

Agenda for the MNCJO EXTRAORDINARY BOARD MEETING

Date: 31 October 2022

Location: MS Teams

Time: 9:00 AM







- 1 ATTENDANCE
- 2 ACKNOWLEDGEMENT OF COUNTRY
- 3 APOLOGIES
- 4 DECLARATION OF PECUNIARY AND NON PECUNIARY INTEREST
- 5 SPEAKERS
 - 5.1. AUDITOR RICHARD WATKINSON FROM THOMAS NOBLE & RUSSELL ACCOUNTANTS
- 6 REPORTS FOR THIS MEETING
 - 6.1. GENERAL PURPOSE FINANCIAL STATEMENTS
 - 6.2. DISCLOSURE OF INTEREST RETURNS



5 SPEAKERS

Item 5.1

Subject Auditor – Richard Watkinson from Thomas Noble & Russell Accountants

Presented by Richard Watkinson

RECOMMENDATION

That the MNCJO Board hear from - Auditor – Richard Watkinson from Thomas Noble & Russell Accountants

ATTACHMENTS

None



6 REPORTS FOR THIS MEETING

Item 6.1

Subject General Purpose Financial Statements

Presented by Liz Fairweather, Project Manager

RECOMMENDATION

That the MNCJO Board

- 1. endorse the 2021-2022 Mid North Coast Joint Organisation (MNCJO) General Purpose Financial Statements.
- submit the General Purpose Financial Statements to the NSW Office of Local Government (OLG) and place them on the MNCJO website in compliance with s418(2) of the NSW Local Government Act.

EXECUTIVE SUMMARY

Section 416 1(A) of the *NSW Local Government Act* (the Act), 1993, requires that all council financial reports be audited within four months of the end of the financial year (ie in this case, 30 October 2022). The financial audit of the Mid North Coast Joint Organisation (MNCJO) for the period 2020/2021 was completed by auditors Thomas, Nobel and Russell (TNR).

REPORT DETAIL

The financial audit of the MNCJO for the period 2021/2022 was completed by auditors Thomas, Nobel and Russell (TNR).

In the 21/22 financial year the MNCJO recorded a net loss result. This is due to income being recorded in accordance with the Australian Accounting Standards i.e., general operating income is recognised on receipt.

In the 20/21 financial year significant grant income was received (\$412,262) and the expenditure for these projects was recorded in the 21/22 financial year. The Koala Recovery Project recorded income for 21/22 financial year is \$161,633 with expenditure of \$247,045.

Noting the foregoing timing issue it is considered that the MNCJO is a in sound financial position overall.

Thus the Auditor General noting in his 'Report on the Conduct of the Audit for the Year ended 30 June 2002 that:

The Joint Organisation's net result for the year ended 30 June 2022 was a loss of \$283,358. The Joint Organisation's primary income source during the year was from operating and capital grants of \$45,000 which contributed to 19.4 per cent of the Joint Organisation's income from continuing operations of \$231,633. The grant funding was received from Koala Conservation Australia (Koala Hospital). The Joint Organisation also received \$185,000 of income from member council contributions.

The Joint Organisation's total operating expenses from continuing operations for the year ended 30 June 2022 was \$514,991 which primarily consisted of employee benefits and on-costs of \$55,015 and administration expenses of 459,976.

At 30 June 2022, the Joint Organisation had total assets of \$802,110 and net assets of \$740,540. The Joint Organisation's main assets consist of cash of \$771,851 and receivables of \$30,259.

The audit procedures did not identify any instances of non-compliance with legislative requirements or a material deficiency in the Joint Organisation's accounting records or financial statements. The Joint Organisation's:

- accounting records were maintained in a manner and form to allow the GPFS to be prepared and effectively audited
- staff provided all accounting records and information relevant to the audit.

Pending the Board resolution of the MNCJO Extra-Ordinary meeting held 28 October 2022, the General Purpose Financial Statements will be submitted to the Office of Local Government (OLG) on schedule and placed on the MNCJO website in compliance with LGA s418(2).

ATTACHMENTS

1. Report - MNCJO General Purpose Reports - 2021 - 2022



GENERAL PURPOSE FINANCIAL STATEMENTS

for the year ended 30 June 2022

General purpose financial statements for the year ended 30 June 2022

Contents

	Page
Statement by Members of the Board and Management	1
Statement of Income and Accumulated Surplus	2
Statement of Financial Position	3
Statement of Cash Flows	4
Notes to the Financial Statements	5
Auditor's Report	19

Mid North Coast Joint Organisation is constituted under the *Local Government Act 1993 (NSW)* and has its principal place of business at:

Mid North Coast Joint Organisation 17 Burrawan Street Port Macquarie NSW 2444

Through the use of the internet, we have ensured that our reporting is timely, complete and available at minimum cost. All press releases, financial statements and other information are publicly available on our website: www.mncjo.nsw.gov.au

Statement of Income and Accumulated Surplus for the year ended 30 June 2022

	Notes	2022 \$	2021 \$
Income:			
Member council contributions	B1-1	185,000	203,000
Grants provided for operating purposes	B1-2	45,000	634,263
Interest and investment revenue	B1-3	-	46
Other Income	B1-4	1,634	8,663
Total income	-	231,634	845,972
Expenses			
Employee benefits and on-costs		55,015	101,762
Administrative Expenses	B2-1	459,976	282,611
Total expenses	-	514,991	384,373
Net operating result for the year	- -	(283,357)	461,599
Net result for the year	- -	(283,357)	461,599
Accumulated surplus at 1 July		1,023,897	562,298
Accumulated surplus at 30 June	_	740,540	1,023,897

The above Statement of Income and Accumulated Surplus should be read in conjunction with the accompanying notes.

Statement of Financial Position as at 30 June 2022

	Notes	2022 \$	2021
ASSETS			
Current assets			
Cash and cash equivalents	C1-1	771,851	1,095,734
Receivables	C1-2	30,259	
Total current assets	-	802,110	1,095,734
Total assets	- -	802,110	1,095,734
LIABILITIES			
Current liabilities			
Payables	C3-1	58,518	51,358
Employee benefit provisions	C3-2	3,052	20,479
Total current liabilities	-	61,570	71,837
Total liabilities	-	61,570	71,837
Net assets	=	740,540	1,023,897
EQUITY			
Accumulated Surplus	_	740,540	1,023,897
Total equity	_	740,540	1,023,897

The above Statement of financial position should be read in conjunction with the accompanying notes.

Statement of Cash Flows for the year ended 30 June 2022

		2022	2021
	Notes	\$	\$
Cash flows from operating activities			
Receipts:			
Contributions from member councils		185,000	253,000
User charges and fees		-	-
Grants		17,500	634,263
Interest received		-	46
Other income		(1,125)	8,663
Payments:			
Employees		(72,595)	(95,617)
Non-employee cash outflows		(452,663)	(244,302)
Net cash provided from (or used) in operating activities	_	(323,883)	556,053
Net increase/(decrease) in cash and cash equivalents		(323,883)	556,053
Cash and cash equivalents at beginning of reporting period		1,095,734	539,681
Cash and cash equivalents at end of reporting period	C1-1	771,851	1,095,734

The above Statement of cash flows should be read in conjunction with the accompanying notes.

Contents of the notes to the Financial Statements for year ended 30 June 2022

A. Abou	ut the Joint Organisation and these financial statements	6
A 1	. Basis of preparation	6
B. Finar	ncial Performance	7
B1	. Sources of Income	7
	B1-1 Members Council contributions.	7
	B1-2 Grant and contributions	8
	B1-3 Interest and investment income	9
	B1-4 Other income	9
B2	. Costs of providing services	10
	B2-1 Administrative expenses.	10
C. Finar	ncial position	11
C1	. Assets we manage	11
	C1-1 Cash and cash equivalents	11
	C1-2 Receivables	12
C2	. Leasing activities	13
	C2-1 Joint Organisation as a lessee	13
C3	. Liabilities of the Joint Organisation	14
	C3-1 Payables	14
	C3-2 Employee benefits	15
D. Risks	s and accounting uncertainties	16
	D1-1 Financial risk management	16
	D2-1 Contingencies.	16
E. Peop	ole and relationships	17
E1.	. Related party disclosures	17
	E1-1 Key management personnel (KMP)	17
	E1-2 Other related parties	17
E2.	. Other relationships	18
	E2-1 Audit fees	18
F. Othe	r matters	18
F1.	. Commitments	18
F2	Events occurring after reporting date	12

A. About the Joint Organisation and these financial statements

A1. Basis of Preparation

These financial statements were authorised for issue by the Board of the Joint Organisation on the 28 October 2022. The Board has the power to amend and reissue these financial statements.

The principal accounting policies adopted in the preparation of these financial statements are set out below.

These general purpose financial statements have been prepared in accordance with Australian Accounting Standards - Simplified Disclosues, the *Local Government Act 1993 (NSW)* and Regulations, and the Joint Organisation Code of Accounting Practice and Financial Reporting. Mid North Coast Joint Organisation is a not-for-profit entity.

b. Historical cost convention

These financial statements have been prepared under the historical cost convention.

c. Significant accounting estimates and judgements

The preparation of financial statements requires the use of certain critical accounting estimates. It also requires management to exercise its judgement in the process of applying the JO's accounting policies. Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that may have a financial impact on the JO and that are believed to be reasonable under the circumstances.

Critical accounting estimates and assumptions

Mid North Coast Joint Organisation makes estimates and assumptions concerning the future. The resulting accounting estimates will, by definition, seldom equal the related actual results. The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year include:

employee benefit provisions - refer Note C3-2

Significant judgements in applying the JO accounting policies

None are applicable at this stage.

Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of associated GST, unless the GST incurred is not recoverable from the taxation authority. In this case it is recognised as part of the cost of acquisition of the asset or as part of the expense.

Receivables and payables are stated inclusive of the amount of GST receivable or payable. The net amount of GST receivable from, or payable to, the taxation authority is included with other receivables or payables in the Statement of Financial Position.

Cash flows are presented on a gross basis. The GST components of cash flows arising from investing or financing activities that are recoverable from, or payable to, the taxation authority are presented as operating cash flows.

30 June 2022

B. Financial Performance

B1. Sources of income

B1-1 Member Council contributions

	2022		2022	2022 2021
	\$	\$		
Port Macquarie Hastings Council	115,000	121,000		
Kempsey Shire Council	45,000	51,000		
Bellingen Shire Council	25,000	31,000		
Total member council contributions	185,000	203,000		

Accounting policy

Contributions by member councils are recognised as revenue at the point in time when the amount to be paid for the period has been determined and communicated to councils. The contribution may be in the form of a cash payment or non-monetary contribution (which is recorded at its fair value).

The methodology for determining the contributions is:

- equal contributions by all member councils in order to perform the principal functions of delivering on strategic regional priorities, regional leadership and intergovernmental cooperation.
- · contributions by participating member councils for the functions of enhancing strategic capacity and direct service delivery.

B. Financial Performance

B1. Sources of income

B1-2 Grants

Resilience NSW - Administration Costs - 12,918 - - Office of Local Government (OLG) joint organisation capacity building funding - 150,000 - - Office of Environment & Heritage - Saving our Species - Koala Recovery Partnership - 150,000 - - Office of Local Government - Increasing Resilience to Climate Change - 58,400 - - Office of Local Government - BCRRF Simtable for Community Empowerment - 157,945 - - Office of Environment & Heritage - FABCON Grant - 157,945 - - Koala Hospital Port Macquarie 45,000 634,263 - - Total grants 45,000 634,263 - - Comprising: - Commonwealth funding - 634,263 - - - State funding - 634,263 - - - Other funding 45,000 634,263 - - - Timing of revenue recognition - - - Grants recognised over time -		Operatin	g	Capital	
Resilience NSW - Administration Costs 12,918 - -		2022	2021	2022	2021
Office of Local Government (OLG) joint organisation capacity building funding	_	\$	\$	\$	\$
Duilding funding	Resilience NSW - Administration Costs	-	12,918	-	-
Koala Recovery Partnership - 150,000 - <		_	150,000	-	-
Climate Change - 58,400 - - Office of Local Government - BCRRF Simtable for Community Empowerment - 157,945 - - Office of Environment & Heritage - FABCON Grant - - - - - Koala Hospital Port Macquarie 45,000 105,000 - - - Total grants 45,000 634,263 - - - Comprising: - - 634,263 - - - - Commonwealth funding - 634,263 - - - - Other funding 45,000 - - - - - Other funding 45,000 634,263 - - - Timing of revenue recognition - - - - - - Grants recognised over time - - - - - - - Grants recognised at a point in time 45,000 634,263 - - - - - - - - - - - - -	ŭ .	-	150,000	-	-
Community Empowerment - 157,945 - - Office of Environment & Heritage - FABCON Grant - - - - Koala Hospital Port Macquarie 45,000 105,000 - - Total grants 45,000 634,263 - - Comprising: - - 634,263 - - - Other funding - 634,263 - - - - Other funding 45,000 634,263 - - - Timing of revenue recognition - - - - - Grants recognised over time - - - - - - Grants recognised at a point in time 45,000 634,263 - - -	<u> </u>	-	58,400	-	-
Koala Hospital Port Macquarie 45,000 105,000 - - Total grants 45,000 634,263 - - Comprising: -<		-	157,945	-	-
Total grants 45,000 634,263 - - Comprising: -	Office of Environment & Heritage - FABCON Grant	-	-	-	-
Comprising: - Commonwealth funding - 634,263 - State funding - 634,263 - Other funding 45,000 - 45,000 634,263 Timing of revenue recognition - Grants recognised over time - Grants recognised at a point in time 45,000 634,263	Koala Hospital Port Macquarie	45,000	105,000	-	-
- Commonwealth funding - State funding - Other funding 45,000	Total grants	45,000	634,263	-	
- State funding - 634,263	Comprising:				
- Other funding	- Commonwealth funding				
45,000 634,263 - - Timing of revenue recognition Grants recognised over time - - Grants recognised at a point in time 45,000 634,263 - -	- State funding	-	634,263	-	-
Timing of revenue recognition Grants recognised over time - Grants recognised at a point in time 45,000 634,263 - -	- Other funding	45,000	-	-	-
Grants recognised over time Grants recognised at a point in time 45,000 634,263		45,000	634,263	-	_
Grants recognised at a point in time 45,000 634,263	Timing of revenue recognition				
<u> </u>	Grants recognised over time	-	-		
Total grants 45,000 634,263	Grants recognised at a point in time	45,000	634,263	-	_
	Total grants	45,000	634,263	-	_

Accounting policy

Grants - enforceable agreement with sufficiently specific performance obligations

Grant revenue arising from an agreement which is enforceable and contains sufficiently specific performance obligations is recognised as or when control of each performance obligation is transferred.

The performance obligations are varied according to the agreement but include reaching project milestones, completion of grant acquittals, whether the grant will be refunded if performance obligations are not met.

Performance obligations may be satisfied either at a point in time or over time and this is reflected in the revenue recognition pattern. Point in time recognition occurs when the beneficiary obtains the control of the goods/services at a single time (e.g. completion of the project when a report / outcome is provided), whereas over time recognition is where the control of the services is ongoing throughout the project (e.g. provision of community health services through the year).

