

Candidate/Officeholder: Jonathan S. Gunn

Office: Member, Town Council

1A: The name(s) and address(es) of each of the individual's current employer(s) and name(s) and address(es) of each of the individual's employers during the preceding year.

- Current Employer(s):
Healthcare Law Offices of Jonathan S. Gunn
- Previous Employer(s):
State of Illinois

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

- Current Employment:
Healthcare Law Offices: Primarily physician & healthcare employment contracts & related matters.
- Previous Employment:
State of Illinois: Legal advice, grants, contracts, FOIA and enforcement.

2A: The name of any entity* in which the individual is an owner or officer, or was an owner or officer during the preceding year.

Healthcare Law Offices of Jonathan S. Gunn

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

Primarily physician & Healthcare employment contracts & related matters.

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

Principal & sole owner.

3A: The name of each individual from whom, or entity from which, the individual has received \$5,000 or more in income during the preceding year.**

1. State of Illinois, pension annuity.
2. Healthcare Law Offices of Jonathan S. Gunn

3B: A brief description of the type of business or activity conducted by the individual or entity described in Item 3A.**

The State of Illinois is a State governmental entity.
Healthcare Law Offices of Jonathan S. Gunn is a sole proprietorship providing legal services on matters of Illinois law.

4A: The name of each entity in which the individual 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 (excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds).

None, other than publicly traded Stocks, Bonds, Funds, and ETFs.

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

Publicly traded companies.

5A: The name of each entity or organization not described in Items 2A through 4B of this form in which the individual 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.

Wasatch County Fire District Fire Advisory Board.

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

Provide input to the Wasatch County Fire District on matters requested by the District.

5C: Description of the type of advisory position held by the individual within the entity(ies) organization(s) described in Item 5A.

Unpaid Member.

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

None, other than my personal, full time residence in Hideout

6B (Optional): Description of type of interest held by the individual in the property(ies) described in Item 6A.

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

- Spouse's Name:

Not married.

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):
- Spouse's Previous Employer(s):

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

- Other Adults:

Kathleen Shepley

7C: For the adults described in section 7B, give 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.

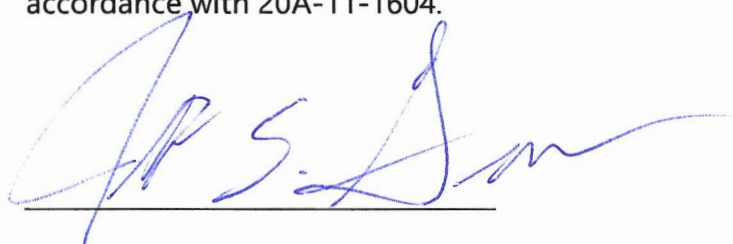
Katie is essentially retired except as a part time consultant for the Town.

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


Date: 1/21/26

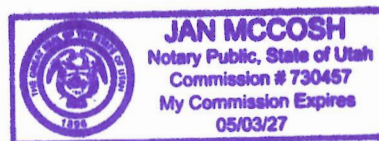
☒ I, the regulated officeholder or candidate, believe this form is true and accurate to the best of my knowledge. (Check box)


☐ 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 and my spouse's employment be redacted in accordance with 20A-11-1604.



Candidate/Officeholder's Signature





Received by: 

Title: City Recorder

Date: January 21, 2026

