This form uses tables. Please add as many additional rows as necessary for each item.

Date This Form was Completed	17-Jan-2025
Name of Officeholder	Kenneth D Phippen

Section 1: Employment

You must disclose all current employers as well as any employers during the preceding year.

Current Employer	Address	Occupation/Job Title

Non-current Employers from Preceding Year	Address	Occupation/Job Title
Northrop Grumman	9160 UT-83, Corinne, UT 84307	Software Craftsman

Section 2: Entities in which you are an owner or officer

You must disclose all current entities as well as any entities during the preceding year.

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity

Non-current Entities from preceding year	Type of business or activity conducted by the entity	Your position in the entity

Section 3: Income Sources

You must disclose each individual or entity from whom you have received \$5,000 or more in income currently and during the preceding year.

Name of Individual or Entity	Type of business or activity conducted by the individual or entity
Farr West City	Local Government

Section 4: Investments

You must disclose each entity in which you hold any stocks or bonds having a fair market value of \$5,000 or more as of the date of disclosure or during the preceding year but excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds.

Name of Entity (Current)	Type of business or activity conducted by the entity

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity

Section 5: Leadership Roles

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity	Your position in the entity

Section 6: Real Property (Optional)

You may disclose a real property that you hold an ownership or other financial interest that you believe may constitute a conflict of interest.

Property Details	Type of Interest Held

Section 7: Spouse

You must disclose the name of your spouse as well as all current employers as well as any employers during the preceding year.

Name of Spouse	Tina C. Phippen

Current Employer of Spouse	Address	Occupation/Job Title
Self	3372 N 2575 W Farr West	Hair Stylist

Non-current Employers of Spouse from Preceding Year	Address	Occupation/Job Title

Section 8: Other Adult Household Members

You must disclose the name of any adult in your household who is not related by blood or marriage as well as all current employers and occupations. Please copy and paste these tables if you need to disclose more than one individual.

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Current Employer of Individual	Address	Occupation/Job Title

Section 9: Additional Disclosures (Optional)

You may disclose any other matter or interest that you believe may constitute a conflict of interest.

Description	

I certify that I believe this form to be true and accurate to the best of my knowledge.

This form uses tables. Please add as many additional rows as necessary for each item.

Date This Form was Completed		1.14.25
Name of Officeholder	BIYD FORM	

Section 1: Employment

You must disclose all current employers as well as any employers during the preceding year.

Current Employer	Address	Occupation/Job Title
PYE-BACKAR FIRE	4155 HARRISON	NATIONAL SMES
SAFFTY	BLUB Dysen, Ut	Lemore

Non-current Employers from Preceding Year	Address	Occupation/Job Title
SAME	 	

Section 2: Entities in which you are an owner or officer

You must disclose all current entities as well as any entities during the preceding year.

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity
SAME AS ABOVE		SAME DE DROUG

Non-current Entities from	Type of business or activity	Your position in the entity
preceding year	conducted by the entity	

Section 3: Income Sources

You must disclose each individual or entity from whom you have received \$5,000 or more in income currently and during the preceding year.

Name of Individual or Entity	11 ****	Type of business or activity conducted by the individual or entity

Section 4: Investments

You must disclose each entity in which you hold any stocks or bonds having a fair market value of \$5,000 or more as of the date of disclosure or during the preceding year but excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds.

Name of Entity (Current)	Type of business or activity conducted by
	the entity
PYE- BAKKER FILE & SAFETY	

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity

Section 5: Leadership Roles

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity
		,

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity	Your position in the entity

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Section 6: Real Property (Optional)

You may disclose a real property that you hold an ownership or other financial interest that you believe may constitute a conflict of interest.

Property Details	Type of Interest Held

Section 7: Spouse

You must disclose the name of your spouse as well as all current employers as well as any employers during the preceding year.

Name of Spouse	PAM FERRIN	

Current Employer of	Address	Occupation/Job Title
Spouse 2 1	2212 W. 3100 N.	NA
	FIRE WEST, Ut.	

Non-current Employers of Spouse from Preceding Year	Address	Occupation/Job Title

Section 8: Other Adult Household Members

You must disclose the name of any adult in your household who is not related by blood or marriage as well as all current employers and occupations. Please copy and paste these tables if you need to disclose more than one individual.

Name of Individual	N/A	

Current Employer of	Address	Occupation/Job Title
Individual		

Section 9: Additional Disclosures (Optional)

You may disclose any other matter or interest that you believe may constitute a conflict of interest.

Description	1	 	

I certify that I believe this form to be true and accurate to the best of my knowledge.

This form uses tables. Please add as many additional rows as necessary for each item.

Date This Form was	
Completed	16 January 2025
Name of Officeholder	
	Robert H. Blind

Section 1: Employment

You must disclose all current employers as well as any employers during the preceding year.

