

Conflict of Interest Disclosure

Instructions: Please fill out the form using the spaces provided for what is applicable *currently or within the preceding year*. If more room is needed, use the space at the end of the document and reference the corresponding item number. Once the form is complete hit the submit button to email it to mindyk@jvwcd.org.

Trustee Name:

Barbara Townsend

Date Disclosure Completed:

2-4-25

Item 1

The name(s) and address(es) of current employer(s) and name(s) and address(es) of each employer *during the preceding year*. Include a brief description of the employment, including occupation, and, as applicable, job title.

Current Employer(s):

<p>Name Utah State Bar</p> <p>Address 645 South 200 East, Salt Lake City, UT 84111</p> <p>Description I have been with the Office of Professional Conduct for the Utah State Bar for 18 years.</p>	<p>Name</p> <p>Address</p> <p>Description</p>
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Previous Employer(s):

<p>Name</p> <p>Address</p> <p>Description</p>	<p>Name</p> <p>Address</p> <p>Description</p>
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Item 2

The name of any entity (*includes a corporation, LLC, partnership, association, cooperative, trust, organization, joint venture, governmental entity, unincorporated organization, or other legal entity*) in which you are or were an owner or officer in the preceding year (*includes any ownership interest or a position where you have authority to manage, direct, control, or make decisions for the entity, including as a member of a board of directors, governing body or entity, or partner*), your position, and a brief description of the type of business or activity conducted.

Entity Name	Entity Name
Position	Position
Activity Conducted by Entity	Activity Conducted by Entity

Entity Name	Entity Name
Position	Position
Activity Conducted by Entity	Activity Conducted by Entity

Entity Name	Entity Name
Position	Position
Activity Conducted by Entity	Activity Conducted by Entity

Item 3

The name of each individual from whom, or entity from which, you received \$5,000 or more in income in the preceding year (*this includes any of the entities described in Item 1 and Item 2, but does not require identification of individual customers or clients of those entities*).

Names and Type of Business Activity

Item 4

The name of each entity in which you hold any stocks or bonds having a fair market value of \$5,000 or more as of the date this disclosure is completed or during the preceding year (*excluding funds managed by a third party, including blind trusts, managed investment accounts, and mutual funds*) and a brief description of the type of business or activity conducted by the entity(ies).

Entity Name	Description

Item 5

The name of each entity or organization not already described in Items 2 through 4 in which you currently serve, or served in the preceding year, on the board of directors (*paid or unpaid*) or in a paid leadership capacity and a brief description of the type of business or activity conducted and type of position held.

Entity Name	Description	Position

Item 6 (Optional)

Description of any real property in which you hold an ownership or other financial interest you believe may constitute a conflict of interest and the type of interest held.

Item 7

The name(s) of your spouse and any other adult residing in your household who is not related to you by blood or marriage, as applicable.

Spouse:

Other Adults:

Item 7A

For your spouse, the name(s) and address(es) of each current employer(s) and name(s) and address(es) of each employer(s) during the preceding year.

Spouse's Current Employer(s):

Name	Name
Address	Address

Spouse's Previous Employer(s):

Name	Name
Address	Address

Item 7B

A brief description of the employment and occupation of each adult who resides in your household and is not related to you by blood or marriage.

Item 8 (Optional)

A description of any other matter or interest that you believe may constitute a conflict of interest.



I believe this form is true and accurate to the best of my knowledge.

Signature Barbara Townsend Digitally signed by Barbara Townsend
Date: 2025.02.04 12:28:18 -07'00'

Submit

Additional room if needed (please indicate item number):

