

Conflict of Interest Form



Candidate/Officeholder: JACK C. WILBER

Office: COUNCIL MEMBER

1A: The name and address of each of the regulated officeholder's current employers and each of the regulated officeholder's employers during the preceding year.

- Current Employer(s)/Address(es):

RETIRED

- Previous Employer(s)/Address(es):

CASCADE PUMP SANTA FE SPRINGS, CA
VAUGHAN'S INDUSTRIAL PARAMOUNT, CA

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

- Current Employment:

NONE

- Previous Employment:

2A: For each entity in which the regulated officeholder is an owner or officer, or was an owner or officer during the preceding year, the name of the entity(ies).

NONE

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

NONE

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

NONE

3A: For each individual from whom, or entity from which, the regulated officeholder has received \$5,000 or more in income during the preceding year the name of individual(s) or

entity(ies).

CASCADE PUMP

3B: A brief description of the type of business or activity conducted by the individual(s) or entity(ies) described in item 3A.

CONSULTANT

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

NONE

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

NONE

5A: For each entity not listed in 2A through 4B in which the regulated officeholder currently serves, or served in the preceding year, in a paid leadership capacity or in a paid or unpaid position on a board of directors, the name of the entity(ies) or organization(s)

NONE

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

NONE

5C: The type of position held by the regulated officeholder in the entity(ies) or organization(s) described in Item 5A.

NONE

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

NONE

6B (Optional): A description of the type of interest held by the regulated officeholder in the property(ies) described in Item 6A.

NONE

7A: The name of the regulated officeholder's spouse.

- Spouse's Name: GERALDINE L. WILBER

The name of each of the regulated officeholder's spouse's current employers and each of the regulated officeholder's spouse's employers during the preceding year, if the regulated officeholder believes the employment may constitute a conflict of interest.

- Spouse's Current Employer(s): RETIRED

- Spouse's Previous Employer(s): N/A

7B: The name of any adult residing in the regulated officeholder's household who is not related to the officeholder by blood.

- Other Adults: NONE

7C: For each adult described in Subsection 7B, a brief description of the adult's employment or occupation, if the regulated officeholder believes the adult's presence in the regulated officeholder's household may constitute a conflict of interest.

N/A

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

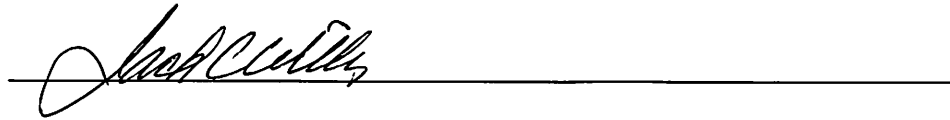
NONE

Date: 6/2/25

☒ I, the regulated officeholder or candidate, believe this form is true and accurate to the best of my knowledge. (Check box)

☐ I am an at-risk government employee, and/or my spouse is an at-risk government employee as that term is defined in Subsection 63G-2-303(1)(a). I request that

information relating to my employment, as well as my spouse's name and employment be redacted in accordance with 20A-11-1604(7)(a). (Check box)

A handwritten signature in black ink, appearing to read "Scott C. Williams", is written over a horizontal line.

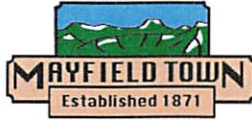
Candidate/Officeholder's Signature

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.

Conflict of Interest Form



Candidate/Officeholder: MYRA G. FULLER (MITZI)

Office: COUNCIL MEMBER

1A: The name and address of each of the regulated officeholder's current employers and each of the regulated officeholder's employers during the preceding year.

- Current Employer(s)/Address(es):

N/A

- Previous Employer(s)/Address(es):

UNIVERSITY OF UTAH HOSPITAL
SALT LAKE CITY, UT

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

- Current Employment:

N/A

- Previous Employment:

CHARGE NURSE - RESPONSIBLE FOR
NIGHT CREW NURSES, DID PATIENT CARE.

2A: For each entity in which the regulated officeholder is an owner or officer, or was an owner or officer during the preceding year, the name of the entity(ies).

N/A

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

N/A

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

N/A

3A: For each individual from whom, or entity from which, the regulated officeholder has received \$5,000 or more in income during the preceding year the name of individual(s) or

entity(ies).

NONE

3B: A brief description of the type of business or activity conducted by the individual(s) or entity(ies) described in item 3A.

N/A

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

N/A

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

N/A.

