

Jennifer WilsonSalt Lake County Mayor

Zachary Posner Chief Information Officer January 31, 2019

County Council
Salt Lake County
Government Center
2001 S. State Street
Salt Lake City, UT 84190

Dear County Council:

Provided below is a list of names of each individual who is turning in a Conflict of Interest form:

- 1. Premkumar Narayanan
- 2. Christopher Hronek
- 3. Brent Thompson
- 4. Daija Jones
- 5. Valina Eckley
- 6. Izabela Miller
- 7. Angela Cortese

Sincerely,

Zach Posner

Chief Information Officer

SALT LAKE COUNTY
GOVERNMENT CENTER

2001 S. State St. Ste. S3-600 Salt Lake City, UT 84190 385-468-0625 phone

> www.slco.org TTY: 7-1-1

(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 3 5,	0	, , i	P. III all Ingermanny
٩.	Prem Narayanan	Principal Data Engineer - IS		385-468-0737
	Covered Person	Position, or County Division for wh	ich you are employed or volunteering	County/Volunteer's Phone
	2001 South State St	treet,Salt Lake City, Utah 8419	0	
	Covered Person's County	y Address/Volunteer's Address		
3.	Intermountain Healt	hcare		
	Outside institution, entity is required in the above s		the Covered Person has a personal or busing	ness interest for which disclosure
	5121 South Cottony	vood Street, Murray, UT 84107		
	Covered person's status,	relationship or commitment to the ins	titution, entity, business or person named	above
	Research Collabora	tor		
	Address and phone numb	per of the institution, entity, business of	or person named above	
Э.	Select the category that	applies to yourself and the outside ins	stitution, entity, business or person identification	ed in subsection (B) above:
	I receive or have ag	greed to receive compensation for assis	sting a person or business entity in a transac	etion involving Salt Lake County.
	Salt Lake County. I am an officer, dire with Salt Lake Cou I hold an investmen	ector, agent, employee or owner of a sunty.	f a substantial interest in a business entity that of a substantial interest in a business entity that of a potential or actual conflict with my pull conflict with my public duties.	loes or anticipates doing business
).	Give a detailed description entity or person with the is completed.)	ion of the actual or potential conflicts of e County. Use more sheets if necessar	of interest identified above, i.e., the nature ory. (This disclosure statement will not be a	of the relationship of each busines ccepted as valid unless this sectio
	Collaborating on res	search papers with physicians f	rom Intermountain Healthcare bas	ed on my past employment
			Covered Person's Signature	
JU:	BSCRIBED and SWORN	N to before me this 10^{-6x} day of	January , 20 19.	
SE	ALL COMPANY	ELANI A. MARTINEZ Notary Public State of Utah Comm. No. 684857 omm. Expires Sep 2, 2019	NOTARY PUBLIC, Residing in Scult Coll Cerum County	State M

(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 Hronek Information Services	385-468-0645
	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	2001 S. State Street S3-600	
	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 lis required in the above section	business interest for which disclosure
	Part-time employement	
	Covered person's status, relationship or commitment to the institution, entity, business or person name	
	Countryside Condominium Complex 700 E 6910 S, Midvale, Utah, 84047 (Phone:	801.201.3566)
	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 idea	ntified in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a tra	nsaction involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a substantial interest in a business ent Salt Lake County. I am an officer, director, agent, employee or owner of a substantial interest in a business entity the same of the	
	with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my I hold a personal interest that creates a potential or actual conflict with my public duties.	
D		
D.	Give a detailed description of the actual or potential conflicts of interest identified above, i.e., the nat entity or person with the County. Use more sheets if necessary. (<i>This disclosure statement will not is completed.</i>)	
	The condominium complex is located within Salt Lake County and therefore would policies and/or regulations. I was recently voted onto the HOA board, where I will I in making financial decisions for our complex. This is a smaller commitment and I more than a few hours every month to accomplish my duties.	be compensated for assisting
	Covered Person's Signature	
SU	JBSCRIBED and SWORN to before me this 10th day of January, 201	<u>9</u> .
	MELANI A. MARTINEZ Notary Public State of Utah	entos

[SEAL]

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

County

State

Comm. No. 684857

My Comm. Expires Sep 2, 2019

(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*.)

