

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: <u>Eric Clarke</u>
Elected Position of Regulated Officeholder: <u>County Attorney</u>
Are you <i>currently</i> employed? \boxtimes YES \square NO If yes:
Name of Current Employer <u>Washington County, Utah</u>
Address of Current Employer 33 N. 100 W. Ste. 200, St. George, UT
Current Employment Job Title/Occupation County Attorney
Current Employment Job Duties <u>Managing County Attorney's Office</u>
Were you employed in the <i>previous year</i> ? \boxtimes YES \square NO
If different than your current employer:
Preceding Year EmployerPreceding Year Employer Address
Preceding Year Employer Address
Preceding Year Employment Job Title/Occupation
Preceding Year Employment Job Duties
Are you $\mathit{currently}$ an owner or officer of an entity? \boxtimes YES \square NO
If yes:
Name of the entity <u>Only entities funded by county dues, i.e. Utah Association of Counties and Utah Statewide</u>
Association of Prosecutors
Position/Title of officeholder in entity <u>Past Chair of Utah County and District Attorney Association and Chair</u>
Elect of SWAP
Brief description of the type of business or activity conducted by the entity <u>Corrdinating efforts in the state</u>
to prosecute and influence lawmakers. Neither position involved any compensation or funding for travel out of state.
Were you an owner or officer of an entity in the <i>previous year</i> ? \boxtimes YES \square NO If different than current year:
Name of the entity
Position/Title of officeholder in entity <u>Chair and chair elect respectively.</u>
Brief description of the type of business or activity conducted by the entity
House you was sired \$5,000 on many in income from an individual or orbits during the proceeding year?
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
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 Brief description of the type of business or activity conducted by the entity
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 Type of position held by the regulated officeholder 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)
Name of Regulated Officeholder's Spouse: <u>Kristen Clarke</u> Is your spouse <i>currently</i> employed? □ YES ☒ NO If yes: Name of Current Employer Address of Current Employer Current Employment Job Title/Occupation Current Employment Job Duties
Was your spouse employed in the <i>previous year</i> ? ⊠ YES □ NO If different than your current employer: Preceding Year EmployerKirton McConkie law firm Preceding Year Employer AddressWorked out of offices in St. George, Salt Lake, and Lehi Preceding Year Employment Job Title/OccupationSummer Associate Preceding Year Employment Job DutiesLegal work for various clients. None of which conflicted with my work representing the county.
Are there any other adults residing in the regulated officeholder's household who are not related by blood or marriage? 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)
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: _/s/ Eric Clarke Date: _ 1/31/2025