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.)

Un	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)
Α.	David M. Smith (OUA Executive Board 818565 9335
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	10741 S. Autumn Rain Road S. Jordan, Utah 840.
	Covered Person's County Address/Volunteer's Address
B.	Tanner LLC
	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 $PMNOYCC$
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	36 S. State Scret Suite 600 Salt Lane (+) Ut 89111
	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.	entity or person with the County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section
A	+ tanner LLC, we may Submit proposals
On	townty projects. While it is gonost y for different areas than my volunteer
Shel	y for different areas than my volunteer
0517	Tel+ Eshault disclose TMI).
-,	is all subject to actually winning a project of course. Covered Person's Signature Carry Summer
717	Covered Person's Signature Covered Person's Signature
SU	JBSCRIBED and SWORN to before me this day of OCTO ber, 20_19.
re	Notary Public SHERRI TRUJILLO COMMISSION # 701115 My Commission Expires July 02, 2022 STATE OF UTAH
(S	STATE OF UTAH

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

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.	Martín C. Muñoz CODA Executive Board	801-244-14	56
	Covered Person Position, or County Division for which you are employed or volunteering	County/Volunteer	's Phone
	6301 S. 3975 West Taylorsville, Utah 84129 Covered Person's County Address/Volunteer's Address		
B.	None Outside institution, entity, private business or person in which the Covered Person has a personal or busin	ess 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 a	bove	
	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 identifie		
	I receive or have agreed to receive compensation for assisting a person or business entity in a transact	ion involving Salt Lak	e 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.		g business
	I hold an investment or other financial interest that creates a potential or actual conflict with my public library and a personal interest that creates a potential or actual conflict with my public duties.	lic duties.	
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>)	f the relationship of ea cepted as valid unless	ch business this section
	rone		
	21 Truto Ca	anos	
	Covered Person's Signature		
SL	UBSCRIBED and SWORN to before me this		
	ellen		
	MICHELLE M HICKS NOTARY PUBLIC, Residing in My Comm. Exp 06/15/2020 NOTARY PUBLIC, Residing in	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
[SI	Commission # 672015 County	State	

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Un	der the provisions of the County Officers and Employees Disclosure Act, §§ 17-16a-1 et seq., U.C.A., 1953 as amended, I, the undersigned, der penalties of perjury, make the following statement regarding my personal or business interest. (<i>Type or print all information</i> .)
A	VIMICA CORPORTER - Board Member for CODA 801-623-154
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	4956 Riverside Dr. Munay, UT84123.
	Covered Person's County Address/Volunteer's Address
В.	N/A
	Outside institution, entity, private business or person in which the Covered Person has a personal or business interest for which disclosure is required in the above section
	NIA
	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.
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.)
	(n.), I.O.
	N/Λ .
	Myles
	Covered Person's Signature 17 tours Sex Hell Well 20 19
SI	JBSCRIBED and SWORN to before me this
	S24407 # noissimmo
	NOTARY PUBLIC, Residing in
	DESTINY GARCIA OF STATE OF UTAH OF STATE OF UTAH
TS.	SEAL! County State

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DESTINY GARCIA NOTARY PUBLIC - STATE OF UTAH My Comm. Exp 02/05/2023 Commission # 704425

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