

JENNY WILSON

Salt Lake County Mayor

HOLLY YOCOM

Department Director Community Services

MARTIN JENSEN

Division Director Parks & Recreation

Salt Lake County Government Center 2001 S. State Street Suite S4-700 (385) 468-1800 Dear County Councilmembers,

Attached is a list of Conflict of Interest Forms received from members of the Parks and Recreation Advisory Board and the Open Space Trust Fund Advisory Board as of February 27, 2020. Included are the following submissions:

Parks and Recreation Advisory Board

Soren Simonsen - Jordan River Commission, Community Studio, Impact Hub

Carl Fisher - Save Our Canyons

Ana Bergevin - Pluralsight

Jerry Cordova Ong - Softball State Director

Jorge Chamorro - Salt Lake City Corporation

Open Space Board

Nathan Blouin - Interwest Energy Alliance

Sarah Reale - Salt Lake Community College

Thankyou for your time,

Clayton Scrivner

PR and Marketing Manager

Salt Lake County Parks and Recreation

(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.	Soren Simonsen, Parks & Recred	ation Advi	sony Boar	901-7	06-1055
	Covered Person Position, or County Division for whic				unteer's Phone
		ake city	UT 84	109	45
	Covered Person's County Address/Volunteer's Address				
В.		lunity Stud		Impact Hul	
	Outside institution, entity, private business or person in which this required in the above section	ne Covered Person l	has a persoñal or	business interest for	which disclosure
	Executive Director / Director	or & Owner		Owner & Boo	ard Member
		tution, entity, busin 526 057 T 84 (52	ness or person nar	150 S State S	itred
	Address and phone number of the institution, entity, business or		ve		
C.	Select the category that applies to yourself and the outside insti	tution, entity, busir	ness or person ide	entified in subsection	(B) above:
	✓ I receive or have agreed to receive compensation for assisti	ing a person or busi	ness entity in a tra	ansaction involving S	alt Lake County.
	I am an officer, director, agent, employee or the owner of a	a substantial interes	st in a business en	atity that is subject to	the regulation of
	Salt Lake County. I am an officer, director, agent, employee or owner of a sub-	etantial interest in	husiness entity	that does or anticinate	s doing business
	with Salt Lake County.	ostantiai interest in a	a business citity	mat does of anticipate	s doing business
	I hold an investment or other financial interest that creates I hold a personal interest that creates a potential or actual of	A STATE OF THE PARTY OF THE PAR		y public duties.	
D.	entity or person with the County. Use more sheets if necessary is completed.)	. (This disclosure s	statement will not	be accepted as valid	unless this section
	Jordan River Commission is portly fun	ded thocky	S.L. Count	y through our a	n
nterlocal agreement. JRC works on projects and programs				ns with solt	Cake
	Givnty parks & Recreation.				
	community Studio is a consulting entity, county — but has in the post norked	but aves not	- contract	with sout (ake
	county - but has in the post worked	on County F	acilities-	may be subject t	o County negulati
	Impatt thub is a business in cubetor the	at Mas phone	ALLANDAÍ MA Ù	nolving sal	t Cake
	Compact that is a maintain and the last				
	county.	XX	VA SAN	KAPO.	
		Covered Person'	s Signature		
SU	BSCRIBED and SWORN to before me thisday of		, 20		
					
		NOTARY PUBI	IC Posiding in		
		NOTAKT PUBL	AC, Residing in		
[S]	EAL]	County		State	<u> </u>

(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.)

	der the provisions of the County Officers and Employees Disc der penalties of perjury, make the following statement regardin		
4	(ARL FISHER PARKS !	P. P.	801.910 7/167
A.	Covered Person Position, or County Division for w	vhich you are employed or volunteeri	801 · 910 · 7487 ng County/Volunteer's Phone
	1534 E. King as Rew Dr. Hores Covered Person's County Address/Volunteer's Address	DAY, UT 841/7-	
B.	Save Our Caryors Outside institution, entity, private business or person in which		
		th the Covered Person has a personal	or business interest for which disclosure
	is required in the above section		
	EXECUTIVE DIRECTOR		
	Covered person's status, relationship or commitment to the in	nstitution, entity, business or person	named above
	3690 E. FRET UNION RILLY +10	1 Catholica con History	Te 8//17/
	3690 E. Fort Union BLUD. #/0 Address and phone number of the institution, entity, business	s or person named above	13, 89/01
C.	Select the category that applies to yourself and the outside i	nstitution, entity, business or person	identified in subsection (B) above:
	receive or have agreed to receive compensation for ass	sisting 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 enti	ty that does or anticipates doing business
	with Salt Lake County. I hold an investment or other financial interest that creating in the salt Lake County.	ates a notential or actual conflict with	n my public duties
	I hold an investment of other inhalicial interest that erea I hold a personal interest that creates a potential or actu		Thy public duties.
D.	entity or person with the County. Use more sheets if necess is completed.)	sary. (This disclosure statement will i	not be accepted as valid unless this section
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	COUNTY. WE DO HOWE SOME COUNTY. WERE TON FOLICY	& PLANDING	nd the county
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		C I P I Si I I	
		Covered Person's Signature	
SU	BSCRIBED and SWORN to before me thisday of	teb.	20_23.
		NOTARY PUBLIC, Residing	in .
		TOTAL TODLIC, Residing	
[Q]	EAL]	County	State
I D.		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.)

