



Monroe City Elected Official Conflict of Interest Disclosure

The following disclosures are required to be made annually by all elected officers of Monroe City pursuant to the County Officers and Employees Disclosure Act, UCA 10-3-1313.

Name	PERRY D PAYNE	Elected Office	COUNCIL MEMBER
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Current employers and any previous employers during the preceding year.

Employer Name	Address	Description of Employment, Occupation and Job Title

Entities in which I am currently an owner or officer, or for which I was during the preceding year.

Entity Name	Position in Entity	Description of type of business or activity conducted by this entity.
PAYNE'S PLUMBING	OWNER/MANAGER	PLUMBING, CONSTRUCTION + REPAIR

Entities or Individuals from which I have received \$5,000 or more in income during the preceding year.

Note: The Elected Officer is only required to provide the information below in relation to the entity or practice through which the Election Officer provides the goods or services and is not required to provide information of individual customers or clients.

Entity Name	Description of type of business or activity conducted by this entity.

Entities I hold stocks or bonds in that have a fair market value of \$5,000 or more as of the date of this disclosure or during the preceding year. (Excluding funds managed by a third party such as blind trusts, managed investment accounts, and mutual funds.)

Entity Name	Description of type of business or activity conducted by this entity.

Entities not listed above, in which I 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.

Entity Name	Position in Entity	Description of type of business or activity conducted by this entity.

Description of any real property in which I hold an ownership or other financial interest that I believe may constitute a conflict of interest.

Description of real property	Type of Interest and/or conflict

Name of my spouse RADAWN PAYNE

My spouse's Current employers and any previous employers during the preceding year.

Employer Name	Address	Description of Employment, Occupation and Job Title
STATE OF UTAH	845 N 300 E RICHFIELD UTAH	SUPPORT SERVICE COORDINATOR

Other adults living in my home who are not related to me by blood or marriage and employment information.

Name	Description of Employment and Occupation

Additional matters of interest that I believe may constitute a conflict of interest.

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I hereby swear or affirm that the information contained in this form is true and accurate to the best of my knowledge.

Lucy D Payne
(Signature)

1-12-26
(Date)