Brent Thompson	Business Analyst, Information Services	385-468-0710
Covered Person	Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
2100 S State 3rd F	loor SLC Utah	
Covered Person's Count	ty Address/Volunteer's Address	10.15
Tinc Shave Ice LLC		
Outside institution, entities required in the above	y, private business or person in which the Covered Person has a personal or busection	usiness interest for which disclosure
Owner		
	, relationship or commitment to the institution, entity, business or person name	ed above
•	f Way WVC UT 84128	
	ber of the institution, entity, business or person named above	
Salact the category the	t applies to yourself and the outside institution, entity, business or person ident	tified in subsection (B) above:
I receive or have a	greed to receive compensation for assisting a person or business entity in a tran	saction involving Salt Lake County
	rector, agent, employee or the owner of a substantial interest in a business entit	ty that is subject to the regulation o
Salt Lake County. I am an officer, dip	rector, agent, employee or owner of a substantial interest in a business entity that	at does or anticipates doing busines
with Salt Lake Co	unty.	
	ent or other financial interest that creates a potential or actual conflict with my nterest that creates a potential or actual conflict with my public duties.	public duties.
	tion of the actual or potential conflicts of interest identified above, i.e., the nature County. Use more sheets if necessary. (<i>This disclosure statement will not be</i>	
	ness in Salt Lake County, I do not expect any potential conflicts beecting the business sites.	out could work with Divisions
	En The	
	Brent K. Thompson	Digitally signed by Brent K. Thompson Date: 2019.01.09 17:00:50 -07'00'
	Covered Person's Signature	Date: 2019.01.09 17:00:50 -07'00'
	A.	<u> </u>
BSCRIBED and SWOR	N to before me this 10 th day of 0 nuary, 20 1	<u> </u>
	A Im	La Arac
1	NOTARY PUBLIC, Residing in	Var War
	MELANI A. MARTINEZ Notary Public Sout \ cult	ist
EAL]	State of Utah	State
	Comm. No. 684857 My Comm. Expires Sep 2, 2019	

(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. (<i>Type or print all information</i> .)				
Α.	Daija Jones Information Services	801-633-1531		
	Covered Person Position, or County Division for which you are employed or volunteering 1907 Black Angus Drive, 84116	County/Volunteer's Phone		
	Covered Person's County Address/Volunteer's Address			
В.	Planned Parenthood Association of Utah Outside institution, entity, private business or person in which the Covered Person has a personal or business	ess interest for which disclosure		
	is required in the above section	sss merest for which disclosure		
	Covered person's status, relationship or commitment to the institution, entity, business or person named ab	pove		
	160 South 1000 East / GOI - 257 - 6789 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	1 in subsection (B) above:		
	I receive or have agreed to receive compensation for assisting a person or business entity in a transacti	on involving Salt Lake County.		
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity the Salt Lake County.			
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that do with Salt Lake County. I hold an investment or other financial interest that creates a potential or actual conflict with my public I hold a personal interest that creates a potential or actual conflict with my public duties.			
D.		f the relationship of each business		
	entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accompleted.) I am a member of the community education team.	cepted as valid unless this section		
	Instagram account. This may impact personal colleagues, t	but it has yet too.		
	Dayofo			
SU	DBSCRIBED and SWORN to before me this 21st day of January . 2019.			
	no I met	- in		
	MELANI A. MARTINEZ NOTARY PUBLIC. Residing in Notary Public State of Ulah Scale Only Notary Public State of Ulah	U IIT		
[S]	EAL] State of Utah Comm. No. 684857 My Comm. Expires Sep 2, 2019	State		

