ELECTED OFFICIAL
ANNUAL CONFLICT OF INTEREST DISCLOSURE FORM

The following disclosures are required to be made annually by all elected officers of the City of Saratoga Springs pursuant to Utah Code Annotated § 10-3-1313 & § 20A-11-1604(6)

If additional space is needed, please use a separate sheet of paper. Per statute, the information provided shall be kept on file with the City Recorder and shall be posted to the City website with links provided to the Lieutenant Governor.

I, Eden Davenport, am a duly elected City Council of the City of Saratoga Springs.

1) *The name and address of each of the regulated officeholder's current employers and each of the regulated officeholder's employers during the preceding year; and for each employer described, a brief description of the employment, including the regulated officeholder's occupation and, as applicable, job title.

Business Name & Address:	Description and Position:
Magnolia Fit 2253 S. Talons Cove Dr	Yoga Teacher
Business Name & Address:	Description and Position:

(*If a regulated officeholder or regulated officeholder's spouse is an at-risk government employee, as that term is defined in Subsection 63G-2-303(1)(a), the regulated officeholder may request the filing officer to redact from the conflict-of-interest disclosure: (i) the regulated officeholder's employment information, and (ii) the regulated officeholder's spouse's name and employment information.)

2) For each entity in which the regulated officeholder is an owner or officer, or was the owner or officer during the preceding year: the name of each entity; a brief description of the type of business or activity conducted by the entity; and the regulated officeholder's position in the entity:

Entity Name:	Type of Business or Activity of Entity:
Position with Entity:	
Entity Name:	Type of Business or Activity of Entity:
Position with Entity:	

3) **Each individual from whom, or entity from which, the regulated officeholder has received $5,000 or more in income during the preceding year: the name of the individual or entity; and a brief description of the type of business or activity conducted by the individual or entity:

Individual or Entity Name:	Type of Business or Activity of Individual or Entity:
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*(**In making the disclosure described, 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 relation to the entity or practice through which the regulated officeholder provides the goods or services and is not required to provide the information in relation to the regulated officeholder's individual customers or clients.)*

4) For each entity in which the regulated officeholder holds any stocks or bonds having a fair market value of $5,000 or more as of the date of the disclosure form or during the preceding year, but excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds: the name of the entity; and a brief description of the type of business or activity conducted by the entity:

Entity Name:	Type of Business or Activity of Entity:
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5) For each entity not listed above in which the regulated officeholder 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: the name of the entity or organization; a brief description of the type of business or activity conducted by the entity; and the type of position held by the regulated officeholder:

Entity Name and position held:	Type of Business or Activity of Entity:
Saratoga Shares PTA	President
Little Hands Can	Director of Development

6) At the option of the regulated officeholder, a description of any real property in which the regulated officeholder holds an ownership or other financial interest that the regulated officeholder believes may constitute a conflict of interest, including a description of the type of interest held by the regulated officeholder in the property:

Description of Property:	Interest Held:
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7) Name of regulated officeholder's spouse; and *the name of each of the regulated officeholder's spouse's current employers and each of the regulated officeholder's spouse's employers during the preceding year, if the regulated officeholder believes the employment may constitute a conflict of interest;

Spouse Name: Derek Davenport	Business Name & Address: Revere Health 4095 Pony Express Parkway Eagle MT 84005
Occupation: Physican	
Occupation:	Business Name & Address:

*If a regulated officeholder or regulated officeholder's spouse is an at-risk government employee, as that term is defined in Subsection 63G-2-303(1)(a), the regulated officeholder may request the filing officer to redact from the conflict-of-interest disclosure: (i) the regulated officeholder's employment information, and (ii) the regulated officeholder's spouse's name and employment information.

8) The name of any adult residing in the regulated officeholder's household who is not related to the officeholder by blood; and for each adult described, a brief description of the employment and occupation, if the regulated officeholder believes the adult's presence in the regulated officeholder's household may constitute a conflict of interest;

Name: -	Business Name & Address:
Occupation:	
Name:	Business Name & Address:
Occupation:	

9) At the option of the officeholder, a description of any other matter or interest that the regulated officeholder believes may constitute a conflict of interest;

Description of Conflict:

None

By signing below, I acknowledge that the form is true and accurate to the best of my knowledge.

Eden Kempat

Signature

01/08/2026

Date