

CONFLICT OF INTEREST DISCLOSURE STATEMENT

UNDER THE MUNICIPAL OFFICERS' AND EMPLOYEES' ETHICS ACT

(Utah Code Annotated Section 10-3-1313, 20A-11-1604(6)), and 10-3-301.5

Jarred Glover

Regulated Officeholder/Candidate (Print Name)

☐ Mayor ☐ City Council

☐ Candidate for Office

1. The name and address of each current employer and each employer during the preceding year including a brief description of the employment, occupation, and job title.

Current Employer(s):

Employer Name	Intermountain Health	Occupation	Physical Security
Employer Address	36 South State St, UT	Job Title	Security Director
Brief Description	Physical Security Director		
Employer Name		Occupation	
Employer Address		Job Title	
Brief Description			

Preceding Year Employer(s): N/A

Employer Name		Occupation	
Employer Address		Job Title	
Brief Description			
Employer Name		Occupation	
Employer Address		Job Title	
Brief Description			

2. The name of the entity in which the regulated officeholder/candidate is or was an owner or officer during the current or preceding year including a brief description of the type of business or activity conducted by the entity and position.

☒ Check if not applicable

Entity Name (current)		Position	
Brief Description			
Entity Name (preceding year)		Position	
Brief Description			

3. The name of each individual or entity, including a brief description of the type of business or activity, from which the regulated officeholder/candidate has received \$5,000 or more in income during preceding year.

☒ Check if not applicable

Individual/Entity Name	
Brief Description	
Individual/Entity Name	
Brief Description	

4. The name and brief description of each entity in which the regulated officeholder/candidate holds any stocks or bonds having a fair market value of \$5,000 or more as of the date of this disclosure statement or during the preceding year (excluding funds managed by a third party, including blind trusts, managed investment accounts, and mutual funds).

☒ Check if not applicable

Entity Name	
Brief Description	
Entity Name	
Brief Description	

5. The name of each entity or organization **not** listed above in which the regulated officeholder/candidate currently serves, or served in the preceding year, in a paid leadership capacity or in a paid or unpaid position on a board of directors including a brief description of the business or activity and position held.

☐ Check if not applicable

Entity Name	Bear River Mental Health	Position	Board Member
Brief Description			
Employer Name	Logan Medical Credit Union	Position	Board Member
Brief Description			

6. (Optional): Description of any real property in which the regulated officeholder/candidate holds an ownership or other financial interest that the regulated officeholder/candidate believes may constitute a conflict of interest including a description of the type of interest.

☒ Check if not applicable

Real Property	
Type of Interest	
Real Property	
Type of Interest	

7. The name of the regulated officeholder/candidate's spouse and the name and address of each current and preceding year employer if the regulated officeholder/candidate believes the employment may constitute a conflict of interest.

☒ Check if not applicable

Spouse	
Employer (current)	
Employer (preceding year)	

8. The name of any other adult residing in the regulated officeholder/candidate's household who is not related by blood, including a brief description of their employment or occupation if the regulated officeholder/candidate believes the adult's presence may constitute a conflict of interest.

☒ Check if not applicable

Other Adult	
Employment description OR Occupation	
Other Adult	
Employment description OR Occupation	

9. (Optional) A description of any other matter or interest that the regulated officeholder/candidate believes may constitute a conflict of interest.

☒ Check if not applicable

Check if applicable:

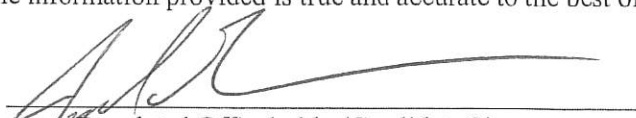
☐ Under UCA 20A-11-1604(7)(a), I claim that I am an at-risk government employee as defined in UCA 63G-2-303(1)(a) and that my employment under Item 1 be redacted.

☐ Under UCA 20A-11-1604(7)(a), I claim that my spouse is an at-risk government employee as defined in UCA 63G-2-303(1)(a) and that my spouse's employment under Item 7 be redacted.

I, the regulated officeholder/candidate, believe the information provided is true and accurate to the best of my knowledge.

Date:

1/20/26


Regulated Officeholder/Candidate Signature

Privacy Notice:

- The personal data collected in this form will be available to the public under 63G-2-301.
- Any personal data redacted in accordance with 20A-11-1604(7)(a) is not considered a public record under 63G-2-301. This data will be used for administrative purposes and will not be displayed to the public. This information is required under 20A-11-1604. Violation of this section may result in a class B misdemeanor and a \$100 fine. The information, unless specified, will be publicly available on the disclosures and possibly other election-related websites. Personal data collected on the website will not be sold. The personal data will be included in the record series GRS 1911.