



UTAH HOUSE OF REPRESENTATIVES

CONFLICT OF INTEREST & FINANCIAL DISCLOSURE

1. **Name:** Jim Dunnigan

2. **Employment**

Primary employer	Brief description of employment	Occupation or job title
Dunnigan Insurance	Insurance Agent	Insurance Agency Owner

3. **Entities which you own or of which you are an officer**

[see 2010 Gen. Session, HB 270, pg 13 - (iv)]

Name of entity	Type of activity conducted by the entity	Your position / interest in the entity
Dunnigan Insurance Taylorsville Dayzz	Insurance Sales City Festival	Owner/Agent President

4. **Each entity that has paid \$5,000 in income to you within the one-year period prior to the date of this form. [see 2010 Gen. Session, HB 270, pg 13. - (v)]**

Name of entity	Type of activity conducted by the entity
Dunnigan Insurance	Insurance

5. **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 this form (does not include funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds). [see 2010 Gen. Session, HB 270, pg 13 - (vi)]**

Name of entity	Type of activity conducted by the entity
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6. Organization or entity, other than listed above, for which you serve on the board of directors or in any other formal advisory capacity. [see 2010 Gen. Session, HB 270, pg 13 - (vii)]

Name of entity	Type of activity conducted by the entity	Your position / interest in the entity
CHIP Advisory Board	Children's Health Insurance Plan	Board Member
Taylorsville Days Committee	City Festival	Chairman

7. Real property in which you hold an ownership or other financial interest that you believe may constitute a conflict of interest. (optional) [see 2010 Gen. Session, HB 270, pg 13 - (viii)]

Description of real property	Description of interest held

8. Name of spouse and any other adult residing in your household that is not related by blood or marriage. [see 2010 Gen. Session, HB 270, pg 13 - (ix)]

Vicki Dunnigan

9. Information for your spouse and any other adult residing in your household that is not related to you by blood or marriage, as applicable. [see 2010 Gen. Session, HB 270, pg 14 - (x)]

Name	Brief description of employment	Occupation
Vicki Dunnigan	Assistant Dunnigan Insurance	Assistant

10. Any other matter or interest you believe may constitute a conflict of interest. (optional)

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I certify that I believe the information provided in this form is true and accurate to the best of my knowledge.

s/Jim Dunnigan
(Signature)

12-6-11
(Date)

Received by the Chief Clerk of the House:

s/Sandy D. Tenney
(Signature)

12-20-10
(Date)