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

Un une	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> .)
A.	Valina Eckley - Web developer 8-0714 Covered Person Position for County Division for which you are employed or volunteering County/Volunteer's Phone
	Covered Person Position or County Division for which you are employed or volunteering County/Volunteer's Phone
	4308 S Whitey CT Taylogrille UT 84123 Covered Person's County Address/Volunteer's Address
В.	Cheer Salt Lake
	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
	Exective Director
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	4308 S Whitby CT Taylorsville 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
	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.	the second of the Court Herman short is a second (This disclaration of the second of t
	is completed.) I have been selected as Executive Director for Cheer Salt Lake
	entry or person with the County. Use more sheets it necessary. (It asserts that as each with not be accepted as valid unless this section is completed.) I have been selected as Executive Director for Cheer Salt Lake Starting in 2019. We are an all-Volunteer non profit, and I'll recive no Compensation for my position. I will do Some web related work for the group.
	I'll recive no Compensation for my position I will do
	Some web related work for the group.
	Valin Echlen
	Covered Person's Signature
SU	JBSCRIBED and SWORN to before me this 24 day of 2019.
	NOTARY PUBLIC, Residing in
	My Comm. Exp 08/07/2020 Salt Lake County UT
[SI	EAL] Commission # 690406 County State

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

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.	Izabela Miller	BTS Manager		385-468-0661
	Covered Person	Position, or County Division for wh	ich you are employed or volunteering	County/Volunteer's Phone
	2001 S State St S3	-600, SLC, UT 84190		
	Covered Person's Count	ty Address/Volunteer's Address		
В.	Daniel Krouk (ESR	I)		
٥.	Outside institution, entit is required in the above		the Covered Person has a personal or busin	ness interest for which disclosure
	Partner			
	Covered person's status	, relationship or commitment to the ins	titution, entity, business or person named a	ibove
	380 New York Stree	et, Redlands, CA USA		
	Address and phone num	ber of the institution, entity, business of	or person named above	
C.	Select the category that	t applies to yourself and the outside ins	titution, entity, business or person identifie	ed in subsection (B) above:
	I receive or have a	greed to receive compensation for assis	ting a person or business entity in a transac	tion involving Salt Lake County.
			f a substantial interest in a business entity the	hat is subject to the regulation of
	Salt Lake County. I am an officer, dir		abstantial interest in a business entity that d	oes or anticipates doing business
	with Salt Lake Co	unty.		
	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.			of interest identified above, i.e., the nature of the control of t	
			s Salt Lake County with GIS softwand he does not have any connection	
			laker le	rle
			Covered Person's Signature	
SU	BSCRIBED and SWOR	N to before me this 15th day of _	January , 20 19.	
			3	^
			ma I Mei	the nin
	ACTION .	MELANI A. MARTINEZ	NOTARY PUBLIC, Residing in	
		Notary Public	Sceld Lawe	UT
[SE	EAL]	State of Utah Comm. No. 684857	County	State
	My	Comm Evnires Sen 2 2010		

