



UTAH HOUSE OF REPRESENTATIVES

2014 CONFLICT OF INTEREST & FINANCIAL DISCLOSURE

1. **Name:** Paul Ray

2. **Employment**

Primary employer	Brief description of employment	Occupation or job title

3. **Entities which you own or of which you are an officer**

[see 2010 Gen. Session, HB 270, pg 13 - (iv)]

Name of entity	Type of activity conducted by the entity	Your position / interest in the entity
Shake It Up Concessions	Concession sales	Owner

4. **Each entity that has paid \$5,000 in income to you within the one-year period prior to the date of this form. [see 2010 Gen. Session, HB 270, pg 13. - (v)]**

Name of entity	Type of activity conducted by the entity
Omnalink Systems	Sales

5. **Each entity in which you hold any stocks or bonds having a fair market value of \$5,000 or more as of the date of this form (does not include funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds). [see 2010 Gen. Session, HB 270, pg 13 - (vi)]**

Name of entity	Type of activity conducted by the entity

6. **Organization or entity, other than listed above, for which you serve on the board of directors or in any other formal advisory capacity. [see 2010 Gen. Session, HB 270, pg 13 - (vii)]**

Name of entity	Type of activity conducted by the entity	Your position / interest in the entity

7. Real property in which you hold an ownership or other financial interest that you believe may constitute a conflict of interest. *(optional)* [see 2010 Gen. Session, HB 270, pg 13 - (viii)]

Description of real property	Description of interest held
Personal home	Owner

8. Name of spouse and any other adult residing in your household that is not related by blood or marriage. [see 2010 Gen. Session, HB 270, pg 13 - (ix)]

Julie Ray

9. Information for your spouse and any other adult residing in your household that is not related to you by blood or marriage, as applicable. [see 2010 Gen. Session, HB 270, pg 14 - (x)]

Name	Brief description of employment	Occupation
Julie Ray	Davis School District	Lunch Room
Jessee Ray	Fast Food	Manager
Kaylee	Assisted Living Care	CNA

10. Any other matter or interest you believe may constitute a conflict of interest. *(optional)*

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I certify that I believe the information provided in this form is true and accurate to the best of my knowledge.

s/Paul Ray
(Signature)

1-06-14
(Date)

Received by the Chief Clerk of the House:

s/Sandy D. Tenney
(Signature)

1-06-14
(Date)