



ELECTED OFFICER CONFLICT OF INTEREST DISCLOSURE

Elected officers of Town of Alta are required to comply with the provisions and requirements outlined in Utah Code §§ 10-3-1301, *et seq.* (*Municipal Officers' and Employees' Ethics Act*). Elected officials are required to complete this form and submit it to the Town Clerk between January 1-31 each calendar year. Pursuant to Utah Code § 10-3-1313(5), any elected official who fails to complete and submit this form within seven calendar days after receiving notice of their failure to do so may be guilty of a class B misdemeanor, requires reporting to the Utah Attorney General's Office, and may be subject to a \$100 fine. If additional space is needed for responses and you are not using the fillable PDF, attach additional pages as necessary.

HOUSEHOLD INFORMATION

Your name: Carolyn Ancil

Spouse's name (if applicable): Kenneth Libre

Name of all adults residing in your household not related by marriage or blood:

DISCLOSURE OF EMPLOYMENT

For all individuals listed above, identify all current employers, and all employers during the preceding calendar year, including a brief description of the employment, occupation, and job title:

Carolyn:

Utah Emergency Physicians: ER physician at Intermountain Medical Center, Director of Quality

Curi: Chief Medical Advisor, physician advisor to medical malpractice insurance company

Kenneth:

Alta Medical Clinic: physician

Community Health Centers: physician

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DISCLOSURE OF BUSINESS INTERESTS

Identify by name all entities that you currently own(ed), in whole or in part, or serve(d) as an officer, or did during the preceding calendar year, including the business or activity conducted by the entity and your position in the entity:

Alta Medical Clinic: jointly owned by Carolyn and Kenneth

Zevon Partners; jointly owned rental realstate investments, not primary residence

DISCLOSURE OF INCOME

Identify by name all individuals or entities from whom you received \$5,000 or more in income during the preceding year, include a brief description of the type of business or activity conducted by the individual or entity:

As above: physician related jobs with Utah Emergency Physicians, Curi, Alta Medical Clinic
Zevon Partners

DISCLOSURE OF STOCKS & BONDS

Identify by name all entities in which you currently, or during the preceding year, own(ed) stocks or bonds having a fair market value of \$5,000 or more (excluding funds managed by a third-party - i.e. blind trusts, managed investment accounts, and mutual funds), and the type of business or activity conducted by the entity:

Google, Apple, Ford, GE, GM, AT & T

DISCLOSURE OF LEADERSHIP POSITIONS

If not listed above, identify by name all entities that you currently, or during the preceding year, serve(d) in a paid leadership capacity or as a paid or unpaid director, describe the type of business or activity conducted by the entity, and the type of position you hold in the entity:

none

OTHER OPTIONAL DISCLOSURES

Identify any other information, including real property interests, or a description of any other matter or interest that the you believe may constitute a conflict of interest:

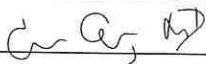
no conflict of interests, Own a home and a business in town of Alta

ACKNOWLEDGEMENT

I acknowledge that I have read and understand Utah Code §§ 10-3-1301, *et seq.* (*Municipal Officers' and Employees' Ethics Act*), I have included and made all required disclosures, I have accurately and truthfully represented all information disclosed on this form, and I understand the penalties for improper disclosure or otherwise violating applicable provisions of State law.

Name: Carolyn Anctil

Signature:

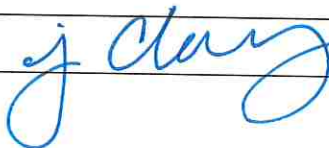


Date: 01/12/25

RECEIVED

Clerk/Recorder:

1/17/2025



Date:

1/17/25