Where control is transferred over time, generally the input methods of costs or time are deemed to be the most appropriate methods to reflect the transfer of the benefit.

Capital grants

Capital grants received under an enforceable contract for the acquisition or construction of infrastructure, property, plant and equipment to identified specifications which will be under the Mid North Coast Joint Organisation's control on completion are recognised as revenue and when the obligation to construct or purchase is completed.

For construction projects, this is generally as the construction progresses in accordance with costs incurred since this is deemed to be the most appropriate measure of the completeness of the construction project.

For acquisition of assets, the revenue is recognised when the asset is acquired and controlled by the Mid North Coast Joint Organisation.

Other grants

Assets (e.g cash) received from other grants are recognised at fair value when the asset is received. The Mid North Coast Joint Organisation considers whether there are any related liability or equity items associated with the asset which are recognised in accordance with the relevant accounting standard.

Once the assets and liabilities have been recognised then income is recognised for any remaining asset value at the time that the asset is received.

B. Financial Performance

B1. Sources of income

B1-3 Interest and investment income

	2022	2021
	\$	\$
Interest in financial assets measured at amortised cost		46
Total interest and investment income	-	46

Accounting policy

Interest and investment income is recognised using the effective interest rates at the date that interest is earned.

B1-4 Other income

	2021	2021
	\$	\$
Contribution from Local Land Services - Koala Recovery Partnership	-	3,000
Other	1,634	5,663
Total other income	1,634	8,663

Accounting policy

Other income is recorded when the payment is due, the value of the payment is notified, or the payment is received, whichever occurs first.

Gains and losses on disposals are determined by comparing proceeds with carrying amount. The gain or loss on sale of an asset is determined when control of the asset has irrevocably passed to the buyer and the assets is de-recognised.

B2. Costs of providing services

B2-1 Administrative Expenses

	2022	2021
	\$	\$
Contractor and consultancy costs		
- Project Manager Services	55,258	44,745
- Biodiversity Stewardship Project	10,000	68,692
- Koala Monitoring Program consultancy costs	187,833	116,373
- Community Land Trust	35,792	-
- Platform/Co-ordination Hub	10,000	-
- Scholarship Program	47,740	-
Advertising	-	440
Remuneration of auditors	10,250	10,000
Office Expenses	23,804	11,412
Other	69,388	13,910
Sitting Fees	7,250	250
Travelling	2,662	32
Return of Office of Environment & Heritage - FABCON Grant		16,757
Total administrative expenses	459,976	282,611

Accounting policy

Employee benefit expenses

Employee benefit expenses are recorded when the service has been provided to the employee.

Contributions to defined contribution plans are recognised as an expense as they become payable. Prepaid contributions are recognised as an asset to the extent that a cash refund or a reduction of the future payments is available.

Administrative expenses

Administrative expenses are recorded on an accruals basis as the Mid North Coast Joint Organisation receives the goods or services.

C. Financial position

C1. Assets we manage

C1-1 Cash and cash equivalents

	2022	2021
	\$	\$
Cash at bank and on hand	771,851	1,095,734
	771,851	1,095,734
Destricted seek and seek annivelents		
Restricted cash and cash equivalents		
External restrictions	608,455	679,579
Unrestricted	163,396	416,155
	771,851	1,095,734
Restricted cash and cash equivalents		
Total cash and cash equivalents per Statement of Financial Position	771,851	1,095,734
Balances as per Statement of Cash Flows	771,851	1,095,734

Accounting policy

For Statement of Cash Flow presentation purposes, cash and cash equivalents include: cash on hand; deposits held at call with financial institutions; other short-term, highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value; and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities on the Statement of Financial Position, however are included as cash and cash equivalents in the Statement of Cashflows.

C1-2 Receivables

	2022	2021
	\$	\$
Other (GST receivable)	2,759	-
Other	27,500	-
Total	30,259	-
Net Receivables	30,259	

Accounting policy

Receivables are recognised initially at fair value and subsequently measured at amortised cost using the effective interest method, less provision for impairment. Receivables are generally due for settlement within 30 days.

Impairment of receivables is assessed using the simplified expected credit loss model where lifetime credit losses are recorded on initial recognition. To measure the expected credit losses, debtors have been grouped based on shared credit risk characteristics and the days past due.

The Joint Organisation has not recognised a provision for impairment at 30 June 2022 on the basis that the Mid North Coast Joint Organisation has no history of credit losses being incurred.

C2. Leasing activities

C2-1 Joint Organisation as a lessee

(a) Mid North Coast Joint Organisation as a lessee

The Mid North Coast Joint Organisation had one lease for a vehicle during the financial year.

The JO was provided with a vehicle for use in it's operations during the first half of the year. There was no official lease and the vehicle was returned to the lessor in November 2021.

This lease is considered a short-term lease and as such is exempt from AASB 16 reporting.

Accounting policy

At inception of a contract, the Mid North Coast Joint Organisation assesses whether a lease exists – i.e. does the contract convey the right to control the use of an identified asset for a period of time in exchange for consideration?

The Mid North Coast Joint Organisation has elected not to separate non-lease components from lease components for any class of asset and has accounted for payments as a single component.

At the lease commencement, the Mid North Coast Joint Organisation recognises a right-of-use asset and associated lease liability for the lease term. The lease term includes extension periods where the Mid North Coast Joint Organisation believes it is reasonably certain that the option will be exercised.

The right-of-use asset is measured using the cost model where cost on initial recognition comprises: the lease liability, initial direct costs, prepaid lease payments, estimated cost of removal and restoration, less any lease incentives. The right-of-use is depreciated over the lease term on a straight-line basis and assessed for impairment in accordance with the impairment of asset accounting policy.

The lease liability is initially recognised at the present value of the remaining lease payments at the commencement of the lease. The discount rate is the rate implicit in the lease, however where this cannot be readily determined then the Mid North Coast Joint Organisation's incremental borrowing rate for a similar term with similar security is used.

Subsequent to initial recognition, the lease liability is measured at amortised cost using the effective interest rate method. The lease liability is re-measured when there is a lease modification or change in estimate of the lease term or index upon which the lease payments are based (e.g. CPI).

Where the lease liability is re-measured, the right-of-use asset is adjusted to reflect the re-measurement.

Exceptions to lease accounting

Mid North Coast Joint Organisation has applied the exceptions to lease accounting for both short-term leases (i.e. leases with a term of less than or equal to 12 months) and leases of low-value assets. The Mid North Coast Joint Organisation recognises the payments associated with these leases as an expense on a straight-line basis over the lease term.

C3. Liabilities of the joint organisation

C3-1 Payables

	2022	2021
	\$	\$
Trade payables	41,684	26,823
Accrued expenses	16,834	24,535
Total payables	58,518	51,358

Accounting policy

The Mid North Coast Joint Organisation measures all financial liabilities initially at fair value less transaction costs, subsequent financial liabilities are measured at amortised cost using the effective interest rate method.

Trade payables represent liabilities for goods and services provided to the Mid North Coast Organisation prior to the end of financial period that are unpaid. The amounts are unsecured and are usually paid within 30 days of recognition.

C3-2 Employee benefits

	2022		20	21
	Current \$	Non-Current \$	Current \$	Non-Current \$
Employee benefits provisions				
Annual leave			3,265	
Long service leave	3,05	2 -	17,214	
Total employee benefit provisions	3,05	2 -	20,479	
Current employee benefit provisions not expected to be settled within the next 12 months			-	

Accounting policy

Short-term obligations

Liabilities for wages and salaries, (including non-monetary benefits and annual leave expected to be wholly settled within 12 months after the end of the period in which the employees render the related service) are recognised in respect of employees' services up to the end of the reporting period and are measured at the amounts expected to be paid when the liabilities are settled. The liability for annual leave is recognised in the provision for employee benefits. All other short-term employee benefit obligations are presented as payables.

Other long-term employee benefit obligations

The liability for long service leave and annual leave that is not expected to be wholly settled within 12 months after the end of the period in which the employees render the related service is recognised in the provision for employee benefits and measured as the present value of expected future payments to be made in respect of services provided by employees up to the end of the reporting period using the projected unit credit method.

Consideration is given to expected future wage and salary levels, experience of employee departures, and periods of service. Expected future payments are discounted using market yields at the end of the reporting period on national government bonds with terms to maturity and currency that match, as closely as possible, the estimated future cash outflows.

On-costs

The employee benefit provisions include the aggregate on-cost liabilities that will arise when payment of current employee benefits is made in future periods.

These amounts include superannuation, payroll tax and workers compensation expenses which will be payable upon the future payment of certain leave liabilities which employees are entitled to at the reporting period.

The obligations are presented as current liabilities in the Statement of Financial Position if the Mid North Coast Joint Organisation does not have an unconditional right to defer settlement for at least 12 months after the reporting date, regardless of when the actual settlement is expected to occur.

D. Risks and accounting uncertainties

D1. Financial risk management

Risk management

The Mid North Coast Joint Organisation's activities expose it to a variety of financial risks including credit risk, liquidity risk and interest rate risk.

Financial risk management is carried out by the finance team under policies approved by the Mid North Coast Joint Organisation Board.

The fair value of receivables, investments and financial liabilities approximates the carrying amount.

D2. Contingencies

The Mid North Coast Joint Organisation is a member of Statewide Mutual, a mutual pool scheme providing liability insurance to local government.

Membership includes the potential to share in either the net assets or liabilities of the fund depending on its past performance. The Mid North Coast Joint Organisation's share of the net assets or liabilities reflects the contributions to the pool and the result of insurance claims within each of the fund years.

The future realisation and finalisation of claims incurred but not reported to 30 June 2022 may result in future liabilities or benefits as a result of past events that the JO will be required to fund or share respectively.

Notes to the financial statements 30 June 2022

E. People and relationships

E1. Related Party Disclosures

E1-1 Key management personnel

Key management personnel (KMP) of the Mid North Coast Joint Organisation are those persons having the authority and responsibility for planning, directing and controlling the activities of the Mid North Coast Joint Organisation, directly or indirectly.

The aggregate amount of KMP compensation included in the Income Statement and Other Comprehensive Income is \$61,544 (2021: \$44,995)

Other transactions with KMP and their related parties

There were no other transactions between the JO and the KMP and their related parties.

E1-2 Other related parties

There were no transactions between the JO and other related parties (2021:nil)

E2. Other relationships

E2-1 Audit fees

	2022	2021
	\$	\$
Auditors of the JO - NSW Auditor-General:		
Audit of financial statements	10,250	10,000
Total fees paid or payable to the Auditor-General	10,250	10,000

F. Other matters

F1. Commitments

The Mid North Coast Joint Organisation does not have any commitments relating to the acquisition of property, plant and equipment that are not recognised in the financial statements as liabilities.

F2. Events occurring after reporting date

At the JO meeting held 28 September, the MNCJO Board resolved to transfer the remaining Koala Recovery Partnership funds to Koala Conservation Australia. This is in accordance with advice of the NSW Department of Planning and Environment.

General Purpose Audit Reports

for the year ended 30 June 2022



6 REPORTS FOR THIS MEETING

Item 6.2

Subject Disclosure of Interest Returns

Presented by Liz Fairweather, Project Manager

RECOMMENDATION

That the Board note the Disclosure of Interest Returns submitted by the Board, and those staff who are designated persons.

EXECUTIVE SUMMARY

The purpose of this report is to table Disclosure of Interest Returns, in compliance with the *NSW Local Government Act 1993*, in relation to the keeping of a register, and the tabling of, disclosure of interest forms by members of the Board of the Mid North Coast Joint Organisation and designated persons.

REPORT DETAIL

This report is to advise of the tabling of the completed Disclosure of Interest Returns.

Section 449(3) of the *NSW Local Government Act 1993* requires Joint Organisation Board Members (and designated persons) who hold that position on 30 June in each year to lodge a "Disclosures of Interest Return". All Board members who held office at 30 June and designated persons, should have lodged such a return with the Executive Officer by 30 September. Under the Act, these returns are to be tabled at the first Board meeting following the last day for lodgement.

As the Extra-Ordinary Board meeting is being conducted online, any member wanting to view the Returns can do so via the Executive Officer. Alternatively, the Disclosures of Interest forms will be available on the MNCJO website.

In line with the personal and privacy considerations outlined in s 57 & s 58 Privacy and Personal Information Act 1998, the MNCJO has redacted addresses and signatures from these returns, prior to publication. This decision has been made following the application of the public interest test.

ATTACHMENTS

1. Disclosure of interests - Board Members_Redacted



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

For further information please read the Office of Local Government's Self help guide for completion of returns

Ensure that wherever you have nothing to declare, that you have selected the word 'NIL' from the drop-drown lists.

MY FULL NAME	GIVEN NAME:	DOMWIC	SURNAME: KING	
	RET	URN PERIOD: 202	21-2022	

A REAL	PROPERTY		
that you	You must include: (i) either the postal addresse had an interest in at any time during the Return F	s OR particulars of title, i.e. Lot and DP Period; (ii) the Nature of your Interest, i.e	(or SP) of properties anywhere in Australia c. Owner, Part Owner, Lessee, Beneficiary,
Address of ea Return Period	ch parcel of real property in which I had a	an interest at any time during the	Nature of my Interest: Select from the drop-down list
MY PLACE(S	S) OF RESIDENCE:		
No:	RD RD	Lot & DP:	SELECT FROM LIST BELOW
		State: N5W	Alox
	Street:	Lot & DP:	SELECT FROM LIST BELOW
		State:	NIL
OTHER REA	L PROPERTY POSTAL ADDRESS DE	ETAILS:	
No:	Street:	Lot & DP:	SELECT PROMIST BELOW
Suburb:		State:	SELECT PROMPLIST BELOW
No:	Street:	Lot & DP:	OF LEGT EDOM LIST DELOW
Suburb:		State:	SELECT FROM LIST BELOW
No:	Street:	Lot & DP:	SELECT EDOM LIST DELOW
Suburb:		State:	SELECT FROM LIST BELOW
No:	Street:	Lot & DP:	SELECT EDOM LIST DELOW
Suburb:		State:	SELECT FROM LIST BELOW
No:	Street:	Lot & DP:	OFLECT FROM LIST RELOW
Suburb:		State:	SELECT FROM LIST BELOW
No:	Street:	Lot & DP:	SELECT EDOM LIST DELOW
Suburb:		State:	SELECT FROM LIST BELOW

If insufficient space, please attach a schedule to this form.

