CONFLICT OF INTEREST DECLARATION FORM

Elected Official/Employee Name /ysov fluxfington
Date
Position Sherill
Supervisor
I have no activities outside of my employment with Emery County that may constitute a conflict of interest.
I have one or more activities outside of my employment with Emery County that may constitute a conflict of interest. These are listed below:
Supervisor Recommendations/Comments
Elected Official/Employee Signature
Commission Approval
Date of Commission Approval