



## Conflict of Interest Disclosure Form

### Annual Conflict of Interest Disclosure Form For Municipal Employees, Officials, and Appointed Individuals

**Purpose:**

In compliance with Utah State Code and municipal policies, this form is designed to disclose any potential conflicts of interest or appearance of conflicts that could arise in the performance of official duties within Milford City.

**Personal Information**

Full Name: IAN R SPAULDING Position/Title: COUNCIL ~~MEMBER~~

Department/Agency: (Circle One) Council Member Mayor

Administrative Staff Crew Member Other: \_\_\_\_\_

Phone #: 435 590 5337 Email Address: ian.spaulding@beaver  
1k12.ut.us

**Conflict of Interest Disclosure**

Please answer the following questions regarding potential conflicts of interest. If "yes" is answered to any question, provide a description in the space provided.

1. Do you or any immediate family members have a financial interest in any business or entity that is regulated by or contracts with the municipality?

☐ Yes or ☒ No  
☐ If yes, provide details: \_\_\_\_\_

2. Are you or any immediate family members employed by or serving as a director, officer, or agent of any entity that engages in business or seeks to do business with the municipality?

☐ Yes or ☒ No  
☐ If yes, provide details: \_\_\_\_\_

3. Do you or any immediate family members hold an elected or appointed office in any other governmental entity that could potentially create a conflict of interest in performing duties for the municipality?

☐ Yes

☒ No

☐ If yes, provide details: \_\_\_\_\_

\_\_\_\_\_

4. Do you have any relationship (personal, professional, or financial) with individuals or organizations that could reasonably create a perception of bias, undue influence, or conflict of interest in your decision-making process?

☐ Yes

☒ No

☐ If yes, provide details: \_\_\_\_\_

\_\_\_\_\_

5. Have you ever participated in or will you be participating in any decision-making, voting, or advisory processes that could impact your own financial interest, or that of your family members, associates, or friends?

☐ Yes

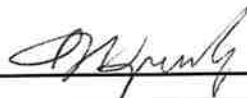
☒ No

☐ If yes, provide details: \_\_\_\_\_

\_\_\_\_\_

### Compliance Statement

I understand and agree to comply with all applicable state and local laws regarding conflicts of interest, including the Utah State Code, municipal ordinances, and policies governing ethical conduct for public employees and officials. I acknowledge my duty to recuse myself from any discussions, votes, or decision-making processes where a conflict of interest exists or may appear to exist.

Signature:  Date: 6-6-2025

### For Official Use Only

Reviewed By (Municipal Officer): \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

Action Taken (if applicable): (circle one)      No Action Needed      or      Action Taken / Conflict Disclosed

\_\_\_\_\_

This form is designed to collect the necessary information to ensure that municipal employees and officials comply with the conflict of interest laws outlined in Utah State Code. The information provided will help ensure transparency and avoid any undue influence in the decision-making process.