Please tick if adding an attachment



B SOURCES OF INCOM	1E			
A TIP: Only provide information w	here the amount of inc	ome from an occupa	ation, a Trust or other source,	exceeded \$500.
1 SOURCES OF MY INCOM (sources, not amounts, of income)			s) at any time during the Re	eturn Period)
Position Held e.g. Labourer, Cadet, Project Officer, Manager, etc.	Descrip	e and Address of tion of Office held actude business n		Name of Partnership (if applicable)
COUNCILLOR BOARD MEMBER	Bellingen Shire Co 33 Hyde Street, Bellingen NSW 246			
BOARD MEMBER	SYDNEY			LOCAL COVERNMENT
2 SOURCES OF MY INCOM (sources of income, not amount in the source) If you have Nothing to Declare, select	unts, I received from	a Trust during th	_	electropylon from this list
NAME AND ADDRESS O			NAME AND ADDRESS	7-1-
2.5 A IIF. The Settor is the name of a	i person who created the Trus			
3 OTHER SOURCES OF M (sources of other income, no > TIPS: a Other Sources of Incom b You must include a deswhich, that income was	of amounts, I receive e may include income cription sufficient to ide	from rental property	, investments, business activi	ties, welfare payments; m whom, or the circumstances in
If you have Nothing to Declare, select		adjacent Box	> s	elf Location from this list
C GIFTS				
A TIP: Only include description of	a single gift or multiple	gifts from the same	e donor, the total value of whic	ch exceeded \$500
If you have Nothing to Declare, select and move to Section D	the word 'Nil' in the	adjacent Box	3 s	elect potion from this list
If you declare a gift O then you MUS Leader Governance	ST also complete a 0	Gifts and Benefits	Declaration Form available	e on request from the Group
DESCRIPTION OF EACH GIFT RECEIVE TIME DURING THE RETURN			NAME AND ADDRESS OF	GIFT DONOR





plipni from this list
STATES, TERRITORIES OMMONWEALTH AND OUNTRIES IN WHICH WAS UNDERTAKEN

E INTERESTS AND POSITIONS TIPS: (i) Declare only if your shareholding was gr			(ii) You must declare any position (not
Shareholder) you held in a Corporation (including no or the position was a paid position	t-for-profit corporation) such	as Director, whether	or not you held shares in the Corporation
If you have Nothing to Declare, select the word 'Nil' and move to Section F	in the adjacent Box	>	Selection from this list
If you declare a Position () you held in a Corporati			MUST complete a Conflict of
NAME AND ADDRESS OF EACH CORPORATION IN WHICH I HAD AN INTEREST OR HELD A POSITION AT ANY TIME DURING THE RETURN PERIOD	NATURE OF INTEREST (IF ANY) EG SHAREHOLDER	DESCRIPTION OF POSITION (IF AN EG DIRECTOR, COMP. SECRETARY	Y) PRINCIPAL OBJECTS OF

F INTERESTS AS A PROPRTY DI PROPERTY DEVELOPER	EVELOPER OR A CLOSE	E ASSOCIATE OF A
TIPS: (i) Declare whether they were a property d developer, on the return date.	eveloper, or a close associate of a corpora	ation that, or an individual who, is a propert
If you have Nothing to Declare, select the word 'Nil' in and move to Section F	n the adjacent Box	Seladt option from this list
NAME AND ADDRESS OF PROPERTY DEVELOPER	NATURE OF INTEREST (IF ANY)	DESCRIPTION OF POSITION (IF ANY) EG DIRECTOR, COMPANY SECRETARY



ECT

DISCLOSURE OF INTERESTS

- A person making a return under clause 4.21 of this code must disclose whether they were a property developer, or a close associate of a
 corporation that, or an individual who, is a property developer, on the return date.
- For the purposes of clause 19 of this schedule:
 - close associate, in relation to a corporation or an individual, has the same meaning as it has in section 53 of the Electoral Funding Act 2018.
 - o property developer has the same meaning as it has in Division 7 of Part 3 of the Electoral Funding Act 2018.

A TIP: Do not include general membership but include details of any positions held whether remun	erated or not
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section G	Select option from this list
NAME OF EACH TRADE UNION AND EACH PROFESSIONAL OR BUSINESS ASSOCIATION IN WHICH I HELD ANY POSITION (WHETHER REMUNERATED OR NOT) AT ANY TIME DURING THE RETURN PERIOD	DESCRIPTION OF POSITION
	¥

H DEB	TS				
A TIP society,	You do not need to provide information on (i credit union or other financial institution such as) the amounts; (ii) debts for lo	ess than \$500; (iii) of the card or department	debts to any re	elative, bank, building
If you have I	Nothing to Declare, select the word 'Nil' in t Section H	he adjacent Box	0	Selectiontion	n from this list
NAME AND	ADDRESS OF EACH PERSON OR ORGANISA	ATION (CREDITOR) TO WHO	M I WAS LIABLE T	O PAY ANY D	EBT AT ANY TIME
	NAME OF CREDITOR		ADDRESS OF	CREDITOR	
I DISP	OSITIONS OF REAL PROPE	RTY			
of each dispose of grant of grant of grant of grant of grant of transfering t	ht to repurchase the property; h disposal of real property by other persons or e al includes — rant of a lease or licence for all or part of the lan ortgage over your land, rant of easement over land by which you retain t ale of land (or grant of option by you) with (i) a asement or covenant over the land in favour of y on of an option to purchase land in favour of you; on by you of a charge over your land; or by you of an interest in your land to a Trustee or of land to your spouse or by your spouse to a or of title of your land subject to you continuing to lothing to Declare, select the word 'Nil' in the Section I require more detailed explanation on the interest and 188(2) of the Local Government	the ability to use the land, lease or licence granted to you of a Trust of which you are a bethird party whereby you continuo receive a benefit, e.g. rent from adjacent Box	rou or a right for you beneficiary; ue to occupy the land the land.	nd; Select/option	se the land, (ii) or an
RE	RTICULARS OF EACH DISPOSITIO FURN PERIOD AS A RESULT OF WH NEFIT OF THE PROPERTY OR THE F	N OF REAL PROPER	TY BY ME AT	ANY TIME	, THE USE AND
No:	Street:	Lot & DP:	Suburb:		State:
No:	Street:	Lot & DP:	Suburb:		State:
No:	Street:	Lot & DP:	Suburb:		State:
UNI	RTICULARS OF EACH DISPOSITION DER ARRANGEMENTS MADE BY M TURN PERIOD, AS A RESULT OF WH NEFIT OF THE PROPERTY	ME, BEING DISPOSITION	ONS MADE AT	ANY TIME	DURING THE
No:	Street:	Lot & DP:	Suburb:		State:
No:	Street:	Lot & DP:	Suburb:		State:
No:	Street:	Lot & DP:	Suburb:		State:



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

A TIP: To be completed if you wish to make any additional disclosures			
you have Nothing to Declare, select the word 'Nil' in the adjacent Box nd go to Sign and Date to complete this Return	٥	Select option from this list	

MY SIGNATURE:		
DATE SIGNED:	21/09/2022	

NEXT STEPS:

- Ensure that wherever you had nothing to declare, that you have selected the word 'NIL' from the dropdrown lists.
- Print the form.
- Sign and date the return.
 - Your form should then be forwarded to the Group Leader Governence via either email <u>qovernance@bellingen.nsw.qov.au</u> or hard copy to 33 Hyde Street, Bellingen NSW 2460

OPTIONAL STATUTORY DECLARATION:

Did you complete the optional Statutory Declaration on the next page?

If 'YES', make sure that you have listed the reasons for completing the form and then have your signature witnessed by a Justice of the Peace before submitting your Disclosure of Interest Form.



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

COMPLETION OF THE FOLLOWING STATUTORY DECLARATION IS OPTIONAL

The declaration should be completed only if you want to withhold your place of living from the version of your Return which is made available for public inspection. Reasons for withholding your place of living must be detailed in the declaration.

STATUTORY DECLARATION

Request for Protection of Privacy (place of living) Local Government Act 1993, Section 739

l,				
of				
in the State of New South Wales, do solemnly and sincerely dec	clare as follows –			
I request that my Annual Return of Disclosure of Interests and Other Matters that is available, or is to be made available, for public inspection by or under the Local Government Act 1993 be prepared or amended so as to omit or remove any matter that would disclose, or discloses, my place of living.				
I consider that the disclosure of my place of living would place, or my family, at risk for the reason(s) that -	or places, my personal safety, or the personal safety of members of			
LIST YOUR REASONS HERE -				
And I make this solemn declaration conscientiously believ Oaths Act, 1900.	ring the same to be true and by virtue of the provisions of the			
Subscribed and declared at:				
Thisday of				
20	My Signature			
before me:				
I,(Full name of JP)	_ a JP for NSW certify certify			
 (Tick a box that applies) 1	ne/she was wearing a face covering, but I am satisfied that it, and			
(Tick a box that applies)				
2 I have known the person for at least 12 months				
☐ I confirmed the person's identity with	(Describe identification document relied on [PTO)			
(Signature of JP)	(Date)			





ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

★★ NOTES FOR COMPLETING THE OPTIONAL STATUTORY DECLARATION

A person's identity can be confirmed with any one of the following approved identification documents, unless the document has expired or been cancelled. However, an Australian passport is acceptable if it expired no more than 2 years ago -

- a driver's licence or permit with a photograph, whether issued in Australia or another country
- a NSW photo card issued under Photo Card Act 2005
- an Australian proof of age card which contains the person's photograph
- an Australian passport (either current or expired less than 2 years ago)
- a passport or similar document with the person's photograph and signature issued by another country or by the United Nations
- a national identity card with the person's photograph and signature issued by another country or the United Nations (with an English language translation if not in English)
- an Australian citizenship certificate
- a foreign citizenship certificate (with an English language translation if not in English)
- a birth certificate or birth extract, whether issued in Australia, another country or by the United Nations (with an English language translation if not in English)
- a Centrelink pension card
- a credit card or passbook
- an account from a bank, building society or credit union, or statement of account up to one year old
- a Medicare card, pension concession card, Department of Veteran's Affairs entitlement card or other entitlement card issued by the Federal or any State Government
- an electoral enrolment card or other evidence of enrolment as an elector up to 2 years old, or
- a student identity card, or a certificate or statement of enrolment up to 2 years old from an educational institution

A copy of an identification document is acceptable if certified as a true copy by:

- any justice of the peace,
- notary public,
- commissioner of the court for taking affidavits,
- Australian legal practitioner authorised to take and receive any affidavit,
- the NSW Registrar-General,
- a Deputy Registrar-General,
- or other person by law authorised to administer an oath.

The certifier and the witness cannot be the same person.





MY FULL NAME GIVEN NAME: LIZ

DISCLOSURE OF INTERESTS

SURNAME: JEREMY

ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

For further information please read the Office of Local Government's Self help guide for completion of returns

Ensure that wherever you have nothing to declare, that you have selected the word 'NIL' from the drop-drown lists.

RETURN PERIOD: 2021-2022				
A REAL PROPERTY				
A TIP: You must include: (i) either the postal addresses OR particulars of title, i.e. Lot and DP (or SP) of properties anywhere in Australia that you had an interest in at any time during the Return Period; (ii) the Nature of your Interest, i.e. Owner, Part Owner, Lessee, Beneficiary, Occupier or Other				
Address of each parcel of real property in which I had an interest at any time during the Return Period			Nature of my Interest: Select from the drop-down list	
MY PLACE(S) OF RESIDENCE:				
No:	Street	Lot & DP:	Part Owner	
Suburb:		State: NSW		
No:	Street:	Lot & DP:	SELECT FROM LIST BELOW	
Suburb:		State:		
OTHER REA	L PROPERTY POSTAL ADDRESS DE	TAILS:		
No:	Street:	Lot & DP:		
Suburb:		State: NSW	Owner	
No:	Street:	Lot & DP:		
Suburb:		State:	SELECT FROM LIST BELOW	
No:	Street:	Lot & DP:	OF LEGT EDOM LIGT DELICITY	
Suburb:		State:	SELECT FROM LIST BELOW	
No:	Street:	Lot & DP:		
Suburb:		State:	SELECT FROM LIST BELOW	
No:	Street:	Lot & DP:	051 507 500M 107 551 0	
Suburb:		State:	SELECT FROM LIST BELOW	
No:	Street:	Lot & DP:	OF LEGT EDOM LIGT DELIGHT	
Suburb:		State:	SELECT FROM LIST BELOW	

If insufficient space, please attach a schedule to this form.

Please tick if adding an attachment



B SOURCES OF INCOM	IE				
A TIP: Only provide information w	nere the amount of inc	come from an occu	pation, a Trust or othe	er source, exceeded \$500.	
SOURCES OF MY INCOM (sources, not amounts, of income)				ng the Return Period)	
Position Held e.g. Labourer, Cadet, Project Officer, Manager, etc.	Descrip	e and Address o otion of Office he nclude business		Name of Partnership (if applicable))
General Manager	Bellingen Shire Co 33 Hyde Street, Bellingen NSW 24				
SOURCES OF MY INCOM (sources of income, not amount)			he Return Period)		
If you have Nothing to Declare, select	the word 'Nil' in the	adjacent Box	\$	Select option from this list	
NAME AND ADDRESS O A TIP: The 'Settlor' is the name of a		st	NAME AND A	DDRESS OF TRUSTEE	
3 OTHER SOURCES OF M (sources of other income, no		ed at any time du	uring the Return Pen	riod)	
•	cription sufficient to ide			ess activities, welfare payments; ctivity from whom, or the circumstance	es in
If you have Nothing to Declare, select		adjacent Box	\$	Select option from this list	
Rental Income, Sirius Drive Lakewood					
C GIFTS					
A TIP: Only include description of	a single gift or multiple	e gifts from the san	ne donor, the total valu	ue of which exceeded \$500	
If you have Nothing to Declare, select and move to Section D	the word 'Nil' in the	adjacent Box	⇒	NIL	
If you declare a gift then you MUS Leader Governance	T also complete a	Gifts and Benefit	s Declaration Form	available on request from the Grou	up
DESCRIPTION OF EACH GIFT RECEIVE TIME DURING THE RETURN			NAME AND ADDRE	ESS OF GIFT DONOR	

ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

CONTRIBUTIONS TO TRAVEL 溢 A TIP: Relates to the return period Do not include payments by Council for your work-related travel If you have Nothing to Declare, select the word 'Nil' in the adjacent Box NIL and move to Section E NAME AND ADDRESS OF EACH PERSON WHO MADE NAME OF STATES, TERRITORIES GREATER THAN \$250 FINANCIAL OR OTHER OF THE COMMONWEALTH AND CONTRIBUTION TO ANY TRAVEL UNDERTAKEN BY ME DURING THE RETURN PERIOD DATES TRAVEL WAS OTHER COUNTRIES IN WHICH UNDERTAKEN TRAVEL WAS UNDERTAKEN

E INTERESTS AND POSITIONS	IN CORPORATIO	NS	
TIPS: (i) Declare only if your shareholding was gr Shareholder) you held in a Corporation (including not or the position was a paid position			
If you have Nothing to Declare, select the word 'Nil' and move to Section F	in the adjacent Box	•	Select option from this list
If you declare a Position U you held in a Corporation Interests Disclosure Form in the Councillors Dropbo	•	•	MUST complete a Conflict of
NAME AND ADDRESS OF EACH CORPORATION IN WHICH I HAD AN INTEREST OR HELD A POSITION AT ANY TIME DURING THE RETURN PERIOD	NATURE OF INTEREST (IF ANY) EG SHAREHOLDER	DESCRIPTION (POSITION (IF AN EG D RECTOR, COMP SECRETARY	YY) PRINCIPAL OBJECTS OF
	50%	Director	Non Trading Co. Trustee for SMSF
	50%	Director	Small Business
	Shareholder		

F INTERESTS AS A PROPRTY D PROPERTY DEVELOPER	EVELOPER OR A CLOSE	ASSOCIATE OF A
TIPS: (i) Declare whether they were a property of developer, on the return date.	developer, or a close associate of a corporation	on that, or an individual who, is a property
If you have Nothing to Declare, select the word 'Nil' i and move to Section F	in the adjacent Box	NIL
NAME AND ADDRESS OF PROPERTY DEVELOPER	NATURE OF INTEREST (IF ANY) eg SHAREHOLDER	DESCRIPTION OF POSITION (IF ANY) EG DIRECTOR, COMPANY SECRETARY



- A person making a return under clause 4.21 of this code must disclose whether they were a property developer, or a close associate of a
 corporation that, or an individual who, is a property developer, on the return date.
- For the purposes of clause 19 of this schedule:
 - close associate, in relation to a corporation or an individual, has the same meaning as it has in section 53 of the Electoral Funding Act 2018.
 - o property developer has the same meaning as it has in Division 7 of Part 3 of the Electoral Funding Act 2018.

