

# Fairfield Town

Utah County, Utah

## Conflict Of Interest Disclosure Statement

Under The Municipal Officers' And Employees' Ethics Act  
(Utah Code Annotated Section 10-3-1313, 20A-11-1604(6)), and 10-3-301.5

\_\_\_\_\_  
Candidate/Officerholder Name (Print)

\_\_\_\_\_  
Office/Seat

1A: The name and address of each current employer and each employer during the preceding year, including a brief description of the employment, occupation, and job title.

Current Employer(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Previous Employer(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1B: For each employer described in Item 1A, a brief description of the employment, including the individual's occupation and, as applicable, job title.

Current Employer(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Previous Employer(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2A: The name of any entity\* in which the individual is an owner or officer or was an owner or officer during the preceding year.

☐ Check if not applicable.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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2B: A brief description of the type of business or activity conducted by the entity(s) described in Item 2A

☐ Check if not applicable.

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2C: Individual's position in the entity(ies) described in Item 2A

☐ Check if not applicable.

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3A: The name of each individual from whom, or entity from which, the individual has received \$5,000 or more in income during the preceding year.\*\*

☐ Check if not applicable.

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3B: A brief description of the type of business or activity conducted by the individual or entity described in Item 3A\*\*

☐ Check if not applicable.

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4A: The name of each entity in which the individual holds any stocks or bonds having a fair market value of \$5,000 or more as of the date of the disclosure form or during the preceding year (excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds).

☐ Check if not applicable.

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4B: A brief description of the type of business or activity conducted by the entity(s) described in Item 4A.

☐ Check if not applicable.

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5A: The name of each entity or organization not described in Items 2A through 4B of this form in which the individual currently serves, or served in the preceding year, on the board of directors or in any other type of paid leadership capacity.

☐ Check if not applicable.

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5B: A brief description of the type of business or activity conducted by the entity(s) or organization(s) described in Item 5A

☐ Check if not applicable.

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5C: Description of the type of advisory position held by the individual within the entity(s) organization(s) described in Item 5A.

☐ Check if not applicable.

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6A (Optional): Description of any real property in which the individual holds an ownership or other financial interest that the individual believes may constitute a conflict of interest.

☐ Check if not applicable.

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6B (Optional): Description of type of interest held by the individual in the property(s) described in Item 6A.

☐ Check if not applicable.

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7A: The name(s) of the individual's spouse and any other adult residing in the individual's household who is **not related by blood or marriage**, as applicable.  
☐ Check if not applicable.

Spouse:	Other Adults:
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

7B: For the individual's spouse, the name(s) and address(es) of each current employer(s) and name(s) and address(es) of each employer(s) during the preceding year.  
☐ Check if not applicable.

Spouse's Current Employer(s):	Spouse's Previous Employer(s):
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

7C: A brief description of the employment and occupation of each adult who resides in the individual's household and is **not related to the individual by blood or marriage**.  
☐ Check if not applicable

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8A (Optional): A description of any other matter or interest that the individual believes may constitute a conflict of interest.

☐ Check if not applicable

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**Check if applicable:**

- ☐ Under UCA 20A-11-1604(7)(a), I claim that I am an at-risk government employee as defined in UCA 63G-2-303(1)(a) and that my employment under Item 1 be redacted.
- ☐ Under UCA 20A-11-1604(7)(a), I claim that my spouse is an at-risk government employee as defined in UCA 63G-2-303(1)(a) and that my spouse's employment under Item 7 be redacted.

Date: \_\_\_\_\_ ☐ I, the regulated policyholder or candidate, believe this form is true and accurate to the best of my knowledge. (Check box)

\_\_\_\_\_  
Candidate/Office holder's Signature

**Privacy Notice:**

- ❖ The personal data collected in this form will be available to the public under 63G-2-301.
- ❖ Any personal data redacted in accordance with 20A-11-1604(7)(a) is not considered a public record under 63G-2-301. This data will be used for administrative purposes and will not be displayed to the public. This information is required under 20A-11-1604. Violation of this section may result in a class B misdemeanor and a \$100 fine. The information, unless specified, will be publicly available on the disclosures and possibly other election-related websites. Personal data collected on the website will not be sold. The personal data will be included in the record series GRS 1911.