

SOUTH DAVIS SEWER DISTRICT

**SPECIAL PUBLIC OFFICERS
CONFLICT OF INTEREST DISCLOSURE FORM**

Board of Trustees

This form uses tables. Please add as many additional rows as necessary for each item.

Date This Form was Completed	1/30/26
Name of Officeholder	Ryan Westergard

Section 1: Employment

You must disclose all current employers as well as any employers during the preceding year.

Current Employer	Address	Occupation/Job Title
Davis Behavioral Health, Inc	934 S Main, Layton, UT	CFO

Non-current Employers from Preceding Year	Address	Occupation/Job Title
N/A		

Section 2: Entities in which you are an owner or officer

You must disclose all current entities as well as any entities during the preceding year.

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity
Davis Behavioral Health, Inc	Behavioral Health	Secretary/Treasurer

Non-current Entities from preceding year	Type of business or activity conducted by the entity	Your position in the entity
N/A		

Section 3: Income Sources

You must disclose each individual or entity from whom you have received \$5,000 or more in income currently and during the preceding year.

If you provide goods or services to multiple customers or clients as part of a business or a licensed profession, you are only required to provide this information in relation to the entity or practice through which the regulated officeholder provides the goods or services and you are not required to provide the information in relation to individual customers or clients.

Name of Individual or Entity	Type of business or activity conducted by the individual or entity
Davis Behavioral Health, Inc	Behavioral Health
Woods Cross City	City Government

SOUTH DAVIS SEWER DISTRICT

**SPECIAL PUBLIC OFFICERS
CONFLICT OF INTEREST DISCLOSURE FORM**

Board of Trustees

South Davis Sewer District	Sewer
----------------------------	-------

Section 4: Investments

You must disclose 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 disclosure or during the preceding year but excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds.

Name of Entity (Current)	Type of business or activity conducted by the entity
N/A	

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity
N/A	

Section 5: Leadership Roles

You must disclose each entity in which you currently serve, or served in the preceding year, in a paid leadership capacity or in a paid or unpaid position on a board of directors. Do not include entities that you already included in Sections 2, 3 or 4.

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity
South Davis Metro Fire	Fire Response	Board Member/Chair
South Davis Recreation	Recreation	Board Member/Chair

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity	Your position in the entity

Section 6: Real Property (Optional)

You may disclose a real property that you hold an ownership or other financial interest that you believe may constitute a conflict of interest.

Property Details	Type of Interest Held
N/A	

SOUTH DAVIS SEWER DISTRICT

**SPECIAL PUBLIC OFFICERS
CONFLICT OF INTEREST DISCLOSURE FORM**

Board of Trustees

Section 7: Spouse

You must disclose the name of your spouse as well as all current employers as well as any employers during the preceding year.

Name of Spouse	DeAnn Westergard
----------------	------------------

Current Employer of Spouse	Address	Occupation/Job Title
N/A		

Non-current Employers of Spouse from Preceding Year	Address	Occupation/Job Title
N/A		

Section 8: Other Adult Household Members

You must disclose the name of any adult in your household who is not related by blood or marriage as well as all current employers and occupations. Please copy and paste these tables if you need to disclose more than one individual.

Name of Individual	N/A
--------------------	-----

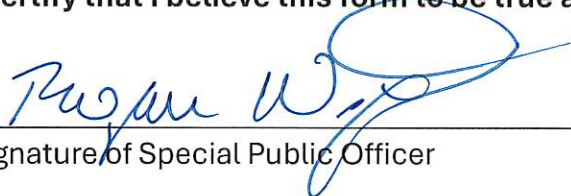
Current Employer of Individual	Address	Occupation/Job Title

Section 9: Additional Disclosures (Optional)

You may disclose any other matter or interest that you believe may constitute a conflict of interest.

Description	N/A
-------------	-----

I certify that I believe this form to be true and accurate to the best of my knowledge.



Signature of Special Public Officer