

Candidate/Officeholder: Ryan Swapp

Office: City Council

1A: 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.

- Current Employer(s)/Address(es):

Big-D Mission Critical

- 404 W 400 S SK, UT 84101
Previous Employer(s)/Address(es):

1B: For each employer described in Item 1A, a brief description of the employment, including the regulated officeholder's occupation, and, as applicable, job title.

- Current Employment:

Preconstruction manager

- Previous Employment:

2A: For each entity in which the regulated officeholder is an owner or officer, or was an owner or officer during the preceding year, the name of the entity(ies).

N/A

2B: A brief description of the type of business or activity conducted by the entity(ies) described in Item 2A

N/A

2C: Regulated officeholder's position in the entity(ies) described in Item 2A

N/A

3A: For 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 individual(s) or entity(ies).

Utah Army National Guard

3B: A brief description of the type of business or activity conducted by the individual(s) or entity(ies) described in item 3A.

military

4A: 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 this date, or during the preceding year, the name of the entity(ies) (excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds).

N/A

4B: A brief description of the type of business or activity conducted by the entity(ies) described in Item 4A.

N/A

5A: For each entity not listed in 2A through 4B 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(ies) or organization(s)

West Haven city Special Service District

5B: A brief description of the type of business or activity conducted by the entity(ies) or organization(s) described in Item 5A

Sewer board

5C: The type of position held by the regulated officeholder in the entity(ies) or organization(s) described in Item 5A.

Board member

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

N/A

6B (Optional): A description of the type of interest held by the regulated officeholder in the property(ies) described in Item 6A.

N/A

7A: The name of the regulated officeholder's spouse.

- Spouse's Name: LaDonna Swapp

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's Current Employer(s): Direct Rate Home Loans
- Spouse's Previous Employer(s):

7B: The name of any adult residing in the regulated officeholder's household who is not related to the officeholder by blood.

- Other Adults: N/A

7C: For each adult described in Subsection 7B, a brief description of the adult's employment or occupation, if the regulated officeholder believes the adult's presence in the regulated officeholder's household may constitute a conflict of interest.

N/A

8A (Optional): A description of any other matter or interest that the regulated officeholder believes may constitute a conflict of interest.

N/A

Date: 6/3/25

☒ I, the regulated officeholder or candidate, believe this form is true and accurate to the best of my knowledge. (Check box)

☐ I am an at-risk government employee, and/or my spouse is an at-risk government employee as that term is defined in Subsection 63G-2-303(1)(a). I request that information relating to my employment, as well as my spouse's name and employment be redacted in accordance with 20A-11-1604(7)(a). (Check box)

DATED THIS 3 DAY OF June, 20 25

BY: _____

DOCUMENT SIGNATURE

TITLE/OFFICE: Council member

STATE OF UTAH)

§

COUNTY OF Weber)

SUBSCRIBED AND SWORN TO BEFORE ME ON THIS 3 OF June, 20 25,
DAY MONTH YEAR

BY Ryan Swapp
NAME OF DOCUMENT SIGNER

WITNESS MY HAND AND OFFICIAL SEAL.

Emily Green
NOTARY SIGNATURE