G POSITIONS IN TRADE UNIONS OR PROFESSIONAL OR B	SUSINESS ASSOCIATIONS
A TIP: Do not include general membership but include details of any positions held whether rem	nunerated or not
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section G	NIL
NAME OF EACH TRADE UNION AND EACH PROFESSIONAL OR BUSINESS ASSOCIATION IN WHICH I HELD ANY POSITION (WHETHER REMUNERATED OR NOT) AT ANY TIME DURING THE RETURN PERIOD	DESCRIPTION OF POSITION

	ELECTRONICALLY CO		CIL'S GOVERNANCE COORDINATOR
H DEBTS			
A TIP: You do not need to provide society, credit union or other financial in	information on (i) the amou institution such as for your h	ints; (ii) debts for less than \$50 ome mortgage, credit card or de	00; (iii) debts to any relative, bank, building partment store
If you have Nothing to Declare, select the and move to Section H	ne word 'Nil' in the adjace	ent Box	NIL
NAME AND ADDRESS OF EACH PERSO		REDITOR) TO WHOM I WAS LIA	ABLE TO PAY ANY DEBT AT ANY TIME
NAME OF CREDITO	OR	ADDRE	ESS OF CREDITOR
I DISPOSITIONS OF REA	AL PROPERTY		
the right to repurchase the property; of each disposal of real property by o disposal includes – ogrant of a lease or licence for all mortgage over your land, ogrant of easement over land by	other persons or entities whe Il or part of the land, which you retain the ability to by you) with (i) a lease or look land in favour of you and in favour of you; ur land;	ereby you wholly or partly obtaing to use the land, licence granted to you or a righ	etained the use or benefit of the property or ed the use of the property; Interest for you to repurchase the land, (ii) or an

If you have Nothing to Declare, select the word 'Nil' in the adjacent Box

and move to Section I

- transfer of land to your spouse or by your spouse to a third party whereby you continue to occupy the land; transfer of title of your land subject to you continuing to receive a benefit, e.g. rent from the land.

Should you require more detailed explanation on the information to be provided in this Section, you should refer to Clauses 188(1)
and 188(2) of the Local Government (General) Regulation 2005 or consult your solicitor	

PARTICULARS OF EACH DISPOSITION OF REAL PROPERTY BY ME AT ANY TIME DURING THE RETURN PERIOD AS A RESULT OF WHICH I RETAINED, EITHER WHOLLY OR IN PART, THE USE AND BENEFIT OF THE PROPERTY OR THE RIGHT TO REACQUIRE THE PROPERTY AT A LATER DATE

No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:

2 PARTICULARS OF EACH DISPOSITION OF REAL PROPERTY TO A PERSON BY ANOTHER PERSON UNDER ARRANGEMENTS MADE BY ME, BEING DISPOSITIONS MADE AT ANY TIME DURING THE RETURN PERIOD, AS A RESULT OF WHICH I OBTAINED EITHER WHOLLY OR IN PART, THE USE AND BENEFIT OF THE PROPERTY

No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:

NIL



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J DISCRETIONARY DISCLOSURES	
A TIP: To be completed if you wish to make any additional disc	sclosures
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and go to Sign and Date to complete this Return	NIL

MY SIGNATURE:	
DATE SIGNED:	9 SEPTEMBER 2022

NEXT STEPS:

- Ensure that wherever you had nothing to declare, that you have selected the word 'NIL' from the dropdrown lists.
- Print the form.
- Sign and date the return.
 - Your form should then be forwarded to the Group Leader Governence via either email governance@bellingen.nsw.gov.au or hard copy to 33 Hyde Street, Bellingen NSW 2460

OPTIONAL STATUTORY DECLARATION:

Did you complete the optional Statutory Declaration on the next page?

If 'YES', make sure that you have listed the reasons for completing the form and then have your signature witnessed by a Justice of the Peace before submitting your Disclosure of Interest Form.



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

COMPLETION OF THE FOLLOWING STATUTORY DECLARATION IS OPTIONAL

The declaration should be completed only if you want to withhold your place of living from the version of your Return which is made available for public inspection. Reasons for withholding your place of living must be detailed in the declaration.

STATUTORY DECLARATION

Request for Protection of Privacy (place of living) Local Government Act 1993, Section 739

l,	
of	
in the State of New South Wales.	do solemnly and sincerely declare as follows –
	f Disclosure of Interests and Other Matters that is available, or is to be made available, for public Government Act 1993 be prepared or amended so as to omit or remove any matter that would 'living.
I consider that the disclosure of n my family, at risk for the reason(s	y place of living would place, or places, my personal safety, or the personal safety of members of that –
LIST YOUR REASONS	IERE -
And I make this solemn declar Oaths Act, 1900.	ation conscientiously believing the same to be true and by virtue of the provisions of the
Subscribed and declared at:	
Thisday of	
Thisday of	My Signature
•	
20	My Signature
20	My Signature
20before me:	My Signature a JP for NSW certify
20before me:	My Signature
before me: I,	My Signature a JP for NSW certify JP Registration Number
before me: I,	My Signature a JP for NSW certify JP Registration Number
before me: I,	My Signature a JP for NSW certify JP Registration Number eclarant of the declarant because he/she was wearing a face covering, but I am satisfied that
before me: I,	My Signature a JP for NSW certify (JP Registration Number) eclarant of the declarant because he/she was wearing a face covering, but I am satisfied that ustification for not removing it, and
before me: I,	a JP for NSW certify Country
before me: I,	My Signature a JP for NSW certify certify (JP Registration Number) eclarant of the declarant because he/she was wearing a face covering, but I am satisfied that ustification for not removing it, and on for at least 12 months
before me: I,	a JP for NSW certify Country



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

NOTES FOR COMPLETING THE OPTIONAL STATUTORY DECLARATION

A person's identity can be confirmed with any one of the following approved identification documents, unless the document has expired or been cancelled. However, an Australian passport is acceptable if it expired no more than 2 years ago -

- a driver's licence or permit with a photograph, whether issued in Australia or another country
- a NSW photo card issued under Photo Card Act 2005
- an Australian proof of age card which contains the person's photograph
- an Australian passport (either current or expired less than 2 years ago)
- a passport or similar document with the person's photograph and signature issued by another country or by the United Nations
- a national identity card with the person's photograph and signature issued by another country or the United Nations (with an English language translation if not in English)
- an Australian citizenship certificate
- a foreign citizenship certificate (with an English language translation if not in English)
- a birth certificate or birth extract, whether issued in Australia, another country or by the United Nations (with an English language translation if not in English)
- a Centrelink pension card
- a credit card or passbook
- an account from a bank, building society or credit union, or statement of account up to one year old
- a Medicare card, pension concession card, Department of Veteran's Affairs entitlement card or other entitlement card issued by the Federal or any State Government
- an electoral enrolment card or other evidence of enrolment as an elector up to 2 years old, or
- a student identity card, or a certificate or statement of enrolment up to 2 years old from an educational institution

A copy of an identification document is acceptable if certified as a true copy by:

- any justice of the peace,
- notary public,
- commissioner of the court for taking affidavits,
- Australian legal practitioner authorised to take and receive any affidavit,
- the NSW Registrar-General,
- a Deputy Registrar-General,
- or other person by law authorised to administer an oath.

The certifier and the witness cannot be the same person.



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY. SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

For further information please read the Office of Local Government's Self help guide for completion of returns

Ensure that wherever you have nothing to declare, that you have selected the word 'NIL' from the drop-drown lists.

MY FUL	MY FULL NAME GIVEN NAME: CLARE MOLLY SURNAM		RNAME: ALLEN
	RE	2	
A REA	L PROPERTY		
A TI	P: You must include: (i) either the posta		t and DP (or SP) of properties anywhere in Australia Iterest, i.e. Owner, Part Owner, Lessee, Beneficiary,
Address of Return Period		th I had an interest at any time duri	Nature of my Interest: Select from the drop-down list
MY PLACE	E(S) OF RESIDENCE:		
No:	Street:	Lot & DP:	Part Owner
Suburb:		State:	
	Street	Lot & DP:	Part Owner
Suburb: Erskine		State:	
OTHER R	EAL PROPERTY POSTAL ADD	RESS DETAILS:	
No	Street	Lot & DP:	
Suburb:		State: NSW	Part Owner
No:	Street:	Lot & DP:	CELECT EDOM LIST BELOW
Suburb:		State:	SELECT FROM LIST BELOW
No:	Street:	Lot & DP:	SELECT FROM LIST BELOW
Suburb:		State:	SELECT FROM LIST BELOW
No:	Street:	Lot & DP:	05 507 50011 07 05 011
Suburb:		State:	SELECT FROM LIST BELOW
No:	Street:	Lot & DP:	OF LEAT FROM LIOT RELOW
Suburb:		State:	SELECT FROM LIST BELOW
No:	Street:	Lot & DP:	CELECTEDOM INT DELOW
Suburb:		State:	SELECT FROM LIST BELOW

If insufficient space, please attach a schedule to this form.

Please tick if adding an attachment

B SOURCES OF INCOME		
A TIP: Only provide information where the amount of incom	e from an occupation, a Trust or other source	e, exceeded \$500.
SOURCES OF MY INCOME FROM AN OCCU (sources, not amounts, of income I received from m)		Return Period)
Position Held e.g. Labourer, Cadet, Project Officer, Manager, etc. If self employed inclu	ude business name & business address	Name of Partnership (if applicable)
2 SOURCES OF MY INCOME FROM A TRUST (sources of income, not amounts. I received from a lf you have Nothing to Declare, select the word 'Nii' in the ad	Trust during the Return Period)	NIL
NAME AND ADDRESS OF SETTLOR A TIP: The 'Settlor' is the name of a person who created the Trust	NAME AND ADDRE	SS OF TRUSTEE
3 OTHER SOURCES OF MY INCOME (Sources of other income, not amounts, I received a TIPS: a Other Sources of Income may include income from b You must include a description sufficient to identify which, that income was received.	m rental property, investments, business act	
If you have Nothing to Declare, select the word 'Nil' in the ad	tjacent Box	Refer Below
	Director, book sales, courses	
C GIFTS		
If you have Nothing to Declare, select the word 'Nit' in the ad and move to Section D		NIL
If you declare a gift then you MUST also complete a Giff Leader Governance	its and Benefits Declaration Form availa	ble on request from the Group
DESCRIPTION OF EACH GIFT RECEIVED BY ME AT ANY TIME DURING THE RETURN PERIOD	NAME AND ADDRESS O	F GIFT DONOR

D CONTRIBUTIONS TO TRAVEL		
A TIP: Relates to the return period Do not include payments by Council for your work related.	i travel	
If you have Nothing to Declare, select the word 'Nil' in the ad and move to Section E	fjacent Box	NL
NAME AND ADDRESS OF EACH PERSON WHO MADE GREATER THAN \$250 FINANCIAL OR OTHER CONTRIBUTION TO ANY TRAVEL UNDERTAKEN BY ME DURING THE RETURN PERIOD	DATES TRAVEL WAS UNDERTAKEN	NAME OF STATES, TERRITORIES OF THE COMMONWEALTH AND OTHER COUNTRIES IN WHICH TRAVEL WAS UNDERTAKEN

TIPS: (i) Declare only if your shareholding was gr Shareholder) you held in a Corporation (including no or the position was a paid position	reater than 10% of voting righ ol-for profit corporation) such a	its in the corporation (ii) as Director, whether or no	You must declare any position (no it you held shares in the Corporatio
If you have Nothing to Declare, select the word 'Nil' and move to Section F	in the adjacent Box	S	Select option from this list
tf you declare a Position you held in a Corporati Interests Disclosure Form in the Councillors Dropbo	Property and the second		ST complete a Conflict of
NAME AND ADDRESS OF EACH CORPORATION IN WHICH I HAD AN INTEREST OR HELD A POSITION AT ANY TIME DURING THE RETURN PERIOD	NATURE OF INTEREST (IF ANY) EG SHAREHOLDER	DESCRIPTION OF POSITION (IF ANY) EG DIRECTOR, COMPANY SECRETARY	PRINCIPAL OBJECTS OF CORPORATION (EXCEPT IN CASE OF LISTED COMPANY)
AT ANT TIME DURING THE RETURN PERIOD	10 TV		
AT ANT TIME DURING THE RETURN PERIOD			

TIPS: (i) Declare whether they were a property of		
developer, on the return date.	leveloper, or a close associate of a corpore	ation that, or an individual who, is a propert
If you have Nothing to Declare, select the word 'Nil' and move to Section F	n the adjacent Box	NīL
NAME AND ADDRESS OF PROPERTY DEVELOPER	NATURE OF INTEREST (IF ANY)	DESCRIPTION OF POSITION (IF ANY EG DIRECTOR, COMPANY SECRETARY



- A person making a return under clause 4.21 of this code must disclose whether they were a property developer, or a close associate of a corporation that, or an individual who, is a property developer, on the return date.
- For the purposes of clause 19 of this schedule:

 o close associate, in relation to a corporation or an individual, has the same meaning as it has in section 53 of the Electoral Funding Act 2018,
 - property developer has the same meaning as it has in Division 7 of Part 3 of the Electoral Funding Act 2018.

