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.)

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	Martha Wunderli	Salt Lake Council for Ag	ing and Adult Services	801-582-5445	
4 20	Covered Person	Position, or County Division	for which you are employed or volunteering	County/Volunteer's Phone	
		#301 Salt Lake City, Utah	84108		
	Covered Person's County Address/Volunteer's Address				
В.	AAA Fair Credit Fou				
	Outside institution, entity is required in the above s		which the Covered Person has a personal or bus	iness interest for which disclosure	
	Executive Director				
	Covered person's status, relationship or commitment to the institution, entity, business or person named above				
	230 West 200 South Suite 3104 Salt Lake City, Utah 84101 Address and phone number of the institution, entity, business or person named above				
	Address and phone numi	ber of the institution, entity, bus	iness 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, dir Salt Lake County.	ector, agent, employee or the ov	rner of a substantial interest in a business entity	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 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 descripti	ion of the estual as notantial son	flicts of interest identified above is the nature	a of the relationship of each busines	
	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. (This disclosure statement will not be accepted as valid unless this section is completed.)				
	AAA Fair Credit Four	ndation Receives \$40,000 in	SSBG funding from the County		
I d	eclare under criminal pena	alty under the law of Utah that th	ne foregoing is true and correct.		
Sig	med on the 30 day	of January , 2020 ,			
	Date	Month Year			
at S	Salt Lake City, Utah		_		
•	City or other location, an	d state or county			
Ma	artha D. Wunderli				
	nted Name	*	_		
Ŋ	Develal Si	Kunlech			
Sie	nature	- 4	-		

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

(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*.)

A.	David Mendenhall Board Member Council for Aging and Adult Services 8014330541			
	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone			
	2001 S State Street, Salt Lake City, UT 84190			
	Covered Person's County Address/Volunteer's Address			
B.	Housing Authority of Salt Lake City			
	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			
	Property Manager Senior Designated Property			
	Covered person's status, relationship or commitment to the institution, entity, business or person named above			
158 North 600 West, Salt Lake City, UT 84116				
	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 (I				
	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.			
n				
υ.	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.)			
	MANY SERVICES FOR SENIORS IN OUR APARTMENT			
	MANY SERVICES FOR SENIORS IN OUR APARTMENT			
	BUILDINGS.			
I de	eclare under criminal penalty under the law of Utah that the foregoing is true and correct.			
Sig	gned on the 6th Date day of February Month, Year,			
	Salt Lake City, Salt Lake County, Utah City or other location, and state or county			
	avid Mendenhall			
FII	nted Name			
Sig	nature			

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