5A: For each entity not listed in 2A through 4B in which the regulated officeholder currently serves, or served in the preceding year, in a paid leadership capacity or in a paid or unpaid position on a board of directors, the name of the entity(ies) or organization(s)

N/A

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

N/A.

5C: The type of position held by the regulated officeholder in the entity(ies) or organization(s) described in Item 5A.

N/A

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

6B (Optional): A description of the type of interest held by the regulated officeholder in the property(ies) described in Item 6A.

7A: The name of the regulated officeholder's spouse.

- Spouse's Name: VAL E. FULLER

The name of each of the regulated officeholder's spouse's current employers and each of the regulated officeholder's spouse's employers during the preceding year, if the regulated officeholder believes the employment may constitute a conflict of interest.

- Spouse's Current Employer(s):
N/A
- Spouse's Previous Employer(s):
SORENSEN CONSTRUCTION

7B: The name of any adult residing in the regulated officeholder's household who is not related to the officeholder by blood.

- Other Adults:
N/A

7C: For each adult described in Subsection 7B, a brief description of the adult's employment or occupation, if the regulated officeholder believes the adult's presence in the regulated officeholder's household may constitute a conflict of interest.

N/A

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

N/A

Date: 6/4/2025

☒ I, the regulated officeholder or candidate, believe this form is true and accurate to the best of my knowledge. (Check box)

☐ I am an at-risk government employee, and/or my spouse is an at-risk government employee as that term is defined in Subsection 63G-2-303(1)(a). I request that

information relating to my employment, as well as my spouse's name and employment be redacted in accordance with 20A-11-1604(7)(a). (Check box)

A handwritten signature in cursive script, reading "Myra L. Fuller", is written over a solid horizontal line.

Candidate/Officeholder's Signature

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Conflict of Interest Form



Candidate/Officeholder: Travis Good

Office: Mayor

1A: The name and address of each of the regulated officeholder's current employers and each of the regulated officeholder's employers during the preceding year.

- Current Employer(s)/Address(es):

EcoLife
327 S Main Ephraim, UT 84627

- Previous Employer(s)/Address(es):

EcoLife
" " "

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

- Current Employment:

Owner

- Previous Employment:

Owner

2A: For each entity in which the regulated officeholder is an owner or officer, or was an owner or officer during the preceding year, the name of the entity(ies).

EcoLife, Mountain Auto and Cycle

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

Construction, landscaping, pest control
Vehicle sales

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

Owner

3A: For each individual from whom, or entity from which, the regulated officeholder has received \$5,000 or more in income during the preceding year the name of individual(s) or

entity(ies).

Travis Good Ecolife

3B: A brief description of the type of business or activity conducted by the individual(s) or entity(ies) described in item 3A.

Construction, landscaping, pest control

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

None

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

none

5A: For each entity not listed in 2A through 4B in which the regulated officeholder currently serves, or served in the preceding year, in a paid leadership capacity or in a paid or unpaid position on a board of directors, the name of the entity(ies) or organization(s)

none

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

none

5C: The type of position held by the regulated officeholder in the entity(ies) or organization(s) described in Item 5A.

none

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

6B (Optional): A description of the type of interest held by the regulated officeholder in the property(ies) described in Item 6A.

7A: The name of the regulated officeholder's spouse.

- Spouse's Name: Linsy Good

The name of each of the regulated officeholder's spouse's current employers and each of the regulated officeholder's spouse's employers during the preceding year, if the regulated officeholder believes the employment may constitute a conflict of interest.

- Spouse's Current Employer(s):
N/A
- Spouse's Previous Employer(s):
N/A

7B: The name of any adult residing in the regulated officeholder's household who is not related to the officeholder by blood.

- Other Adults:
none

7C: For each adult described in Subsection 7B, a brief description of the adult's employment or occupation, if the regulated officeholder believes the adult's presence in the regulated officeholder's household may constitute a conflict of interest.

none

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

none

Date: 6-5-25

☒ I, the regulated officeholder or candidate, believe this form is true and accurate to the best of my knowledge. (Check box)

☐ I am an at-risk government employee, and/or my spouse is an at-risk government employee as that term is defined in Subsection 63G-2-303(1)(a). I request that

information relating to my employment, as well as my spouse's name and employment be redacted in accordance with 20A-11-1604(7)(a). (Check box)

A handwritten signature in black ink, appearing to read "Timothy", is written over a solid horizontal line.

Candidate/Officeholder's Signature

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