A TIP: Do not include general membership but include details of any positions held whether re	munerated or not
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section G	Refer Below
NAME OF EACH TRADE UNION AND EACH PROFESSIONAL OR BUSINESS ASSOCIATION IN WHICH I HELD ANY POSITION (WHETHER REMUNERATED OR NOT) AT ANY TIME DURING THE RETURN PERIOD	DESCRIPTION OF POSITION
	Member
	Welliber

DISCLOSURE OF INTERESTS ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH

			COUNCILS	GOVERNANCE COORDINATOR
H DE	втѕ			
A TI societ	P: You do not need to provide information, credit union or other financial institution.	on on (i) the amounts; (ii) debts such as for your home mortgage	for less than \$500; (iii) credit card or departm	debts to any relative, bank, buildin
	Nothing to Declare, select the word 't to Section H	Nil' in the adjacent Box	٥	NIL
NAME AN	ID ADDRESS OF EACH PERSON OR OR	GANISATION (CREDITOR) TO DURING THE RETURN PERI		TO PAY ANY DEBT AT ANY TIME
	NAME OF CREDITOR		ADDRESS O	F CREDITOR
I DIS	POSITIONS OF REAL PR	ROPERTY		
• disp	osal includes — grant of a lease or licence for all or part of mortgage over your land, grant of easement over land by which you sale of land (or grant of option by you) w	retain the ability to use the land	l, d to you or a right for y	you to repurchase the land, (ii) or a
creatran	easement or covenant over the land in fav- ation of an option to purchase land in favour ation by you of a charge over your land; sfer by you of an interest in your land to a laster of land to your spouse or by your spousefer of title of your land subject to you conti	our of you r of you; Frustee of a Trust of which you a se to a third parly whereby you	continue to occupy the la	
crea tran tran from have	easement or covenant over the land in fav ation of an option to purchase land in favour ation by you of a charge over your land; after by you of an interest in your land to a 1 after of land to your spouse or by your spous	rof you r of you; Frustee of a Trust of which you a se to a third party whereby you inuing to receive a benefit, e.g., r	continue to occupy the la	
crea crea tran tran tran tran tran tran and move	easement or covenant over the land in favoration of an option to purchase land in favoration by you of a charge over your land; sfer by you of an interest in your land to a 1 sfer of land to your spouse or by your spousefer of title of your land subject to you conties. Nothing to Declare, select the word 'not be section I	vour of you r of you; Frustee of a Trust of which you a se to a third party whereby you inuing to receive a benefit, e.g. re Nil' in the adjacent Box	ent from the land.	Refer Below u should refer to Clauses 188(1)
• crea • crea • tran • tran • tran • tran • Iran If you have and move Should yo	easement or covenant over the land in favoration of an option to purchase land in favoration by you of a charge over your land; sfer by you of an interest in your land to a 1 sfer of land to your spouse or by your spousefer of title of your land subject to you conties. Nothing to Declare, select the word 'not be section I	rour of you; r of you; Frustee of a Trust of which you a se to a third party whereby you o inuing to receive a benefit, e.g., n Nil' in the adjacent Box In the information to be provid vernment (General) Regulation OSITION OF REAL PRO OF WHICH I RETAINED, I	led in this Section, you con 2005 or consult you	Refer Below ou should refer to Clauses 188(1) our solicitor T ANY TIME DURING THE OR IN PART, THE USE AND
• crea • crea • tran • tran • tran • tran • tran Sif you have and move Should yo	easement or covenant over the land in favoration of an option to purchase land in favoration by you of a charge over your land; sfer by you of an interest in your land to a ser of land to your spouse or by your spouser of title of your land subject to you conties Nothing to Declare, select the word 'not section I u require more detailed explanation on and 188(2) of the Local Government	rour of you; r of you; Frustee of a Trust of which you a se to a third party whereby you o inuing to receive a benefit, e.g., n Nil' in the adjacent Box In the information to be provid vernment (General) Regulation OSITION OF REAL PRO OF WHICH I RETAINED, I	led in this Section, you con 2005 or consult you	Refer Below ou should refer to Clauses 188(1) our solicitor T ANY TIME DURING THE OR IN PART, THE USE AND
• crea • crea • tran • tran • tran • tran Should yo	easement or covenant over the land in favoration of an option to purchase land in favoration by you of a charge over your land; sfer by you of an interest in your land to a 1 sfer of land to your spouse or by your spouser of title of your land subject to you contine Nothing to Declare, select the word 'Not Section I u require more detailed explanation on and 188(2) of the Local Go ARTICULARS OF EACH DISPO ETURN PERIOD AS A RESULT CENEFIT OF THE PROPERTY OR	rour of you; r of you; Frustee of a Trust of which you a se to a third party whereby you o nuing to receive a benefit, e.g. n Nil' in the adjacent Box In the information to be provid vernment (General) Regulation DESITION OF REAL PRO DESITI	ent from the land. ed in this Section, you on 2005 or consult you perty BY ME A EITHER WHOLLY UIRE THE PROPE	Refer Below U should refer to Clauses 188(1) OUR Solicitor T ANY TIME DURING THE OR IN PART, THE USE AND RTY AT A LATER DATE

No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARO COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

A TIP: To be completed if you wish to make a	ny additional disclosures	
If you have Nothing to Declare, select the word 'Nil' in the and go to Sign and Date to complete this Return	e adjacent Box	NIL

MY SIGNATURE:	
DATE SIGNED:	29.9.2022

NEXT STEPS:

- Ensure that wherever you had nothing to declare, that you have selected the word 'NIL' from the dropdrown lists.
- Print the form.
- Sign and date the return.
 - Your form should then be forwarded to the Group Leader Governence via either email governance@bellingen.nsw.gov.au or hard copy to 33 Hyde Street, Bellingen NSW 2460

OPTIONAL STATUTORY DECLARATION:

Did you complete the optional Statutory Declaration on the next page?

If 'YES', make sure that you have listed the reasons for completing the form and then have your signature witnessed by a Justice of the Peace before submitting your Disclosure of Interest Form.



MY FULL NAME GIVEN NAME: Stephen

DISCLOSURE OF INTERESTS

SURNAME: Allan

ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

For further information please read the Office of Local Government's Self help guide for completion of returns

Ensure that wherever you have nothing to declare, that you have selected the word 'NIL' from the drop-drown lists.

	RETURN PE	ERIOD: 2021-2022	
A REAL	PROPERTY		
that you	You must include: (i) either the postal addresses Of a had an interest in at any time during the Return Perior or Other	R particulars of title, i.e. Lot and DP d; (ii) the Nature of your Interest, i.e	(or SP) of properties anywhere in Australia e. Owner, Part Owner, Lessee, Beneficiary,
	ach parcel of real property in which I had an in	nterest at any time during the	Nature of my Interest: Select from the drop-down list
MY PLACE	S) OF RESIDENCE:		
			Owner
No:	Street:	Lot & DP:	SELECT FROM LIST BELOW
Suburb:		State:	
OTHER REA	AL PROPERTY POSTAL ADDRESS DETA	AILS:	
			Owner
			Owner
			Owner
			Part Owner
			Owner
			SELECT FROM LIST BELOW
	If insufficient space, please attach	a schedule to this form.	ease tick if adding an attachment



B SOURCES OF INCOM	= 1E		
		from an occupation, a Trust or other source, e	exceeded \$500.
1 SOURCES OF MY INCOME (sources, not amounts, of income)		PATION(S) Occupation(s) at any time during the Ret	turn Period)
Position Held e.g. Labourer, Cadet, Project Officer, Manager. etc	Description	d Address of Employer or of Office held (if applicable) le business name & business address	Name of Partnership (if applicable)
Mayor	Bellingen Shire Counci 33 Hyde Street, Bellingen NSW 2460		
Locum Pharmacist	Self employed Contrac	tor	
2 SOURCES OF MY INCOM (sources of income, not amount If you have Nothing to Declare, select	unts, I received from a Ti	rust during the Return Period,)	NIL
NAME AND ADDRESS O		NAME AND ADDRESS	OF TRUSTEE
(4			
⇒ 3 OTHER SOURCES OF M (sources of other income, no		any time during the Return Period)	
~	cription sufficient to identify	rental property, investments, business activitie the person, property or business activity from	
If you have Nothing to Declare, select	the word 'Nil' in the adja	cent Box 🔾	Refer Below
Rental property		Rental property- SMSF	
Share portfolio & fixed term deposit in	vestments-attached	Share portfolio & fixed term deposit in	vestments-SMSF;attached
C GIFTS			

A TIP: Only include description of a single gift or multiple gifts from	n the same donor, the total value of which exceeded \$500
f you have Nothing to Declare, select the word 'Nil' in the adjacent and move to Section D	t Box NIL
f you declare a gift U then you MUST also complete a Gifts and leader Governance	Benefits Declaration Form available on request from the G
DESCRIPTION OF EACH GIFT RECEIVED BY ME AT ANY TIME DURING THE RETURN PERIOD	NAME AND ADDRESS OF GIFT DONOR



∰ A TIP:		
 Relates to the return period Do not include payments by Council for your work-relate 	d travel	
If you have Nothing to Declare, select the word 'Nil' in the a	djacent Box	NIL
NAME AND ADDRESS OF EACH PERSON WHO MADE GREATER THAN \$250 FINANCIAL OR OTHER CONTRIBUTION TO ANY TRAVEL UNDERTAKEN BY ME DURING THE RETURN PERIOD	DATES TRAVEL WAS UNDERTAKEN	NAME OF STATES, TERRITORIES OF THE COMMONWEALTH AND OTHER COUNTRIES IN WHICH TRAVEL WAS UNDERTAKEN

TIPS: (i) Declare only if your shareholding was gr Shareholder) you held in a Corporation (including no or the position was a paid position			
If you have Nothing to Declare, select the word 'Nil' and move to Section F	in the adjacent Box	0	Refer Below
If you declare a Position $oldsymbol{0}$ you held in a Corporation	on that had a relationship	with Council, you ML	JST complete a Conflict of
Interests Disclosure Form in the Councillors Dropbo	x or located on Council's	Intranet	
NAME AND ADDRESS OF EACH CORPORATION IN WHICH I HAD AN INTEREST OR HELD A POSITION AT ANY TIME DURING THE RETURN PERIOD	NATURE OF INTEREST (IF ANY) EG SHAREHOLDER	DESCRIPTION OF POSITION (IF ANY) EG DIRECTOR, COMPANY SECRETARY	PRINCIPAL OBJECTS OF CORPORATION (EXCEPT IN CASE OF LISTED COMPANY
NAME AND ADDRESS OF EACH CORPORATION IN WHICH I HAD AN INTEREST OR HELD A POSITION	NATURE OF INTEREST (IF ANY)	DESCRIPTION OF POSITION (IF ANY) EG DIRECTOR, COMPANY	CORPORATION (EXCEPT IN

PROPERTY DEVELOPER		ASSOCIATE OF A
TIPS: (i) Declare whether they were a property de developer, on the return date.	eveloper, or a close associate of a corpora	ation that, or an individual who, is a propert
If you have Nothing to Declare, select the word 'Nil' in and move to Section F	the adjacent Box	NIL
NAME AND ADDRESS OF PROPERTY DEVELOPER	NATURE OF INTEREST (IF ANY)	DESCRIPTION OF POSITION (IF ANY) EG DIRECTOR, COMPANY SECRETARY

- A person making a return under clause 4.21 of this code must disclose whether they were a property developer, or a close associate of a
 corporation that, or an individual who, is a property developer, on the return date.
- For the purposes of clause 19 of this schedule:
 - close associate, in relation to a corporation or an individual, has the same meaning as it has in section 53 of the Electoral Funding Act 2018
 - o property developer has the same meaning as it has in Division 7 of Part 3 of the Electoral Funding Act 2018.

A TIP: Do not include general membership but include details of any positions held whether re	munerated or not
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section G	Refer Below
NAME OF EACH TRADE UNION AND EACH PROFESSIONAL OR BUSINESS ASSOCIATION IN WHICH I HELD ANY POSITION (WHETHER REMUNERATED OR NOT) AT ANY TIME DURING THE RETURN PERIOD	DESCRIPTION OF POSITION
Pharmaceutical Society of Australia	member

		TROMONELT COMPLETE TH		S GOVERNANCE COORDINATOR
H DEE	втѕ	50		
A TII society	P: You do not need to provide information, credit union or other financial institution s	on on (i) the amounts; (ii) debt such as for your home mortgag	s for less than \$500; e, credit card or depar	(iii) debts to any relative, bank, building tment store
	Nothing to Declare, select the word 'no Section H	Nil' in the adjacent Box	9	Refer Below
NAME AN	D ADDRESS OF EACH PERSON OR OR	GANISATION (CREDITOR) TO DURING THE RETURN PER		E TO PAY ANY DEBT AT ANY TIME
	NAME OF CREDITOR	-	ADDRESS	S OF CREDITOR
ı Disi	POSITIONS OF REAL PR	OPERTY		
creat creat trans trans	grant of a lease or licence for all or part of mortgage over your land, grant of easement over land by which you sale of land (or grant of option by you) we easement or covenant over the land in favour tion of an option to purchase land in favour tion by you of a charge over your land; after by you of an interest in your land to a Tafer of land to your spouse or by your spousifer of title of your land subject to you conting	retain the ability to use the land ith (i) a lease or licence grants our of you of you; rustee of a Trust of which you a se to a third party whereby you	ed to you or a right fo are a beneficiary; continue to occupy th	
If you have and move to	Nothing to Declare, select the word 'No Section I	lil' in the adjacent Box	0	NIL
Should you	ı require more detailed explanation on and 188(2) of the Local Gov			
RE	ARTICULARS OF EACH DISPO ETURN PERIOD AS A RESULT O ENEFIT OF THE PROPERTY OR	F WHICH I RETAINED,	EITHER WHOLL	YOR IN PART, THE USE AND
No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:
UN RE	ARTICULARS OF EACH DISPOS NDER ARRANGEMENTS MADE ETURN PERIOD, AS A RESULT C ENEFIT OF THE PROPERTY	BY ME, BEING DISPO	SITIONS MADE	AT ANY TIME DURING THE
No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:

State:

Lot & DP:

Suburb:

No:

Street:



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

J DISCRETIONARY DISCLOSURES A TIP: To be completed if you wish to make a		
If you have Nothing to Declare, select the word 'Nil' in the and go to Sign and Date to complete this Return	adjacent Box	NIL

MY SIGNATURE:	Ø		
DATE SIGNED:		20/9/22	

NEXT STEPS:

- Ensure that wherever you had nothing to declare, that you have selected the word 'NIL' from the dropdrown lists.
- Print the form.
- Sign and date the return.
 - Your form should then be forwarded to the Group Leader Governence via either email governance@bellingen.nsw.gov.au or hard copy to 33 Hyde Street, Bellingen NSW 2460

OPTIONAL STATUTORY DECLARATION:

Did you complete the optional Statutory Declaration on the next page?

If 'YES', make sure that you have listed the reasons for completing the form and then have your signature witnessed by a Justice of the Peace before submitting your Disclosure of Interest Form.



MY FULL NAME

DISCLOSURE OF INTERESTS

SURNAME: FAIRWEATHER

ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

For further information please read the

Office of Local Government's Self help guide for completion of returns

GIVEN NAME: ELIZABETH

Ensure that wherever you have nothing to declare, that you have selected the word 'NIL' from the drop-drown lists.