Current Employer	Address	Occupation/Job Title
Weber County School District	5320 Adams Ave. Pkwy Ogden, UT 84405	Bus Driver

Non-current Employers from Preceding Year	Address	Occupation/Job Title
None	N/A	N/A

Section 2: Entities in which you are an owner or officer

You must disclose all current entities as well as any entities during the preceding year.

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity
N/A	N/A	N/A
	1	

Non-current Entities from preceding year	Type of business or activity conducted by the entity	Your position in the entity
N/A	N/A	N/A

Section 3: Income Sources

You must disclose each individual or entity from whom you have received \$5,000 or more in income currently and during the preceding year.

Name of Individual or Entity	Type of business or activity conducted by the individual or entity
Farr West City	Government/City Council
Weber County Sewer District	Board of Trustees

Section 4: Investments

You must disclose each entity in which you hold any stocks or bonds having a fair market value of \$5,000 or more as of the date of disclosure or during the preceding year but excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds.

Name of Entity (Current)	Type of business or activity conducted by the entity
None	N/A

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity
None	N/A

Section 5: Leadership Roles

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity
Farr West City	City Government	City Councilman
Weber County Sewer	Administration of County	Board of Trustees Member
District	Sewer System	

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity	Your position in the entity
None	N/A	N/A

Section 6: Real Property (Optional)

You may disclose a real property that you hold an ownership or other financial interest that you believe may constitute a conflict of interest.

Property Details	Type of Interest Held
None/No Holdings	N/A

Section 7: Spouse

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You must disclose the name of your spouse as well as all current employers as well as any employers during the preceding year.

Name of Spouse	Sadie Blind
Name of opouse	Sadie Band

Current Employer of Spouse	Address	Occupation/Job Title
None	N/A	N/A

Non-current Employers of Spouse from Preceding Year	Address	Occupation/Job Title
None	N/A	N/A

Section 8: Other Adult Household Members

You must disclose the name of any adult in your household who is not related by blood or marriage as well as all current employers and occupations. Please copy and paste these tables if you need to disclose more than one individual.

Name of Individual	None

Current Employer of Individual	Address	Occupation/Job Title
N/A	N/A	N/A

Section 9: Additional Disclosures (Optional)

You may disclose any other matter or interest that you believe may constitute a conflict of interest.

Description	None

I certify that I believe this form to be true and accurate to the best of my knowledge.

Robert H. Blind ø a Signature of Special Public Officer

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This form uses tables. Please add as many additional rows as necessary for each item.

Date This Form was Completed	1/14/2025	
Name of Officeholder	1) avid & lay	

Section 1: Employment

You must disclose all current employers as well as any employers during the preceding year.

Current Employer	Address	Occupation/Job Title
NA		

Non-current Employers	Address	Occupation/Job Title
from Preceding Year		
NA		

Section 2: Entities in which you are an owner or officer

You must disclose all current entities as well as any entities during the preceding year.

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity
Farr West City	City Government	Concil Member

Non-current Entities from preceding year	Type of business or activity conducted by the entity	Your position in the entity

Section 3: Income Sources

You must disclose each individual or entity from whom you have received \$5,000 or more in income currently and during the preceding year.

Name of Individual or Entity	Type of business or activity conducted by the individual or entity
Retired NA	

Section 4: Investments

You must disclose each entity in which you hold any stocks or bonds having a fair market value of \$5,000 or more as of the date of disclosure or during the preceding year but excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds.

Name of Entity (Current)	Type of business or activity conducted by the entity
NA	

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity

Section 5: Leadership Roles

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity	Your position in the entity

Section 6: Real Property (Optional)

You may disclose a real property that you hold an ownership or other financial interest that you believe may constitute a conflict of interest.

Section 7: Spouse

You must disclose the name of your spouse as well as all current employers as well as any employers during the preceding year.

Name of Spouse	NA	Deceased	

Current Employer of	Address	Occupation/Job Title
Spouse		

Non-current Employers of Spouse from Preceding Year	Address	Occupation/Job Title
Spouse nom rieceding real		

Section 8: Other Adult Household Members

You must disclose the name of any adult in your household who is not related by blood or marriage as well as all current employers and occupations. Please copy and paste these tables if you need to disclose more than one individual.

Name of Individual	None	
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Current Employer of	Address	Occupation/Job Title
Individual		

Section 9: Additional Disclosures (Optional)

You may disclose any other matter or interest that you believe may constitute a conflict of interest.

Description	

I certify that I believe this form to be true and accurate to the best of my knowledge.

Signature of Special Public Officer

This form uses tables. Please add as many additional rows as necessary for each item.

Date This Form was Completed	01-16-2025
Name of Officeholder	TIMETHY N. Shype

Section 1: Employment

You must disclose all current employers as well as any employers during the preceding year.

Current Employer	Address	Occupation/Job Title
NONE		
s before maximum or hed a	I ud to save	Name of Entity/Contern

Section 2: Entities in which you are an owner or officer

You must disclose all current entities as well as any entities during the preceding year.

