



**CONFLICT OF INTEREST
DISCLOSURE STATEMENT**

TO: ALL SANPETE COUNTY OFFICERS, BOARD MEMBERS, EMPLOYEES AND VOLUNTEERS (COVERED PERSONS)
FROM: OFFICE OF THE SANPETE COUNTY ATTORNEY
SUBJECT: STATUTORY ETHICAL AND DISCLOSURE REQUIREMENT

All Sanpete County covered persons⁽¹⁾ must be aware of and abide by a Utah law which prohibits, or requires disclosure of certain actual or potential conflicts of interest between public duties and private business interests, if any. The County Officers and Employees Disclosure Act (U.C.A. §§ 17-16a et. seq.) sets the following requirements:

PROHIBITED ACTS:

1. No covered person shall (1) use a County position (2) for private advantage by revealing confidential, controlled, private or protected information gained through that position, (2) use his or her County position to secure special privileges or (3) accept other investment or employment that would reasonably be expected to interfere with the ethical performance of his or her duties. (U.C.A. 17-16a-4, 17-16a-8).
2. No covered person shall knowingly receive, accept, take, seek or solicit, directly or indirectly, any gift or loan for him or herself or another if (1) the gift or loan would reasonably tend to influence him or her in the performance of official duties, or (2) the donor has been, is, or may become involved in any official county business. Exceptions to subparagraph (2) are occasional non-money gifts of a value less than \$50.00; public awards; bona fide business loans; or campaign contributions actually used in a political campaign. (U.C.A. 17-16a-4).
3. No covered person, acting in a county position may accept payment for helping a private person or business in any transaction with the county. Payment may be accepted if the transaction is not in the covered person's official capacity and disclosure is made as set forth below. (U.C.A. 17-16a-5).
4. A covered person may not be involved with any private business which is regulated by the county, may not be involved in any transaction between their private business interests and the county, and may not be involved in any other actual or potential conflict of interest unless the nature and extent of the private business interest(s) are disclosed below. (U.C.A. 17-16a-6, 17-16a-7).

DISCLOSURE:

1. Any covered person who receives payment for helping a private person or business in a transaction with the county must disclose the payment. (U.C.A. 17-16a-5).
2. Any covered person involved in a private business which is subject to county regulation must disclose that involvement. If the regulation is made by the agency or board of which the officer or employee is a member, disclosure must be made at each meeting in which the officer's or employee's business is discussed. Such oral disclosures shall be made part of the minutes of the meeting. (U.C.A. 17-16a-6, 17-16a-7).
3. Any covered person involved with a private business that does or anticipates doing business with the county must disclose that involvement. (U.C.A. 17-16a-7).
4. Any covered person who has a personal business interest of any kind which raises an actual or potential conflict of interest with his or her position must disclose that interest. (U.C.A. 17-16a-8).
5. All written disclosures must be sworn statements containing the information required above and be in a form similar to that on the reverse side of this document. All such statements are public records, open to public inspection. All disclosures must be made as follows: Orally in any meeting of a county agency, board or division where a transaction is discussed involving a matter in which the covered person has an interest. In writing when the conflict first arises. The general written disclosure must also be re-filed every January of each year that the outside interest persists. The written disclosure is filed through the covered person's chain of command to the immediate supervisor, department head or elected official and county commission. (U.C.A. 17-16a-5, 17-16a-6, 17-16a-7, 17-16a-8).

Violation of these provisions may subject the covered person to disciplinary action or criminal prosecution. Please be aware that this document is a shortened and simplified statement of the legal requirements involved in this area. YOUR CONDUCT WILL BE GOVERNED BY THE LAW, NOT THIS REVIEW. Please feel free to direct any questions regarding the law's ethical and disclosure requirements to the Office of the Sanpete County Attorney.

¹ "Covered person" means any person appointed to any statutory office or position or any other person appointed to any position of employment with Sanpete County. "Covered person" includes, but is not limited to persons serving on special, regular or full-time committees, agencies or boards whether or not such persons are compensated for their services.

² "Position" refers to any Sanpete County office, appointment, employment or uncompensated volunteer situation as described in the definition of "covered person."

DISCLOSURE OF PRIVATE BUSINESS INTERESTS

Under the provisions of the County Officers and Employees Disclosure Act U.C.A. §§ 17-16a et. seq., I, the undersigned, under penalties of perjury, make the following statement regarding my private business interests. (Type or print all information.)