RETURN PERIOD: 2021-2022					
A REAL PROPERTY					
that you	A TIP: You must include: (i) either the postal addresses OR particulars of title, i.e. Lot and DP (or SP) of properties anywhere in Australia that you had an interest in at any time during the Return Period; (ii) the Nature of your Interest, i.e. Owner, Part Owner, Lessee, Beneficiary, Occupier or Other				
Address of each parcel of real property in which I had an interest at any time during the Return Period			Nature of my Interest: Select from the drop-down list		
MY PLACE(S) OF RESIDENCE:					
No:	No: Lot & DP:		Part Owner		
Suburb:		State: NSW			
No:	Street:	Lot & DP:	SELECT FROM LIST BELOW		
Suburb:		State:			
OTHER REAL PROPERTY POSTAL ADDRESS DETAILS:					
No:	Street:	Lot & DP:	CELECT EDOM LICT DELOW		
Suburb:		State:	SELECT FROM LIST BELOW		
No:	Street:	Lot & DP:	OF LEGT EDOM LIGT DELOW		
Suburb:		State:	SELECT FROM LIST BELOW		
No:	Street:	Lot & DP:	OF LEGT EDOM LIGT DELIGIM		
Suburb:		State:	SELECT FROM LIST BELOW		
No:	Street:	Lot & DP:	OF LEGT EDOM LIGT DELICIM		
Suburb:		State:	SELECT FROM LIST BELOW		
No:	Street:	Lot & DP:	OF LEAT EDOM LIOT DELOW		
Suburb:		State:	SELECT FROM LIST BELOW		
No:	Street:	Lot & DP:	OF LEGT EDOM LIGT DELIGHT		
Suburb:		State:	SELECT FROM LIST BELOW		

Page 1 of 6

If insufficient space, please attach a schedule to this form.

Please tick if adding an attachment

B SOURCES OF INCOM	1E				
A TIP: Only provide information where the amount of income from an occupation, a Trust or other source, exceeded \$500.					
SOURCES OF MY INCOME (sources, not amounts, of income)			at any time durin	g the Re	turn Period)
Position Held e.g. Labourer, Cadet, Project Officer, Manager, etc.	Descripti If self employed inc		(if applicable)	ddress	Name of Partnership (if applicable)
Consultant	EM Fairweather (So	ole trader)			
2 SOURCES OF MY INCOM (sources of income, not amount in you have Nothing to Declare, select)	unts, I received from a	a Trust during the	Return Period)	Se	lect option from this list
NAME AND ADDRESS O	F SETTLOR				
A TIP: The 'Settlor' is the name of a person who created the Trust NAME AND ADDRESS OF TRUSTEE					OF TRUSTEE
3 OTHER SOURCES OF MY INCOME (Sources of other income, not amounts, I received at any time during the Return Period)					
TIPS: a Other Sources of Incom b You must include a deswhich, that income was	cription sufficient to iden				es, welfare payments; n whom, or the circumstances in
If you have Nothing to Declare, select	the word 'Nil' in the a	djacent Box	=		Refer Below
C GIFTS					
A TIP: Only include description of	a single gift or multiple ç	gifts from the same	donor, the total valu	ue of which	n exceeded \$500
If you have Nothing to Declare, select and move to Section D	the word 'Nil' in the a	djacent Box	\$		NIL
If you declare a gift then you MUS Leader Governance	ST also complete a Gi	ifts and Benefits I	Declaration Form	available	on request from the Group
DESCRIPTION OF EACH GIFT RECEIVE TIME DURING THE RETURN			NAME AND ADDRE	ESS OF G	IFT DONOR

D CONTRIBUTIONS TO TRAVEL				
 A TIP: Relates to the return period Do not include payments by Council for your work-related travel 				
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section E				
NAME AND ADDRESS OF EACH PERSON WHO MADE GREATER THAN \$250 FINANCIAL OR OTHER CONTRIBUTION TO ANY TRAVEL UNDERTAKEN BY ME DURING THE RETURN PERIOD UNDERTAKEN UNDERTAKEN		NAME OF STATES, TERRITORIES OF THE COMMONWEALTH AND OTHER COUNTRIES IN WHICH TRAVEL WAS UNDERTAKEN		

E INTERESTS AND POSITIONS IN CORPORATIONS				
TIPS: (i) Declare only if your shareholding was greater than 10% of voting rights in the corporation (ii) You must declare any position (not Shareholder) you held in a Corporation (including not-for-profit corporation) such as Director, whether or not you held shares in the Corporation or the position was a paid position				
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section F				
If you declare a Position you held in a Corporation that had a relationship with Council, you MUST complete a Conflict of Interests Disclosure Form in the Councillors Dropbox or located on Council's Intranet				
NAME AND ADDRESS OF EACH CORPORATION IN WHICH I HAD AN INTEREST OR HELD A POSITION AT ANY TIME DURING THE RETURN PERIOD NATURE OF INTEREST POSITION (IF ANY) (IF ANY) EG SHAREHOLDER DESCRIPTION OF POSITION (IF ANY) EG D RECTOR, COMPANY SECRETARY CASE OF LISTED COMPAN				
Fairweather Family Superannation Member Director			Self-managed Superannuation Fund	

F INTERESTS AS A PROPRTY DEVELOPER OR A CLOSE ASSOCIATE OF A PROPERTY DEVELOPER					
TIPS: (i) Declare whether they were a property developer, or a close associate of a corporation that, or an individual who, is a property developer, on the return date.					
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section F					
NAME AND ADDRESS OF PROPERTY DEVELOPER NATURE OF INTEREST (IF ANY) eg SHAREHOLDER			SCRIPTION OF POSITION (IF ANY) EG DIRECTOR, COMPANY SECRETARY		
	D0-60	•			



- A person making a return under clause 4.21 of this code must disclose whether they were a property developer, or a close associate of a
 corporation that, or an individual who, is a property developer, on the return date.
- · For the purposes of clause 19 of this schedule:
 - close associate, in relation to a corporation or an individual, has the same meaning as it has in section 53 of the Electoral Funding Act 2018.
 - o property developer has the same meaning as it has in Division 7 of Part 3 of the Electoral Funding Act 2018.

G POSITIONS IN TRADE UNIONS OR PROFESSIONAL OR BUSINESS ASSOCIATION				
A TIP: Do not include general membership but include details of any positions held whether remunerated or not				
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section G				
NAME OF EACH TRADE UNION AND EACH PROFESSIONAL OR BUSINESS ASSOCIATION IN WHICH I HELD ANY POSITION (WHETHER REMUNERATED OR NOT) AT ANY TIME DURING THE RETURN PERIOD	DESCRIPTION OF POSITION			

H DEB	rs				
A TIP: You do not need to provide information on (i) the amounts; (ii) debts for less than \$500; (iii) debts to any relative, bank, building society, credit union or other financial institution such as for your home mortgage, credit card or department store					
If you have N and move to	lothing to Declare, select the word 'Nil' in th Section H	ne adjacent Box	N	IL	
NAME AND	ADDRESS OF EACH PERSON OR ORGANISA DURI	TION (CREDITOR) TO WHO	M I WAS LIABLE TO PAY ANY DI	EBT AT ANY TIME	
	NAME OF CREDITOR		ADDRESS OF CREDITOR		
I DISP	OSITIONS OF REAL PROPE	RTY			
of each the right the right the right the right of each dispose of growth of growth the right t	You must disclose details: In disposal of real property since your last returning to repurchase the property; In disposal of real property by other persons or end includes— I rant of a lease or licence for all or part of the land ortgage over your land, I rant of easement over land by which you retain to alle of land (or grant of option by you) with (i) a lasement or covenant over the land in favour of your of an option to purchase land in favour of your by you of a charge over your land; I re roy you of an interest in your land to a Trustee of land to your spouse or by your spouse to a last of title of your land subject to you continuing to lothing to Declare, select the word 'Nil' in the	ntities whereby you wholly or partities whereby you wholly or partition, he ability to use the land, lease or licence granted to you of a Trust of which you are a bathird party whereby you continuo receive a benefit, e.g. rent from	ourtly obtained the use of the proposition or a right for you to repurchas eneficiary; ue to occupy the land; on the land.	erty;	
and move to	Section I		.,		
Should you require more detailed explanation on the information to be provided in this Section, you should refer to Clauses 188(1) and 188(2) of the Local Government (General) Regulation 2005 or consult your solicitor					
RE	RTICULARS OF EACH DISPOSITIO FURN PERIOD AS A RESULT OF WH NEFIT OF THE PROPERTY OR THE F	IICH I RETAINED, EITH	ER WHOLLY OR IN PART	, THE USE AND	
No:	Street:	Lot & DP:	Suburb:	State:	
No:	Street:	Lot & DP:	Suburb:	State:	
No:	Street:	Lot & DP:	Suburb:	State:	
UNI RE	RTICULARS OF EACH DISPOSITION DER ARRANGEMENTS MADE BY M FURN PERIOD, AS A RESULT OF WINNEFIT OF THE PROPERTY	ME, BEING DISPOSITION	ONS MADE AT ANY TIM	E DURING THE	
No:	Street:	Lot & DP:	Suburb:	State:	
No:	Street:	Lot & DP:	Suburb:	State:	
No:	Street:	Lot & DP:	Suburb:	State:	



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

J DISCRETIONARY DISCLOSURES			
A TIP: To be completed if you wish to make any additional disclosures			
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and go to Sign and Date to complete this Return			

MY SIGNATURE:	
DATE SIGNED:	09/09/2022

NEXT STEPS:

- Ensure that wherever you had nothing to declare, that you have selected the word 'NIL' from the dropdrown lists.
- Print the form.
- · Sign and date the return.
 - Your form should then be forwarded to the Project Manager, Mid North Coast Joint Organisation at projectmanager@mncjo.nsw.gov.au



MY FULL NAME | GIVEN NAME: PETA

DISCLOSURE OF INTERESTS

SURNAME: PINSON

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For further information please read the Office of Local Government's Self help guide for completion of returns

Ensure that wherever you have nothing to declare, that you have selected the word 'NIL' from the drop-drown lists.

RETURN PERIOD: 2021-2022				
A REAL PROPERTY		I sugare		
A TIP: You must include: (i) either the postal address that you had an interest in at any time during the Return Occupier or Other	ses OR particulars of title, i.e. Lot and DP Period; (ii) the Nature of your Interest, i.e.	(or SP) of properties anywhere in Australia e. Owner, Part Owner, Lessee, Beneficiary,		
Address of each parcel of real property in which I had Return Period	an interest at any time during the	Nature of my Interest: Select from the drop-down list		
MY PLACE OF RESIDENCE:		an galabian		
No:	Lot & DP:	Owner		
Suburb:	State: NSW			
OTHER REAL PROPERTY POSTAL ADDRESS I	DETAILS:			
No Street:	DP:	Ded Ourses		
Suburb: Wauchope	State: NSW	Part Owner		
No: Street:	Lot & DP:	0		
Suburb: Wauchope	State: NSW	Owner		
No: Street:	Lot & DP:	0		
Suburb: Wauchope	State: NSW	Owner		

If insufficient space, please attach a schedule to this form.

Please tick if adding an attachment

ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

SOURCES OF INCOME A TIP: Only provide information where the amount of income from an occupation, a Trust or other source, exceeded \$500. 1 SOURCES OF MY INCOME FROM AN OCCUPATION(S) (sources, not amounts, of income I received from my Occupation(s) at any time during the Return Period) Name and Address of Employer or Position Held Name of Partnership Description of Office held (if applicable) e.g. Labourer, Cadet, Project Officer, Manager, (if applicable) etc If self employed include business name & business address MNC Joint Organisation N/A Chairperson / Member C/- Bellingen Shire Council 33 Hyde Street Bellingen NSW 2460 Port Macquarie-Hastings Council N/A Mayor 17 Burrawan Street Port Macquarie NSW 2444 Stabilcorp Pty Ltd Officer N/A 37 Commerce Street Wauchope NSW 2446 2 SOURCES OF MY INCOME FROM A TRUST (sources of income, not amounts, I received from a Trust during the Return Period) NIL If you have Nothing to Declare, select the word 'Nil' in the adjacent Box NAME AND ADDRESS OF SETTLOR NAME AND ADDRESS OF TRUSTEE A TIP: The 'Settlor' is the name of a person who created the Trust 3 OTHER SOURCES OF MY INCOME (Sources of other income, not amounts, I received at any time during the Return Period) 新TIPS: a Other Sources of Income may include income from rental property, investments, business activities, welfare payments; You must include a description sufficient to identify the person, property or business activity from whom, or the circumstances in which, that income was received.

C GIFTS		
A TIP: Only include description of a single gift or multiple gifts from	om the same donor, the total val	ue of which exceeded \$500
If you have Nothing to Declare, select the word 'Nil' in the adjace and move to Section D	ent Box	Select option from this list
If you declare a gift U then you MUST also complete a Gifts an Leader Governance	d Benefits Declaration Form	available on request from the Grou
DESCRIPTION OF EACH GIFT RECEIVED BY ME AT ANY TIME DURING THE RETURN PERIOD	NAME AND ADDR	ESS OF GIFT DONOR
NIL re MNC Joint Organisation	5	

If you have Nothing to Declare, select the word 'Nil' in the adjacent Box

NIL

ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

CONTRIBUTIONS TO TRAVEL **公 A TIP:** Relates to the return period Do not include payments by Council for your work related travel If you have Nothing to Declare, select the word 'Nil' in the adjacent Box NIL and move to Section E NAME AND ADDRESS OF EACH PERSON WHO MADE NAME OF STATES, TERRITORIES GREATER THAN \$250 FINANCIAL OR OTHER OF THE COMMONWEALTH AND CONTRIBUTION TO ANY TRAVEL UNDERTAKEN BY ME OTHER COUNTRIES IN WHICH DATES TRAVEL WAS DURING THE RETURN PERIOD UNDERTAKEN TRAVEL WAS UNDERTAKEN

E INTERESTS AND POSITIONS	IN CORPORATIO	ONS	
TIPS: (i) Declare only if your shareholding was gr Shareholder) you held in a Corporation (including no or the position was a paid position	reater than 10% of voting right tor profit corporation) such	ats in the corporation (ii) as Director, whether or no	You must declare any position (not tyou held shares in the Corporation
If you have Nothing to Declare, select the word 'Nil' and move to Section F	in the adjacent Box	>	Select option from this list
If you declare a Position you held in a Corporation you held in a Corporation Interests Disclosure Form in the Councillors Dropbo			ST complete a Conflict of
NAME AND ADDRESS OF EACH CORPORATION IN WHICH I HAD AN INTEREST OR HELD A	NATURE OF INTEREST (IF ANY)	DESCRIPTION OF POSITION (IF ANY) EG DIRECTOR, COMPANY	PRINCIPAL OBJECTS OF CORPORATION (EXCEPT IN
Stabilcorp Pty Ltd 37 Commerce Street Wauchope NSW 2446	Shareholder	N/A	Road Maintenance & Construction Services
Coastal Asphalt & Civil Constructions Pty Ltd 37 Commerce Street Wauchope NSW 2446	Shareholder	N/A	Road Maintenance & Construction Services
Diveva Pty Ltd Superannuation Fund 59 Smth Street Kempsey NSW 2440	Member	Trustee	Self-Managed Superannuation Fund

PROPERTY DEVELOPER	EVELOPER OR A CLOSE	ASSOCIATE OF A
TIPS: (i) Declare whether they were a property d developer, on the return date.	eveloper, or a close associate of a corpora	ation that, or an individual who, is a proper
If you have Nothing to Declare, select the word 'Nil' in and move to Section F	n the adjacent Box	NIL
NAME AND ADDRESS OF PROPERTY DEVELOPER	NATURE OF INTEREST (IF ANY)	DESCRIPTION OF POSITION (IF ANY EG DIRECTOR, COMPANY SECRETARY

- A person making a return under clause 4.21 of this code must disclose whether they were a property developer, or a close associate of a
 corporation that, or an individual who, is a property developer, on the return date.
- For the purposes of clause 19 of this schedule:
 - close associate, in relation to a corporation or an individual, has the same meaning as it has in section 53 of the Electoral Funding Act 2018.



