

Conflict of Interest Disclosure Form

Date: 02/03	/2025
Name: Jare	d Rigby
Position (Of	ficer/Board Member/Committee member) Sheriff
circumstand	ribe below any relationships, transactions, positions you hold (volunteer or otherwise), or ses that you believe could contribute to a conflict of interest between Wasatch County and lal interests, financial or otherwise:
\checkmark	I have no conflict of interest to report
	I have the following conflict of interest to report (please specify other county, nonprofit, and for-profit boards you (and your spouse) sit on, any for-profit businesses for which you or an immediate family member are an officer, manager or director, or a majority shareholder, and the name of your employer and any businesses you or a family member own:
1	HATURE
2	
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	tify that the information set forth above is true and complete to the best of my knowledge. I de by the County's Conflict of Interest Policy by refraining to vote on or be a party to a
disclose con	n any issue that raises a conflict of interest as described above. I understand that failure to flicts of interest may result in public scrutiny and board action.
Signature:	Local District
	ne: Jaled Rigby
F-mail Addr	asseringby@wasatch.utah.gov