



## Conflict of Interest Disclosure

An elected officer shall, no sooner than January 1 and no later than January 31 of each year during which the elected officer holds county elective office submit a written conflict of interest disclosure statement to the county clerk ([17-16a-13](#)). Responses listed below are per [20A-11-1604\(6\)](#). Attach additional sheets as necessary.

Name of Regulated Officeholder: GILBERT M. ALMQUIST

Elected Position of Regulated Officeholder: COUNTY COMMISSIONER

Are you *currently* employed? ☒ YES ☐ NO

If yes:

Name of Current Employer WASHINGTON COUNTY

Address of Current Employer 111 E. TABERNACLE STR. ST. GEORGE, UTAH 84770

Current Employment Job Title/Occupation COUNTY COMMISSIONER

Current Employment Job Duties REPRESENT THE CITIZENS OF THE COUNTY IN ALL GOVT. AFFAIRS

Were you employed in the *previous year*? ☒ YES ☐ NO

If different than your current employer:

Preceding Year Employer \_\_\_\_\_

Preceding Year Employer Address \_\_\_\_\_

Preceding Year Employment Job Title/Occupation \_\_\_\_\_

Preceding Year Employment Job Duties \_\_\_\_\_

Are you *currently* an owner or officer of an entity? ☒ YES ☐ NO

If yes:

Name of the entity GIL ALMQUIST LANDSCAPING & BACKFLOW

Position/Title of officeholder in entity EQUITY OWNER

Brief description of the type of business or activity conducted by the entity

LANDSCAPING, BACKFLOW TESTING

Were you an owner or officer of an entity in the *previous year*? ☒ YES ☐ NO

If different than current year:

Name of the entity \_\_\_\_\_

Position/Title of officeholder in entity \_\_\_\_\_

Brief description of the type of business or activity conducted by the entity

Have you received \$5,000 or more in income from an individual or entity during the preceding year?

☒ YES ☐ NO

If yes:

Individual/Entity Name MY COMPANY AS AN ENTITY

Brief description of the type of business or activity conducted by the individual or entity

Do you hold any stocks or bonds having a fair market value of \$5,000 or more as of the date of the disclosure form or during the preceding year (excluding any fund that is managed by a third party including a mutual fund, managed investment account, and blind trusts)? ☒ YES ☐ NO

If yes:

Entity Name SUNCOE PARTNERS / NOT A DIRECTOR ITOMAH

Brief description of the type of business or activity conducted by the entity

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Do you currently serve, or did you serve in the prior year, in a paid leadership capacity or in a paid or unpaid position on a board of directors? ☒ YES ☐ NO

If yes:

Entity Name SGMT - TRACHAN - WCSWD

Type of position held by the regulated officeholder BOARD MEMBER

Brief description of the type of business or activity conducted by the entity

Please describe any real property you hold an ownership or other financial interest in that you believe may constitute a conflict of interest, including a description of the type of interest held. (OPTIONAL)

N/A

Name of Regulated Officeholder's Spouse: JILL ANN ALMQUIST

Is your spouse *currently* employed? ☒ YES ☐ NO

If yes:

Name of Current Employer GEL ALMQUIST LANDSCAPING & BACKFLOW

Address of Current Employer 253 E. SAN RAFAEL PLACE

Current Employment Job Title/Occupation OWNER

Current Employment Job Duties LANDSCAPING

Was your spouse employed in the *previous year*? ☒ YES ☐ NO

If different than your current employer:

Preceding Year Employer \_\_\_\_\_

Preceding Year Employer Address \_\_\_\_\_

Preceding Year Employment Job Title/Occupation \_\_\_\_\_

Preceding Year Employment Job Duties \_\_\_\_\_

Are there any other adults residing in the regulated officeholder's household who are not related by blood or marriage? ☐ YES ☒ NO

If yes:

Other Adult Name: \_\_\_\_\_

Other Adult Employer: \_\_\_\_\_

Other Adult Occupation/Job Title: \_\_\_\_\_

Other Adult Name: \_\_\_\_\_

Other Adult Employer: \_\_\_\_\_

Other Adult Occupation/Job Title: \_\_\_\_\_

A description of any other matter or interest that the regulated officeholder believes may constitute a conflict of interest (OPTIONAL)

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By my signature below, I hereby certify, that the foregoing information is a true and accurate disclosure of the conflict or potential conflict of interest with Washington County to the best of my knowledge.

Signature: \_\_\_\_\_

 Date: 1-6-25