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

property developer has the same meaning as it has in Division 7 of Part 3 of the Electoral Funding Act 2018.

G POSITIONS IN TRADE UNIONS OR PROFESSIONAL OR BUSINESS ASSOCIATION				
ther remunerated or not				
NIL				
DESCRIPTION OF POSITION				

H DEBTS		
A TIP: You do not need to provide information on (i) the a society, credit union or other financial institution such as for you	mounts; (ii) debts for less than \$5 ur home mortgage, credit card or d	00; (iii) debts to any relative, bank, buildir epartment store
If you have Nothing to Declare, select the word 'Nil' in the adj and move to Section H	jacent Box	Select option from this list
NAME AND ADDRESS OF EACH PERSON OR ORGANISATION DURING THE	(CREDITOR) TO WHOM I WAS L HE RETURN PERIOD	IABLE TO PAY ANY DEBT AT ANY TIME
NAME OF CREDITOR	ADDR	ESS OF CREDITOR
Stabilcorp Pty Ltd		

DISPOSITIONS OF REAL PROPERTY



- of each disposal of real property since your last return was made by which you wholly or partly retained the use or benefit of the property or the right to repurchase the property;
- of each disposal of real property by other persons or entities whereby you wholly or partly obtained the use of the property;
- disposal includes
 - grant of a lease or licence for all or part of the land,
 - o mortgage over your land,
 - o grant of easement over land by which you retain the ability to use the land,
 - o sale of land (or grant of option by you) with (i) a lease or licence granted to you or a right for you to repurchase the land, (ii) or an easement or covenant over the land in favour of you
- creation of an option to purchase land in favour of you;
- creation by you of a charge over your land;
- transfer by you of an interest in your land to a Trustee of a Trust of which you are a beneficiary;
- transfer of land to your spouse or by your spouse to a third party whereby you continue to occupy the land;
- transfer of title of your land subject to you continuing to receive a benefit, e.g. rent from the land.

If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section I

Should you require more detailed explanation on the information to be provided in this Section, you should refer to Clauses 188(1) and 188(2) of the Local Government (General) Regulation 2005 or consult your solicitor

1 PARTICULARS OF EACH DISPOSITION OF REAL PROPERTY BY ME AT ANY TIME DURING THE RETURN PERIOD AS A RESULT OF WHICH I RETAINED, EITHER WHOLLY OR IN PART, THE USE AND BENEFIT OF THE PROPERTY OR THE RIGHT TO REACQUIRE THE PROPERTY AT A LATER DATE

No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:

ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

2 PARTICULARS OF EACH DISPOSITION OF REAL PROPERTY TO A PERSON BY ANOTHER PERSON UNDER ARRANGEMENTS MADE BY ME, BEING DISPOSITIONS MADE AT ANY TIME DURING THE RETURN PERIOD, AS A RESULT OF WHICH I OBTAINED EITHER WHOLLY OR IN PART, THE USE AND BENEFIT OF THE PROPERTY

Lot & DP: Suburb: Street: State: No:

J DISCRETIONARY DISCLOSURES	
A TIP: To be completed if you wish to make any additional disclosures	
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and go to Sign and Date to complete this Return	NIL

MY SIGNATURE: DATE SIGNED: 29 SEPTEMBER 2022



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

OPTIONAL STATUTORY DECLARATION:

Did you complete the optional Statutory Declaration on the next page?

If 'YES', make sure that you have listed the reasons for completing the form and then have your signature witnessed by a Justice of the Peace before submitting your Disclosure of Interest Form.



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

COMPLETION OF THE FOLLOWING STATUTORY DECLARATION IS OPTIONAL

The declaration should be completed only if you want to withhold your place of living from the version of your Return which is made available for public inspection. Reasons for withholding your place of living must be detailed in the declaration.

STATUTORY DECLARATION

Request for Protection of Privacy (place of living) Local Government Act 1993, Section 739

I, Peta Pinson	
of 3 Mahala Close, Bonny Hills, NSW, 2445	
in the State of New South Wales, do solemnly and sincerely declare as follows –	
I request that my Annual Return of Disclosure of Interests and Other Matters that is inspection by or under the Local Government Act 1993 be prepared or amended disclose, or discloses, my place of living.	
I consider that the disclosure of my place of living would place, or places, my person my family, at risk	nal safety, or the personal safety of members of
LIST YOUR REASONS HERE - if this information about my hor interest.	me address is disclosed in the return of
And I make this solemn declaration conscientiously believing the same to be Oaths Act, 1900.	e true and by virtue of the provisions of the
Subscribed and declared at: Port Macquarie	
This 29 th day of September 2022	lyby Olgitature
before me:	
I, SUS an DUNN a JP for NSW a JP for NSW	(JP Registration Number) certify
(Full name of JP)	(JP Registration Number)
(Tick a box that applies) 1 I saw the face of the declarant	
I did not see the face of the declarant because he/she was wearing he/she had a special justification for not removing it, and	ng a face covering, but I am satisfied that
(Tick a box that applies)	
2 I have known the person for at least 12 months	
☐ I confirmed the person's identity with(Describe identific	cation document relied on [PTO)
·	
Sugar Dunn	09/9/2022
(Signature of JP)	(Date)



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY. SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

NOTES FOR COMPLETING THE OPTIONAL STATUTORY DECLARATION

A person's identity can be confirmed with any one of the following approved identification documents, unless the document has expired or been cancelled. However, an Australian passport is acceptable if it expired no more than 2 years ago -

- a driver's licence or permit with a photograph, whether issued in Australia or another country
- a NSW photo card issued under Photo Card Act 2005
- an Australian proof of age card which contains the person's photograph
- an Australian passport (either current or expired less than 2 years ago)
- a passport or similar document with the person's photograph and signature issued by another country or by the United Nations
- a national identity card with the person's photograph and signature issued by another country or the United Nations (with an English language translation if not in English)
- an Australian citizenship certificate
- a foreign citizenship certificate (with an English language translation if not in English)
- a birth certificate or birth extract, whether issued in Australia, another country or by the United Nations (with an English language translation if not in English)
- a Centrelink pension card
- a credit card or passbook
- an account from a bank, building society or credit union, or statement of account up to one year old
- a Medicare card, pension concession card, Department of Veteran's Affairs entitlement card or other entitlement card issued by the Federal or any State Government
- an electoral enrolment card or other evidence of enrolment as an elector up to 2 years old, or
- a student identity card, or a certificate or statement of enrolment up to 2 years old from an educational institution

A copy of an identification document is acceptable if certified as a true copy by:

- any justice of the peace,
- notary public,
- · commissioner of the court for taking affidavits,
- · Australian legal practitioner authorised to take and receive any affidavit,
- the NSW Registrar-General,
- a Deputy Registrar-General,
- or other person by law authorised to administer an oath.

The certifier and the witness cannot be the same person.



MY FULL NAME

DISCLOSURE OF INTERESTS

SURNAME: MILBURN

ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

For further information please read the Office of Local Government's Self help guide for completion of returns

GIVEN NAME: CRAIG

Ensure that wherever you have nothing to declare, that you have selected the word 'NIL' from the drop-drown lists.

RETURN PERIOD: 2021-2022			
A REAL	PROPERTY		
that you	You must include: (i) either the postal addresses had an interest in at any time during the Return Peror Other	OR particulars of title, i.e. Lot and DP riod; (ii) the Nature of your Interest, i.e.	(or SP) of properties anywhere in Australia e. Owner, Part Owner, Lessee, Beneficiary,
Address of eac Return Period	ch parcel of real property in which I had an	interest at any time during the	Nature of my Interest: Select from the drop-down list
MY PLACE(S	S) OF RESIDENCE:		
No	Street:	Lot & DP:	Part Owner
Suburb:		: nsw	
No:	Street:	Lot & DP:	SELECT FROM LIST BELOW
Suburb:		State:	
OTHER REA	L PROPERTY POSTAL ADDRESS DE	TAILS:	
No:	Street:	Lot & DP:	CELECT EDOM LICT DELOW
Suburb:		State:	SELECT FROM LIST BELOW
No:	Street:	Lot & DP:	OF LEGT EDOM LIGT DELICIM
Suburb:		State:	SELECT FROM LIST BELOW
No:	Street:	Lot & DP:	OF LEAT EDOM LIOT DELOW
Suburb:		State:	SELECT FROM LIST BELOW
No:	Street:	Lot & DP:	OF LEAT EDOM LIGT DELICITY
Suburb:		State:	SELECT FROM LIST BELOW
No: Street:		Lot & DP:	
Suburb:		State:	SELECT FROM LIST BELOW
No:	Street:	Lot & DP:	OF LEGT EDOM LIGT DELGIN
Suburb:		State:	SELECT FROM LIST BELOW
			·

Page 1 of 8

If insufficient space, please attach a schedule to this form.

Please tick if adding an attachment

B SOURCES OF INCOME						
A TIP: Only provide information where the amount of income from an occupation, a Trust or other source, exceeded \$500.						
SOURCES OF MY INCOM (sources, not amounts, of income)				at any time duri	ng the Re	turn Period)
Position Held e.g. Labourer, Cadet, Project Officer, Manager, etc.		otion of C	·	f applicable)	address	Name of Partnership (if applicable)
General Manager	Kempsey Shire Co 2440	ouncnil 2	22 Toser St	West Kempsey	NSW	
SOURCES OF MY INCOM (sources of income, not amou			t during the	Return Period)		
If you have Nothing to Declare, select				•	Se	elect option from this list
NAME AND ADDRESS O		st		NAME AND A	ADDRESS	OF TRUSTEE
NIL						
3 OTHER SOURCES OF M (sources of other income, no		ed at an	y time durin	g the Return Pe	riod)	
TIPS: a Other Sources of Income b You must include a desc which, that income was	cription sufficient to ide					es, welfare payments; n whom, or the circumstances in
If you have Nothing to Declare, select	the word 'Nil' in the	adjacen	nt Box	•	Se	elect option from this list
NIL						
C GIFTS						
A TIP: Only include description of	A TIP: Only include description of a single gift or multiple gifts from the same donor, the total value of which exceeded \$500					
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section D						
If you declare a gift then you MUST also complete a Gifts and Benefits Declaration Form available on request from the Group Leader Governance						
DESCRIPTION OF EACH GIFT RECEIVED BY ME AT ANY TIME DURING THE RETURN PERIOD NAME AND ADDRESS OF GIFT DONOR			IFT DONOR			
NIL						

D CONTRIBUTIONS TO TRAVEL				
A TIP: Relates to the return period Do not include payments by Council for your work-related travel				
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section E Select option from this list				
NAME AND ADDRESS OF EACH PERSON WHO MADE GREATER THAN \$250 FINANCIAL OR OTHER CONTRIBUTION TO ANY TRAVEL UNDERTAKEN BY ME DURING THE RETURN PERIOD	DATES TRAVEL WAS UNDERTAKEN	NAME OF STATES, TERRITORIES OF THE COMMONWEALTH AND OTHER COUNTRIES IN WHICH TRAVEL WAS UNDERTAKEN		
NIL				

E INTERESTS AND POSITIONS IN CORPORATIONS				
TIPS: (i) Declare only if your shareholding was greater than 10% of voting rights in the corporation (ii) You must declare any position (not Shareholder) you held in a Corporation (including not-for-profit corporation) such as Director, whether or not you held shares in the Corporation or the position was a paid position				
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section F				
If you declare a Position U you held in a Corporation Interests Disclosure Form in the Councillors Dropbo			u MUS	T complete a Conflict of
WHICH I HAD AN INTEREST OR HELD A POSITION (IF ANY) POSITION (IF ANY) CORPORATION (EXCEPT)				PRINCIPAL OBJECTS OF CORPORATION (EXCEPT IN CASE OF LISTED COMPANY)
			Asssit touring or performing arts across Aust	

	 		<u> </u>
F INTERESTS AS A PROPRTY D PROPERTY DEVELOPER	EVELOPER OR A	A CLOSE AS	SSOCIATE OF A
TIPS: (i) Declare whether they were a property of developer, on the return date.	developer, or a close associa	te of a corporation t	hat, or an individual who, is a property
If you have Nothing to Declare, select the word 'Nil' i and move to Section F	in the adjacent Box	•	Select option from this list
NAME AND ADDRESS OF PROPERTY DEVELOPER	NATURE OF INTERES eg SHAREHOLDE	1 (11 /3141)	ESCRIPTION OF POSITION (IF ANY) EG DIRECTOR, COMPANY SECRETARY
NIL			



- A person making a return under clause 4.21 of this code must disclose whether they were a property developer, or a close associate of a
 corporation that, or an individual who, is a property developer, on the return date.
- · For the purposes of clause 19 of this schedule:
 - close associate, in relation to a corporation or an individual, has the same meaning as it has in section 53 of the Electoral Funding Act 2018.
 - o property developer has the same meaning as it has in Division 7 of Part 3 of the Electoral Funding Act 2018.