Covered Person Talisha Johnson

Position or County Department Recorder

County Phone Number (435) 835-2101 ext 3

Covered Person's County Address 160 n. main st. Ste 204, Manti VT 04642

Outside institution, entity, private business or person involved Sanpete Kindness, Utah Assoc. County Recorder
VAC Board member, Legislative committee, Historical committee
Cadastral mapping committee Policy steering committee
Treasurer

Describe covered person's status, employment or investment in the outside institution, entity, private business or personal contact. Describe below the nature of the assistance you are providing to the institution, entity, private business or person named above or describe the nature of the economic interest or employment you hold in the private business. Also, describe the relationship with or transaction between the business, institution, person etc. and Sanpete County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)

I send invoices & collect payments for the Recorders Association

Outside institution, entity, business or person's address and phone number VAC (801) 265-1331,
Sanpete Kindness (435) 851-6354 Recorder Association President
Sierra Dickins (435) 253-2800

Talisha Johnson
Covered Person's Signature Date

SUBSCRIBED and SWORN to before me this 20th day of November, 2025



[Signature]
NOTARY PUBLIC or COUNTY CLERK, Residing in
Sanpete County Utah State

Revised 11/25

This statement is a public document. It must be filed with the covered person's immediate supervisor, department head or elected official and the County Commission. It must be filed when the potential conflict arises and re-filed every January, as long as the potential conflict persists.

DISCLOSURE OF PRIVATE BUSINESS INTERESTS

Under the provisions of the County Officers and Employees Disclosure Act U.C.A. §§ 17-16a et. seq., I, the undersigned, under penalties of perjury, make the following statement regarding my private business interests. (Type or print all information.)

Covered Person Shelley Keller

Position or County Department Deputy Recorder

County Phone Number 435-558-0437

Covered Person's County Address 260 S. Main. Mahan

Outside institution, entity, private business or person involved None

Describe covered person's status, employment or investment in the outside institution, entity, private business or personal contact.

Describe below the nature of the assistance you are providing to the institution, entity, private business or person named above or describe the nature of the economic interest or employment you hold in the private business. Also, describe the relationship with or transaction between the business, institution, person etc. and Sanpete County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)

None

Outside institution, entity, business or person's address and phone number _____

Shelley Keller 11-20-25
Covered Person's Signature Date

SUBSCRIBED and SWORN to before me this 24 day of November, 2025.



Shirley Peterson
NOTARY PUBLIC or COUNTY CLERK, Residing in

Sanpete County Utah State

Revised 11/25

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DISCLOSURE OF PRIVATE BUSINESS INTERESTS

Under the provisions of the County Officers and Employees Disclosure Act U.C.A. §§ 17-16a et. seq., I, the undersigned, under penalties of perjury, make the following statement regarding my private business interests. (Type or print all information.)

Covered Person Emma Larson

Position or County Department Recorder

County Phone Number 435-835-2181

Covered Person's County Address 140 N Main St, Manti, UT, 84642

Outside institution, entity, private business or person involved NONE

Describe covered person's status, employment or investment in the outside institution, entity, private business or personal contact.
Describe below the nature of the assistance you are providing to the institution, entity, private business or person named above or describe the nature of the economic interest or employment you hold in the private business. Also, describe the relationship with or transaction between the business, institution, person etc. and Sanpete County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)

None

Outside institution, entity, business or person's address and phone number None

Emma Larson 11/20/25
Covered Person's Signature Date

SUBSCRIBED and SWORN to before me this 24 day of November, 2025.



[Signature]
NOTARY PUBLIC or COUNTY CLERK, Residing in

Sanpete UT
County State

Revised 11/25

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DISCLOSURE OF PRIVATE BUSINESS INTERESTS

Under the provisions of the County Officers and Employees Disclosure Act U.C.A. §§ 17-16a et. seq., I, the undersigned, under penalties of perjury, make the following statement regarding my private business interests. (Type or print all information.)

Covered Person Neda Pyper

Position or County Department Recorder office, Deputy Recorder

County Phone Number 435-835-2181

Covered Person's County Address 160 N. Main street Monticello Utah

Outside institution, entity, private business or person involved Pyper's son Trucking

Describe covered person's status, employment or investment in the outside institution, entity, private business or personal contact.

Describe below the nature of the assistance you are providing to the institution, entity, private business or person named above or describe the nature of the economic interest or employment you hold in the private business. Also, describe the relationship with or transaction between the business, institution, person etc. and Sanpete County. Use more sheets if necessary. (This disclosure statement will not be accepted as valid unless this section is completed.)

Part Owner

Outside institution, entity, business or person's address and phone number _____

Neda Pyper 11-2025
Covered Person's Signature Date

SUBSCRIBED and SWORN to before me this 20 day of Nov., 2025.



[Signature]
NOTARY PUBLIC or COUNTY CLERK, Residing in _____

Sanpete UT
County State

Revised 11/25

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