE OF UTAM ly Comm. Exp 06/15/2020 Commission # 672015 [SEA]

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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A.	Ann Granato Sait Lake County Council 385-468-7457 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone					
	Tool South State N2-200 Soit Lake City 84114 Covered Person's County Address/Volunteer's Address					
В.	Frank Granalo Impolting Co. 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 of business Covered person's status, relationship or commitment to the institution, entity, business or person named above					
	1632 So Red wood Road 5LC 84104 Address and phone number of the institution, entity, business or person named above					
C.	Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:					
	I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County.					
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties.					
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)					
	Own a business which sells food goods to private companies					
	and restaurants					
	Ann Evanato					
SU	BSCRIBED and SWORN to before me this 29 day of January, 20 9.					
	A d					
	NICHOLE WATT Notary Public State of Utah NOTARY PUBLIC, Residing in					
[SE	My Commission Expires on: July 13, 2020 Comm. Number: 689716 Salt Lake County State					

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Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 2001 South State Street N2-200 Sait Lake City 84114
Covered Person's County Address/Volunteer's Address B. Stale of Utoh
Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure Salaried Employee Department of Heath Bureau of Managed Care

Covered person's status, relationship or commitment to the institution, entity, business or person named above 288 North 1460 West 5LC 84116 Address and phone number of the institution, entity, business or person named above Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above: I receive or have agreed to receive compensation for assisting a person or business entity in a transaction involving Salt Lake County. I am an officer, director, agent, employee or the owner of a substantial interest in a business entity that is subject to the regulation of Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity that does or anticipates doing business with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public duties. I hold a personal interest that creates a potential or actual conflict with my public duties. D. Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nature of the relationship of each business entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.) I am a case manager of persons eligible for Medicaid. SUBSCRIBED and SWORN to before me this 29 day of Januar-Notary Public State of Utah Commission Expires on: July 13, 2020 Comm. Number: 689716

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