G POSITIONS IN TRADE UNIONS OR PROFESSIONAL OR BUSINESS ASSOCIATIONS		
A TIP: Do not include general membership but include details of any positions held whether remunerated or not		
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section G	Select option from this list	
NAME OF EACH TRADE UNION AND EACH PROFESSIONAL OR BUSINESS ASSOCIATION IN WHICH I HELD ANY POSITION (WHETHER REMUNERATED OR NOT) AT ANY TIME DURING THE RETURN PERIOD	DESCRIPTION OF POSITION	
NIL		

ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

H DEBTS		
A TIP: You do not need to provide information on (i) the amou society, credit union or other financial institution such as for your h	unts; (ii) debts for less than \$50 ome mortgage, credit card or de	0; (iii) debts to any relative, bank, building partment store
If you have Nothing to Declare, select the word 'Nil' in the adjace and move to Section H	ent Box	Select option from this list
NAME AND ADDRESS OF EACH PERSON OR ORGANISATION (CI	REDITOR) TO WHOM I WAS LIA	ABLE TO PAY ANY DEBT AT ANY TIME
NAME OF CREDITOR	ADDRE	ESS OF CREDITOR
NIL		
I DISPOSITIONS OF REAL PROPERTY		
TIPS: You must disclose details: of each disposal of real property since your last return was made the right to repurchase the property; of each disposal of real property by other persons or entities who disposal includes — ogrant of a lease or licence for all or part of the land, omortgage over your land, ogrant of easement over land by which you retain the ability sale of land (or grant of option by you) with (i) a lease or easement or covenant over the land in favour of you creation of an option to purchase land in favour of you; creation by you of a charge over your land; transfer by you of an interest in your land to a Trustee of a Trust transfer of land to your spouse or by your spouse to a third party	to use the land, licence granted to you or a right of which you are a beneficiary; whereby you continue to occupy a benefit, e.g. rent from the land.	ed the use of the property; It for you to repurchase the land, (ii) or an
If you have Nothing to Declare, select the word 'Nil' in the adjace and move to Section I	ent Box	NIL
Should you require more detailed explanation on the information and 188(2) of the Local Government (General Control of the Local Covernment)		
1 PARTICULARS OF EACH DISPOSITION OF I RETURN PERIOD AS A RESULT OF WHICH I R BENEFIT OF THE PROPERTY OR THE RIGHT	ETAINED, EITHER WHO	LLY OR IN PART, THE USE AND
No: Street: Lot & E	P: Suburb:	State:

2 PARTICULARS OF EACH DISPOSITION OF REAL PROPERTY TO A PERSON BY ANOTHER PERSON UNDER ARRANGEMENTS MADE BY ME, BEING DISPOSITIONS MADE AT ANY TIME DURING THE RETURN PERIOD, AS A RESULT OF WHICH I OBTAINED EITHER WHOLLY OR IN PART, THE USE AND BENEFIT OF THE PROPERTY

Suburb:

Suburb:

Lot & DP:

Lot & DP:

No:

No:

Street:

Street:

L	No:	Street:	Lot & DP:	Suburb:	State:
Ī	No:	Street:	Lot & DP:	Suburb:	State:
	No:	Street:	Lot & DP:	Suburb:	State:

State:

State:



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

J DISCRETIONARY DISCLOSURES			
XX A TIP: To be completed if you wish to make any additional disclosures			
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and go to Sign and Date to complete this Return Select option from this list			
NIL			



NEXT STEPS:

- Ensure that wherever you had nothing to declare, that you have selected the word 'NIL' from the dropdrown lists.
- · Print the form.
- Sign and date the return.
 - Your form should then be forwarded to the Group Leader Governence via either email <u>governance@bellingen.nsw.gov.au</u> or hard copy to 33 Hyde Street, Bellingen NSW 2460

OPTIONAL STATUTORY DECLARATION:

Did you complete the optional Statutory Declaration on the next page?

If 'YES', make sure that you have listed the reasons for completing the form and then have your signature witnessed by a Justice of the Peace before submitting your Disclosure of Interest Form.



ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE WITH COUNCIL'S GOVERNANCE COORDINATOR

COMPLETION OF THE FOLLOWING STATUTORY DECLARATION IS OPTIONAL

The declaration should be completed only if you want to withhold your place of living from the version of your Return which is made available for public inspection. Reasons for withholding your place of living must be detailed in the declaration.

STATUTORY DECLARATION

Request for Protection of Privacy (place of living) Local Government Act 1993, Section 739

I,		
of		
in the S	State of New South Wales, do solemnly and sincerely decla	re as follows -
inspect disclose	tion by or under the Local Government Act 1993 be prepa se, or discloses, my place of living.	ner Matters that is available, or is to be made available, for public red or amended so as to omit or remove any matter that would places, my personal safety, or the personal safety of members of
,		
LIST	YOUR REASONS HERE -	
	make this solemn declaration conscientiously believin Act, 1900.	g the same to be true and by virtue of the provisions of the
Subs	scribed and declared at:	
This	day of	
20		
20		My Signature
before	e me:	
		a JP for NSWcertify
١,	(Full name of JP)	a JP for NSW certify (JP Registration Number)
1 □	he/she had a special justification for not removing it a box that applies) I have known the person for at least 12 months I confirmed the person's identity with	/she was wearing a face covering, but I am satisfied that , and (Describe identification document relied on [PTO)
	(Signature of JP)	(Date)



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NOTES FOR COMPLETING THE OPTIONAL STATUTORY DECLARATION

A person's identity can be confirmed with any one of the following approved identification documents, unless the document has expired or been cancelled. However, an Australian passport is acceptable if it expired no more than 2 years ago -

- a driver's licence or permit with a photograph, whether issued in Australia or another country
- a NSW photo card issued under Photo Card Act 2005
- an Australian proof of age card which contains the person's photograph
- an Australian passport (either current or expired less than 2 years ago)
- a passport or similar document with the person's photograph and signature issued by another country or by the United Nations
- a national identity card with the person's photograph and signature issued by another country or the United Nations (with an English language translation if not in English)
- an Australian citizenship certificate
- a foreign citizenship certificate (with an English language translation if not in English)
- a birth certificate or birth extract, whether issued in Australia, another country or by the United Nations (with an English language translation if not in English)
- a Centrelink pension card
- a credit card or passbook
- an account from a bank, building society or credit union, or statement of account up to one year old
- a Medicare card, pension concession card, Department of Veteran's Affairs entitlement card or other entitlement card issued by the Federal or any State Government
- an electoral enrolment card or other evidence of enrolment as an elector up to 2 years old, or
- a student identity card, or a certificate or statement of enrolment up to 2 years old from an educational institution

A copy of an identification document is acceptable if certified as a true copy by:

- any justice of the peace,
- notary public,
- commissioner of the court for taking affidavits,
- Australian legal practitioner authorised to take and receive any affidavit,
- the NSW Registrar-General,
- a Deputy Registrar-General,
- or other person by law authorised to administer an oath.

The certifier and the witness cannot be the same person.



MY FULL NAME GIVEN NAME: LEO

DISCLOSURE OF INTERESTS

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Hauville

For further information please read the Office of Local Government's Self help guide for completion of returns

Ensure that wherever you have nothing to declare, that you have selected the word 'NIL' from the drop-drown lists.

RETURN PERIOD: 2021-2022				
A REAL	PROPERTY		25.00	
that you	You must include: (i) either the postal addresses had an interest in at any time during the Return Per or Other	OR particulars of title, i.e. Lot and DP (riod; (ii) the Nature of your Interest, i.e.	(or SP) of properties anywhere in Australia c. Owner, Part Owner, Lessee, Beneficiary,	
Address of ea Return Period	ch parcel of real property in which I had an	interest at any time during the	Nature of my Interest: Select from the drop-down list	
MY PLACE	S) OF RESIDENCE:			
No:	Street:	Lot & DP:	Part Owner	
Suburb:		State: NSW		
No:	Street:	Lot & DP:	SELECT FROM LIST BELOW	
Suburb:				
OTHER REA	L PROPERTY POSTAL ADDRESS DE	TAILS:		
No:	Street:	Lot & DP:		
Suburb: S		State:	SELECT FROM LIST BELOW	
No:	Street:	Lot & DP:		
Suburb:		State:	SELECT FROM LIST BELOW	
No:	Street:	Lot & DP:		
Suburb:		State:	SELECT FROM LIST BELOW	
No:	Street:	Lot & DP:		
Suburb:		State:	SELECT FROM LIST BELOW	
No:	Street:	Lot & DP:	OF LEGT FROM LIGT RELIGIA	
Suburb:		State:	SELECT FROM LIST BELOW	
No:	Street:	Lot & DP:	OF LEATEDON LOT DELCAM	
Suburb:		State:	SELECT FROM LIST BELOW	

If insufficient space, please attach a schedule to this form.

Please tick if adding an attachment

B SOURCES OF INCOME				
A TIP: Only provide information where the amount of income from an occupation, a Trust or other source, exceeded \$500.				
⇒ 1 SOURCES OF MY INCOM (sources, not amounts. of inc		CUPATION(S) my Occupation(s) at any time during the	Return Period)	
Position Held e.g. Labourer, Cadet, Project Officer, Manager, etc.	If self employed include business name & business address			
Mayor	Kempsey Shire Cou	ıncil, Tozer St. West Kempsey		
	unts, I received from a	a Trust during the Return Period)	NIL	
NAME AND ADDRESS OF SETTLOR NAME AND ADDRESS OF SETTLOR A TIP: The 'Settlor' is the name of a person who created the Trust NAME AND ADDRESS OF TRUSTEE				
TIPS: a Other Sources of Incom	ot amounts, I received e may include income fro cription sufficient to iden	om rental property, investments, business activity the person, property or business activity f		
If you have Nothing to Declare, select	the word 'Nil' in the a	djacent Box	Refer Below	
State Supreannuation - NSW				
	:			
C GIFTS	1 1			
A TIP: Only include description of	a single gift or multiple g	gifts from the same donor, the total value of wi	hich exceeded \$500	
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section D				
If you declare a gift U then you MUS Leader Governance	ST also complete a Gi	fts and Benefits Declaration Form availa	ble on request from the Group	
DESCRIPTION OF EACH GIFT RECEIVE TIME DURING THE RETURN		NAME AND ADDRESS OF	F GIFT DONOR	

D CONTRIBUTIONS TO TRAVEL		
Relates to the return period Do not include payments by Council for your work relate	ed travel	
If you have Nothing to Declare, select the word 'Nil' in the a and move to Section E	adjacent Box	NIL
NAME AND ADDRESS OF EACH PERSON WHO MADE GREATER THAN \$250 FINANCIAL OR OTHER CONTRIBUTION TO ANY TRAVEL UNDERTAKEN BY ME DURING THE RETURN PERIOD	NAME OF STATES, TERRITORIES OF THE COMMONWEALTH AND OTHER COUNTRIES IN WHICH TRAVEL WAS UNDERTAKEN	

E INTERESTS AND POSITIONS IN CORPORATIONS						
TIPS: (i) Declare only if your shareholding was greater than 10% of voting rights in the corporation (ii) You must declare any position (not Shareholder) you held in a Corporation (including not-for-profit corporation) such as Director, whether or not you held shares in the Corporation or the position was a paid position						
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section F						
If you declare a Position $oldsymbol{\Theta}$ you held in a Corporation that had a relationship with Council, you MUST complete a Conflict of Interests Disclosure Form in the Councillors Dropbox or located on Council's Intranet						
NAME AND ADDRESS OF EACH CORPORATION IN WHICH I HAD AN INTEREST OR HELD A POSITION AT ANY TIME DURING THE RETURN PERIOD NATURE OF INTEREST POSITION OF POSITION (IF ANY) EG DIRECTOR, COMPANY SECRETARY DESCRIPTION OF PRINCIPAL OBJECTS OF CORPORATION (EXCEPT IN SECRETARY) CASE OF LISTED COMPANY						

F INTERESTS AS A PROPERTY I PROPERTY DEVELOPER	DEVELOPER OR A CLOS	SE ASSOCIATE OF A
TIPS: (i) Declare whether they were a property developer, on the return date.	eveloper, or a close associate of a corpora	ation that, or an individual who, is a propert
If you have Nothing to Declare, select the word 'Nil' in and move to Section F	n the adjacent Box	NIL
NAME AND ADDRESS OF PROPERTY DEVELOPER	NATURE OF INTEREST (IF ANY) eg SHAREHOLDER	DESCRIPTION OF POSITION (IF ANY EG DIRECTOR, COMPANY SECRETARY

- A person making a return under clause 4.21 of this code must disclose whether they were a property developer, or a close associate of a
 corporation that, or an individual who, is a property developer, on the return date.
- For the purposes of clause 19 of this schedule:
 - close associate, in relation to a corporation or an individual, has the same meaning as it has in section 53 of the Electoral Funding Act 2018.
 - o property developer has the same meaning as it has in Division 7 of Part 3 of the Electoral Funding Act 2018.

SINESS ASSOCIATIONS
erated or not
NIL
DESCRIPTION OF POSITION

	2000年1月 - 1800年1月 - 1800年11月				
H DEB	TS				
A TIP society,	You do not need to provide information on (i) credit union or other financial institution such as	the amounts; (ii) debts for le for your home mortgage, cred	ess than \$500; (iii) debts to any re it card or department store	elative, bank, building	
If you have I	Nothing to Declare, select the word 'Nil' in the Section H	ne adjacent Box)	NIL	
NAME AND	ADDRESS OF EACH PERSON OR ORGANISA DURI	TION (CREDITOR) TO WHO	M I WAS LIABLE TO PAY ANY D	EBT AT ANY TIME	
	NAME OF CREDITOR ADDRESS OF CREDITOR				
I DISF	OSITIONS OF REAL PROPE	RTY			
 of each disposal of real property since your last return was made by which you wholly or partly retained the use or benefit of the property or the right to repurchase the property; of each disposal of real property by other persons or entities whereby you wholly or partly obtained the use of the property; disposal includes – grant of a lease or licence for all or part of the land, mortgage over your land, grant of ease ment over land by which you retain the ability to use the land, sale of land (or grant of option by you) with (i) a lease or licence granted to you or a right for you to repurchase the land, (ii) or an easement or covenant over the land in favour of you creation of an option to purchase land in favour of you; creation by you of a charge over your land; transfer by you of an interest in your land to a Trustee of a Trust of which you are a beneficiary; transfer of land to your spouse or by your spouse to a third party whereby you continue to occupy the land; transfer of title of your land subject to you continuing to receive a benefit, e.g. rent from the land. 					
	If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and move to Section I				
Should you	Should you require more detailed explanation on the information to be provided in this Section, you should refer to Clauses 188(1) and 188(2) of the Local Government (General) Regulation 2005 or consult your solicitor				
1 PARTICULARS OF EACH DISPOSITION OF REAL PROPERTY BY ME AT ANY TIME DURING THE RETURN PERIOD AS A RESULT OF WHICH I RETAINED, EITHER WHOLLY OR IN PART, THE USE AND BENEFIT OF THE PROPERTY OR THE RIGHT TO REACQUIRE THE PROPERTY AT A LATER DATE					
No:	Street:	Lot & DP:	Suburb:	State:	
No:	Street:	Lot & DP:	Suburb:	State:	
No:	Street:	Lot & DP:	Suburb:	State:	
2 PARTICULARS OF EACH DISPOSITION OF REAL PROPERTY TO A PERSON BY ANOTHER PERSON UNDER ARRANGEMENTS MADE BY ME, BEING DISPOSITIONS MADE AT ANY TIME DURING THE RETURN PERIOD, AS A RESULT OF WHICH I OBTAINED EITHER WHOLLY OR IN PART, THE USE AND BENEFIT OF THE PROPERTY					
No:	Street:	Lot & DP:	Suburb:	State:	
No:	Street:	Lot & DP:	Suburb:	State:	
No:	Street:	Lot & DP:	Suburb:	State:	



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J DISCRETIONARY DISCLOSURES				
A TIP: To be completed if you wish to make any additional disclosures				
If you have Nothing to Declare, select the word 'Nil' in the adjacent Box and go to Sign and Date to complete this Return	NIL			

MY SIGNATURE:	Ø		
DATE SIGNED:		18/10/2022	

NEXT STEPS:

- Ensure that wherever you had nothing to declare, that you have selected the word 'NIL' from the dropdrown lists.
- Print the form.
- Sign and date the return.
 - Your form should then be forwarded to the Group Leader Governence via either email governance@bellingen.nsw.gov.au or hard copy to 33 Hyde Street, Bellingen NSW 2460

OPTIONAL STATUTORY DECLARATION:

Did you complete the optional Statutory Declaration on the next page?

If 'YES', make sure that you have listed the reasons for completing the form and then have your signature witnessed by a Justice of the Peace before submitting your Disclosure of Interest Form.