



UTAH HOUSE OF REPRESENTATIVES

2015 CONFLICT OF INTEREST & FINANCIAL DISCLOSURE

All versions of this document, including amended versions, shall remain on the legislative website and in the House main office (hard copy) for two years from the date the completed form is received by the Chief Clerk.

NOTE: "preceding year" means the year immediately preceding the day on which the officeholder files a Conflict of Interest form. UCA: 20A-11-1602(6)

1. **Name of officeholder** Curtis Oda

2. **Employment**

(2014 Gen. Session, HB 394, pg. 21: An officeholder is required to disclose each of the officeholder's current employers, as well as employers during the preceding year.)

Name & address of CURRENT employer(s) Heiners Insurance Center Self Incorporated as Oda Enterprises, Inc.	Brief description of employment Property/Casualty Insurance Producer - Sales	Occupation and/or job title Property/Casualty Insurance Producer - Sales
Name & address of PRECEDING YEAR'S employer(s) Same	Brief description of employment	Occupation and/or job title

3. **Entities in which you are an owner or officer.**

[2014 Gen. Session, HB 394, pg. 21]

CURRENT YEAR: Name of entities Oda Enterprises, Inc. Oda & Burman, LLC	Type of business or activity conducted by each entity Insurance Property Owner/Landlord	Your position in each entity President/Sole Owner Managing Member/part owner
PRECEDING YEAR: Name of entities Same	Type of business or activity conducted by each entity	Your position in each entity

4. **Each individual or entity from whom the regulated officeholder has received \$5,000 or more in income currently and during the preceding year.** [2014 Gen. Session, HB 394, pg. 21]

NOTE: UCA 20A-11-1604 (5) (b): "in making the disclosure . . . , a regulated officeholder who provides goods or services to multiple customers or clients as part of a business or a licensed profession is only

required to provide the information described in Subsection (4)(e) in relation to the entity or practice through which the regulated officeholder provides the goods or services and is not required to provide the information described in Subsection (4)(e) in relation to the regulated officeholder's customers or clients."

Name of individual or entity	Type of business or activity conducted by the entity
Oda Enterprises Inc.	Insurance Producer
Oda & Burman, LLC	Property Owner/Landlord

5. Each entity in which you currently hold any stocks or bonds having a fair market value of \$5,000 or more, including info for the preceding year.

(excludes funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds). [2014 Gen. Session, HB 394, pg. 21]

Name of entity	Type of business or activity conducted by the entity
Same	

6. Entity or organization for which you serve on the board of directors or in any other type of paid leadership capacity (include current and preceding year). [2014 Gen. Session, HB 394, pg. 21]

** (only required to list those entities not already listed in responses to questions 3,4, or 5)*

Name of entity or organization	Type of business or activity conducted by the entity	Your position in the entity or organization
None that are for pay		

7. Description of any real property in which the legislator holds an ownership or other financial interest that the legislator believes may constitute a conflict of interest. (optional) [2014 Gen. Session, HB 394, pg. 22]

Description of the real property	Description of the type of interest held by the legislator
None that are conflicting	

8. Name of spouse and any other adult residing in your household who is not related by blood or marriage. [see 2014 Gen. Session, HB 394; pg. 22]]

Name of SPOUSE: Nancy Oda
Names of OTHER ADULTS residing in home who are not related by blood or marriage:
N/A

9. Employment information for your spouse and any other adult residing in your household that is not related to you by blood or marriage - include current employer and employer(s) during the preceding year. [2014 Gen. Session, HB 394, pgs. 20 and 22]

SPOUSE's current employer(s): Homemaker	Address of spouse's current employer(s)
SPOUSES's employer(s) in the preceding year: Same	Address of spouse's preceding year employer(s)
Information for other adults not related by blood or marriage who are living in the same home as officeholder: NAME OF INDIVIDUAL: N/A	Brief description of employment & occupation
NAME OF INDIVIDUAL:	Brief description of employment & occupation

10. Any other matter or interest you believe may constitute a conflict of interest. (optional) (2014 Gen. Session, HB 394, pg. 22)

As a member of the human race and a citizen of Utah, all of what the legislature deals with will have a direct or indirect impact, either positively or negatively, upon myself and my family. I am also a concealed weapon permit instructor.

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

s/Curtis Oda
(Signature of House member)

12/26/2014
(Date)

Received by the Chief Clerk of the House:

s/ Sandy D. Tenney
(Signature)

12/29/2014
(Date)