	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. (Type or print all information.)
um	Anna Bergevin SICo Havismy Board 801=494-3999
A.	Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
	EIDS WI DOWN Trap Dr. South lardown INT 9409
	Covered Person's County Address/Volunteer's Address
	Disposition of the second for the second of
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
	maliet (emplyee)
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	Gust Jordan, Ist
	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:
C.	Select the category that applies to yourself and the outside histitution, entity, business of 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.
	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
	is completed.)
	and an employed of moral ded at come level for City I be
	Canny with way be regulared at since by Sico, but no
	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 an employee of Plural sight, which has offices in Salt Lake Cunty which may be regulated at same level by SICO, but no that I'm directly aware of or involved with.
	of vent
	\bigcap
	(VIIII)
	Covered Person's Signature
OT.	BSCRIBED and SWORN to before me this
SC	BSCRIBED and SWORN to before me thisday of
	NOTARY PUBLIC, Residing in
ſS	EAL1 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.)

Un 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> .)
А	Jerry Cordova Ong DISTRICT S SLP/R BOARD Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone
•	
	4784 DORICEE DR. WJ, UT 84088
	Covered Person's County Address/Volunteer's Address
В.	SOFTBALL STATE DIRECTOR
	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
	STATE DIRECTOR
	Covered person's status, relationship or commitment to the institution, entity, business or person named above
	SAME AS ABOVEE
	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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)
	Covered Person's Signature
SU	JBSCRIBED and SWORN to before me this 12 day of FeB , 20 20
	NOTARY PUBLIC, Residing in
ſS	EAL] 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.	Jorge Chamorro	Parks and Recreation Advisor	ry Board	3854147314		
л.	Covered Person	Position, or County Division for whi	ch you are employed or volunteering	County/Volunteer's Phone		
	3031 S 500 E, South Salt Lake, 84106					
	Covered Person's County Address/Volunteer's Address					
В.	Salt Lake City Corp					
υ.	Outside institution, entity is required in the above s		the Covered Person has a personal or busi	ness interest for which disclosure		
	Slat Lake City Corp					
	Covered person's status,	Covered person's status, relationship or commitment to the institution, entity, business or person named above				
	212 E 600 S, SLC, 84111					
	Address and phone numb	per of the institution, entity, business o	r person named above			
C.	Select the category that	Select the category that applies to yourself and the outside institution, entity, business or person identified in subsection (B) above:				
	I receive or have ag	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.					
			bstantial 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. (<i>This disclosure statement will not be accepted as valid unless this section is completed.</i>)					
	None expected					
			Covered Person's Signature			
CII	DSCDIDED and SWODN	I to before me this day of	, 20			
SU	DSCRIDED and SWORN	to before the thisday of		•		
			NOTARY PUBLIC, Residing in			
			The February in			
[SI	EAL]		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.)

		he County Officers and Emy, make the following staten				53 as amended, I, the undersigned, or print all information.)
A.	Covered Person	Position, or County D	ivision for whi	ch you are employed o	r volunteering	County/Volunteer's Phone
	Covered Person's Co	unty Address/Volunteer's A	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					
	Covered person's sta	tus, relationship or commitm	ment to the inst	titution, entity, business	s or person named a	above
	Address and phone n	umber of the institution, ent	ity, business o	r person named above		
C.	Select the category	that applies to yourself and	the outside ins	titution, entity, business	s or person identific	ed 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.					
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				Covered Person's S	ignature	
SU	BSCRIBED and SWO	ORN to before me this	day of		, 20	
				NOTARY PUBLIC	, Residing in	
[SI	EAL]			County		State

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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.) Board Member, SL County Open Spaces Trust Committee 435-757-4660 Covered Person Position, or County Division for which you are employed or volunteering County/Volunteer's Phone 159 W Layton Ave, Salt Lake City, Utah 84115 Covered Person's County Address/Volunteer's Address Salt Lake Community College 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 Currently employed as the Director of Digital Marketing at SLCC Covered person's status, relationship or commitment to the institution, entity, business or person named above 4600 S. Redwood Road, SLC 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. 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.) SLCC is part of the Utah System of Higher Education. Although State owned, we often work with Salt Lake County as all of our campuses and sites are located within Salt Lake County. Digitally signed by Sarah Reale Sarah Reale Date: 2020.02.10 14:15:53 -07'00' Covered Person's Signature SUBSCRIBED and SWORN to before me this 10 day of February NOTARY PUBLIC, Residing in [SEAL] County State