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity
NONE		18510/1 gins 15 (2851 16 no re-
ued e lu scar Burcoscid a u u c	naerie is new fillenge aver heide	entre indiscription and in a ministration of the

Non-current Entities from	Type of business or activity	Your position in the entity
preceding year	conducted by the entity	Latron of Entry (Januart)
NONE	voltas adityć batem opo	

Section 3: Income Sources

You must disclose each individual or entity from whom you have received \$5,000 or more in income currently and during the preceding year.

Name of Individual or Entity	Type of business or activity conducted by the individual or entity
NONE	BOWING STREET
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Section 4: Investments

You must disclose each entity in which you hold any stocks or bonds having a fair market value of \$5,000 or more as of the date of disclosure or during the preceding year but excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds.

Name of Entity (Current)	Type of business or activity conducted by
	the entity
NONE	Represent Friday and Friday and Friday and
	a a a a a a a a a a a a a a a a a a a

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity
NONE	
	conducted 1

Section 5: Leadership Roles

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity
NONE		
		sep roc 8 emponi 16 hodo

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity	Your position in the entity
NONE	to provid this provincient when	กลาโปล คายมาก คาย แก่ง - 1 ตั้งสระดบ
Active applied to a contract of the	eboldh old Midde Brit doc S alarse	ouan when an recorded affect
	กลาวาดสาสสุดกระบายแม่พ่าเลเวณ	eiteren no leman energie

Section 6: Real Property (Optional)

You may disclose a real property that you hold an ownership or other financial interest that you believe may constitute a conflict of interest.

Property Details	Type of Interest Held
NONE	

Section 7: Spouse

You must disclose the name of your spouse as well as all current employers as well as any employers during the preceding year.

Name of Spouse	_
----------------	---

Current Employer of Spouse	Address	Occupation/Job Title

Non-current Employers of Spouse from Preceding Year	Address	Occupation/Job Title

Section 8: Other Adult Household Members

You must disclose the name of any adult in your household who is not related by blood or marriage as well as all current employers and occupations. Please copy and paste these tables if you need to disclose more than one individual.

Name of Individual	Name of Individual	_	
--------------------	--------------------	---	--

Current Employer of Individual	Address	Occupation/Job Title

Section 9: Additional Disclosures (Optional)

You may disclose any other matter or interest that you believe may constitute a conflict of interest.

Description	NONE	

I certify that I believe this form to be true and accurate to the best of my knowledge.

This form uses tables. Please add as many additional rows as necessary for each item.

Date This Form was Completed	Jan. 29, 2025
Name of Officeholder	Katie Williams

Section 1: Employment

You must disclose all current employers as well as any employers during the preceding year.

Current Employer	Address	Occupation/Job Title
Avenue Consultants	6605 Redwood Rd Taylorsville, UT	Public Involvement Manager

Non-current Employers	Address	Occupation/Job Title
from Preceding Year		
Horrocks 49	19 S 1500 W Ste 300 Riverdale, U	Public Involvement Specialist

Section 2: Entities in which you are an owner or officer

You must disclose all current entities as well as any entities during the preceding year.

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity

Non-current Entities from preceding year	Type of business or activity conducted by the entity	Your position in the entity

Section 3: Income Sources

You must disclose each individual or entity from whom you have received \$5,000 or more in income currently and during the preceding year.

Name of Individual or Entity	Type of business or activity conducted by the individual or entity

Section 4: Investments

You must disclose each entity in which you hold any stocks or bonds having a fair market value of \$5,000 or more as of the date of disclosure or during the preceding year but excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds.

Name of Entity (Current)	Type of business or activity conducted by the entity

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity

Section 5: Leadership Roles

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity
Weber/Morgan Mosquito Abateme		Trustee
District		

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity	Your position in the entity

Section 6: Real Property (Optional)

You may disclose a real property that you hold an ownership or other financial interest that you believe may constitute a conflict of interest.

Property Details	Type of Interest Held

Section 7: Spouse

You must disclose the name of your spouse as well as all current employers as well as any employers during the preceding year.

Name of Spouse	Darren Williams

Current Employer of	Address	Occupation/Job Title
Spouse		
WCG	2139 S 1260 W Salt Lake City	Licensed land surveyor

Non-current Employers of Spouse from Preceding Year	Address	Occupation/Job Title

Section 8: Other Adult Household Members

You must disclose the name of any adult in your household who is not related by blood or marriage as well as all current employers and occupations. Please copy and paste these tables if you need to disclose more than one individual.

Name of Individual

Current Employer of Individual	Address	Occupation/Job Title

Section 9: Additional Disclosures (Optional)

You may disclose any other matter or interest that you believe may constitute a conflict of interest.

Description	

I certify that I believe this form to be true and accurate to the best of my knowledge.

Katie Williams