Annual Conflict of Interest Disclosure Statement

I, Dax Fossum		(nama) am a Trustae of North Points Solid Wests Special	
Service District.		(name) am a Trustee of North Pointe Solid Waste Special	
Code §67-16-16. If addition information provided shall	al spa oe kep	uired to be made annually by all Trustees of the District pursuant to Utah ce is needed, please use a separate sheet of paper. Per statute, the t on file with the District, provided to the lieutenant governor, and an posted on the District's website.	
Personal Information			
Full Name of Trustee		Dax Fossum	
Name of Trustee's spouse (if ar	y)	Marie Fossum	
Name of each adult residing in the Trustee's household but not related by blood or marriage (if any)			
Employment from the Precedir	g Year	(List any employers during the preceding year)	
Employer Name	City o	of Cedar Hills, Pleasant Grove City Recreation	
Employer Address	10246	5 N Canyon Road	
Job Title/Occupation	AP/Pa	ayroll Administrator, Fitness Instructor	
Brief Description of Employment	For C	edar Hills – Managing all AP and Payroll processes. PG – Group Fitness Instruction	
Employer Name	VASA	A Fitness	
Employer Address	1585	1585 N State St	
Job Title/Occupation	Group	Group Fitness Instructor	
Brief Description of Employment	Instru	cting various group fitness formats – Mainly High Fitness and Studio Red classes	
Affiliated Entities (List each entity	of which	h the Trustee is an owner or officer during the preceding year)	
Entity Name	NA		
Description of Business/Activi Conducted	y NA		
Trustee's Position in the Entity	NA		
Entity Name			

Description of Business/Activity Conducted	NA
Trustee's Position in the Entity	NA

Investment Interests (List any entity in which the Trustee holds stocks or bonds with a fair market value equal to or greater than \$5,000, valued either at present or within the prior year. This excludes funds managed by a third party, such as blind trusts, managed investment accounts and mutual funds.)

Entity Name NA

Description of Business/Activity Conducted by the Entity

Entity Name NA

Description of Business/Activity Conducted by the Entity Name NA

NA

NA

NA

Description of Business/Activity Conducted by the Entity Conducted by the Entity Name NA

Other Income (List each individual or entity from whom the Trustee received \$5,000 or more in income during the preceding year. Note that if the Trustee provides goods or services to multiple customers or clients as part of a business and licensed profession, the Trustee is only required to provide this information in relation to the entity or practice through which the Trustee provides the goods and services and is not required to provide information about the Trustee's individual customers or clients.)

Entity/Individual Name	NA
Description of Business/Activity Conducted by the Entity/Individual	NA
Entity/Individual Name	NA
Description of Business/Activity Conducted by the Entity/Individual	NA

Entity Leadership Positions (List each entity not listed above for which the Trustee is currently or in the preceding year was either in a paid leadership capacity or in a paid or unpaid position on a board of directors)

Entity Name	NA
Description of Business/Activity Conducted by the Entity	NA
Type of Position Held	NA
Entity Name	NA
Description of Business/Activity Conducted by the Entity	NA
Type of Position Held	NA

Spouse Employment During the Preceding Year		
Employer Name	Self – Marie's Mountain Do's	
Employer Address	10662 N Bermuda	
Job Title/Occupation	Owner	
Brief Description of Employment	In Home Hair Salon	
Employer Name	NA	
Employer Address	NA	
Job Title/Occupation	NA	
Brief Description of Employment	NA	

Affiliated Adult Employment (Complete for each adult residing in Trustee's household but is not related by blood or marriage)	
Affiliated Adult's Name	NA
Job Title/Occupation	NA
Brief Description of Employment	NA
Affiliated Adult's Name	NA
Job Title/Occupation	NA
Brief Description of Employment	NA

* * * OPTIONAL DISCLOSURES * * *

Real Property (At your option, the Trustee may describe any real property in which the Trustee holds an ownership or other financial interest that the Trustee believes may constitute a conflict of interest)		
Description of Property and Type of Interest Held	NA	
Description of Property and Type of Interest Held	NA	
Other Matters or Interests (At your discretion, the Trustee may describe any other matter or interest that the Trustee believes may constitute a conflict of interest)		

By signing this form, I affirm that the information provided above is true and accurate to the best of my knowledge. I understand that it is my responsibility to disclose any potential conflicts of interest and that failure to comply with the disclosure requirements may result in a civil fine or other penalties.

Signed:__

Position: BOARD OF TRUSTRES

Please sign and deliver by hand to North Pointe's District office or scan a signed copy to neil.northpointe@gmail.com by January 31, 2025