(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.	Angela Cortese	IS Project Manager		3854680693
	Covered Person	Position, or County Division for w	hich you are employed or volunteering	County/Volunteer's Phone
	8251s 560 e Sandy, U			
	Covered Person's Coun	ty Address/Volunteer's Address		
В.	LYFT Outside institution enti	tr. mrivete husiness or nemen in which	h the Covered Person has a personal or busin	- and interest for which disables we
	is required in the above		if the Covered Person has a personal or bush	less interest for which disclosure
	LYFT Driver			
		, relationship or commitment to the ir	nstitution, entity, business or person named a	above
		ancisco, CA 94107 855-865-9553		
	Address and phone num	nber of the institution, entity, business	s or person named above	
C.	Select the category that	at applies to yourself and the outside in	nstitution, entity, business or person identifie	ed in subsection (B) above:
	✓ I receive or have a	agreed to receive compensation for ass	sisting a person or business entity in a transac	tion involving Salt Lake County.
			of a substantial interest in a business entity t	hat is subject to the regulation of
	Salt Lake County. I am an officer, di		substantial interest in a business entity that d	oes or anticipates doing business
	with Salt Lake Co	ounty.		
		ent or other financial interest that creat interest that creates a potential or actu	ates a potential or actual conflict with my pull al conflict with my public duties.	olic duties.
D.			s of interest identified above, i.e., the nature of ary. (This disclosure statement will not be a	
	I am a part time Lyf	t driver		
			e picking up and driving in my persona	l vehicle.
	MI	ELANI A. MARTINEZ		
		Notary Public State of Utah		
		omm. No. 684857	11/1/17	
	My Co	omm. Expires Sep 2, 2019	Covered Person's Signature	22
		2. 8	1	
SU	BSCRIBED and SWOR	N to before me this 31^{30} day of)anuary , 20 19.	
	Springlifer States who	AAA DTINET	La Contract	1.0
	FATTA	Notary Public	NOTARY PUBLIC, Residing in	~~~
		State of Utah Comm. No. 684857	Salf Love	UT /
SE	EAL]	My Comm. Expires Sep 2, 2019	County	State

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A.	Angela Cortese IS Project Manager	3854680693
	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone
	8251s 560 e Sandy, UT 84070	
	Covered Person's County Address/Volunteer's Address	
B.	<u>Crystal Energy & Angelic Healing LLC</u> Outside institution, entity, private business or person in which the Covered Person has a personal or busis required in the above section	siness interest for which disclosure
	My personal business. Covered person's status, relationship or commitment to the institution, entity, business or person named	d above
	2300 26th St. San Francisco, CA 94107 855-865-9553	
	Address and phone number of the institution, entity, business or person named above	7
C.	Select the category that applies to yourself and the outside institution, entity, business or person identification.	fied in subsection (B) above:
	I receive or have agreed to receive compensation for assisting a person or business entity in a trans-	action involving Salt Lake County.
	I am an officer, director, agent, employee or the owner of a substantial interest in a business entity Salt Lake County.	
	I am an officer, director, agent, employee or owner of a substantial interest in a business entity that with Salt Lake County.	does or anticipates doing business
	I hold an investment or other financial interest that creates a potential or actual conflict with my p I hold a personal interest that creates a potential or actual conflict with my public duties.	public duties.
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 is completed.</i>)	
	I give on line & in person Oracle Angel card reading on a global basis. I offer personal energy work and energy balancing session. I conduct sound baths.	
	I never know who my client will be.	
		/
	Make Cor	(25
	Covered Person's Signature	
SU	BSCRIBED and SWORN to before me this 318 day of January, 2010	<u>1</u> .
		\mathcal{O}
	MELANI A. MARTINEZ NOTARY PUBLIC, Residing in	estina .
	Notary Public State of Utah Salt Once	1)T
[SE	Comm. No. 684857 My Comm. Expires Sep 2, 2019	State

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

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.	Angela Cortese IS Project Manager	3854680693	
	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer's Phone	
	8251s 560 e Sandy, UT 84070	1.4	
	Covered Person's County Address/Volunteer's Address		
В.	UBER		
	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	
	<u>UBER Driver</u> Covered person's status, relationship or commitment to the institution, entity, business or person named	nhava	
		10000	
	299 Main St #1300 SLC, UT 800-353-UBER 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 to 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	loes 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.	
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>)	of the relationship of each business ccepted as valid unless this section	
I am a part time Uber driver. I drive on the weekends and I never know who I will be picking up and driving in my personal vehicle.			
		1	
	Well Cor	(ese)	
	Covered Person's Signature		
SU	BSCRIBED and SWORN to before me this 31 st day of January, 2019.	z.	
	MELANI A. MARTINEZ NOTARY PUBLIC, Residing in	tere	
	State of Utah Comm. No. 684857 Scut Colic	VT	
[SE	EAL] My Comm. Expires Sep 2, 2019 County	State	