

CONFLICT OF INTEREST DECLARATION FORM

Elected Official/Employee Name Mike Olsen

Date 1-8-25

Position County Attorney

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 _____