



UTAH HOUSE OF REPRESENTATIVES

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\(7\)](#)

Date: January 17, 2019

Name of officeholder: Cheryl Acton

Employment

([UCA 20A-11-1604\(4\)\(b\)](#) and [\(c\)](#): An officeholder is required to disclose each of the officeholder's current employers, as well as employers during the preceding year.)

Current Employer(s)	Description of Employment	Occupation and/or job title
N/A		

Preceding Year's Employer(s)	Description of Employment	Occupation and/or job title
Community Nursing Services Flu Program 2830 S Redwood Rd Suite A West Valley, UT 84119	Processing packets as they return from flu clinics	Seasonal Flu Worker (part time)

Entities in which you are an owner or officer.

[\[UCA 20A-11-1604\(4\)\(d\)\]](#)

Current Year: Entity Name	Type of business or activity conducted by each entity	Your position in each entity
N/A		

Preceding Year: Entity Name	Type of business or activity conducted by the entity	Your position in each entity
N/A		

Each individual or entity from whom the regulated officeholder has received \$5,000 or more *in income* currently and during the preceding year.

[UCA 20A-11-1604(4)(e)]

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
N/A	

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.

[UCA 20A-11-1604(4)(f)]

(excludes funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds)

Name of entity	Type of business or activity conducted by the entity
N/A	

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).

[UCA 20A-11-1604(4)(g)]

**(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
DDI Vantage 575 E 4500 S Suite B210 Salt Lake City, UT 84107	Early Childhood and Developmentally Delayed Adult Services	Board of Trustees (unpaid volunteer position)

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)

[UCA 20A-11-1604(4)(h)]

Description of the real property	Description of the type of interest held by the legislator
Primary residence in Salt Lake County 5143 W. Wheatcrest Circle West Jordan, UT 84081	co-owner of primary residence with spouse

Name of spouse and any other adult residing in your household who is not related by blood or marriage, and their employment information. Include current employer(s) and employer(s) during the preceding year.

[\[UCA 20A-11-1604\(4\)\(i\)\(j\) and \(k\)\]](#)

Name of Spouse: Russell Scott Acton

Spouse's current employer	Address
Community Nursing Services	2830 S. Redwood Rd West Valley City, UT 84119
Spouse's employer in the preceding year	Address
Same	

Information for other adults not related by blood or marriage who are living in the same home as officeholder.

Name of Individual	Brief description of employment & occupation
N/A	

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

[\[UCA 20A-11-1604\(4\)\(l\)\]](#)

none

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

s/ Cheryl Acton
(Signature of Legislator)

January 17, 2019
(Date)

Received by the Chief Clerk of the House:

January 18, 2019
(Date)