

MY FULL NAME GIVEN NAME: Gary

#### DISCLOSURE OF INTERESTS

Following application of the public interest test, personal information on this return has been redacted in accordance with section 6(4) GIPA Act.

**SURNAME: Ellem** 

Please ensure that where you have nothing to declare, that you select the word 'NIL' from the drop-down

RETURN PERIOD: 1 JULY 2022 TO 30 JUNE 2023				
A REAL	PROPERTY			
	ou must include: (i) either the postal addresses C an interest in at any time during the return period;			
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	S) OF RESIDENCE:			
No:	Street:	Lot & DP:	Owner	
Suburb:	Evans Head	State: NSW		
No:	Street:	Lot & DP:	SELECT FROM LIST BELOW	
Suburb:		State:		
OTHER REA	L PROPERTY POSTAL ADDRESS DE	TAILS:		
No:	Street:	Lot & DP:	OF LEGT EDOM LIGT 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 DELOW	
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:		
Suburb:		State:	SELECT FROM LIST BELOW	
	If insufficient space, please atta	ach a schedule to this form.	lease tick if adding an attachment	



### **DISCLOSURE OF INTERESTS**

ELECTRONICALLY COMPLETE THIS FORM, ELECTRONICALLY SIGN AND DATE THEN RETURN TO COUNCIL'S GOVERNANCE DEPARTMENT

B SOURCES OF INCOME					
TIP: Only provide information when	e the amount of incom	ne from an occupa	tion, a Trust or other s	ource, exceed	ded \$500.
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)					
Position Held e.g. Labourer, Cadet, Project Officer, Manager, etc.	Name and Address of Employer or Description of Office held (if applicable)  If self employed include business name & business address			ddress	Name of Partnership (if applicable)
Manager Regional Library	Richmond Valley Council				
	10 Graham	Place			
	Casino NSV	V 2470			
SOURCES OF MY INCOM (sources of income, not amou		~ -	the return period)		
If you have nothing to declare, select t	he word 'NIL' in the	adjacent Box	<b>-</b>		NIL
NAME AND ADDRESS OF SETTLOR  TIP: The 'Settlor' is the name of a person who created the Trust			NAME AND ADDRESS OF TRUSTEE		
3 OTHER SOURCES OF M     (sources of other income, no		ed at any time d	uring the return perio	od)	
TIP: a Other sources of income may include income from rental property, investments, business activities, welfare payments; b 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.					
If you have nothing to declare, select t	he word 'NIL' in the	adjacent box	<b>&gt;</b>		NIL
C GIFTS					
TIP: Only include a description of a	single gift or multiple	gifts from the sam	e donor, the total value	e of which exc	ceeded \$100
If you have nothing to declare, select the word 'NIL' in the adjacent box and move to Section D					
If you declare a gift $igodot$ then you MUST also complete a Personal Benefit Disclosure Form and return to the General Manager.					
DESCRIPTION OF EACH GIFT RECEIVED BY ME AT ANY TIME DURING THE RETURN PERIOD  NAME AND ADDRESS OF GIFT DONOR				DONOR	



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TIP: Do not include payments by Council for your	work-related travel	1		
you have nothing to declare, select the word 'NIL' nd move to Section E	in the adjacent box	<b>&gt;</b>	NIL	
NAME AND ADDRESS OF EACH PERSON WHO MAE GREATER THAN \$250 FINANCIAL OR OTHER CONTRIBUTION TO ANY TRAVEL UNDERTAKEN BY DURING THE RETURN PERIOD			NAME OF STATES, TERRITORIE OF THE COMMONWEALTH AND OTHER COUNTRIES IN WHICH TRAVEL WAS UNDERTAKEN	
INTERESTS AND POSITIONS	IN CORPORATIO	)NS		
TIP: (i) Declare only if your shareholding was gre shareholder) you held in a corporation (including not or the position was a paid position	eater than 10% of voting right t-for-profit corporation) such	ts in the corporation as Director, whethe	n (ii) You must declare any position er or not you held shares in the corpora	
you have nothing to declare, select the word 'NIL' nd move to Section F	in the adjacent box	<b>-</b>	NIL	
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 A EG DIRECTOR, COM SECRETARY	ANY) PRINCIPAL OBJECTS O	
	1			
PROPERTY DEVELOPER				

(in the case of a unit trust) or you are a beneficiary of the trust (in the case of a discretionary trust), or (d) where the corporation has made a 'relevant planning application' that is pending, you are in a joint venture or partnership with the corporation in connection with the 'relevant planning application' and you are likely to obtain a financial gain if it is approved or carried out.

Were you a property developer or a close associate of a property developer on the return



No

date?

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G POSITIONS IN TRADE UNIONS OR PRO	OFESSIONAL/BUSI	NESS ASSOCIATIONS	
TIP: Do not include general membership but include details of a	ny positions held whether remund	erated or not	
If you have nothing to declare, select the word 'NIL' in the adjace and move to Section H	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	
H DEBTS			
TIP: You do not need to provide information on (i) the amounts; (credit union or other financial institution such as for your home more	(ii) debts for less than \$500; (iii) d rtgage, credit card or department	ebts to any relative, bank, building society, store	
If you have nothing to declare, select the word 'NIL' in the adjace and move to Section I	ent box	NIL	
NAME AND ADDRESS OF EACH PERSON OR ORGANISATION (CF DURING THE F	REDITOR) TO WHOM I WAS LIA RETURN PERIOD	BLE TO PAY ANY DEBT AT ANY TIME	
NAME OF CREDITOR ADDRE		ESS OF CREDITOR	
I DISPOSITIONS OF REAL PROPERTY			
<ul> <li>TIP: You must disclose details:</li> <li>of each disposal of real property since your last return was made the right to repurchase the property;</li> <li>of each disposal of real property by other persons or entities whe disposal includes –         <ul> <li>grant of a lease or licence for all or part of the land,</li> <li>mortgage over your land,</li> <li>grant of easement over land by which you retain the ability</li> <li>sale of land (or grant of option by you) with (i) a lease or easement or covenant over the land in favour of you</li> </ul> </li> <li>creation of an option to purchase land in favour of you;</li> <li>creation by you of a charge over your land;</li> <li>transfer by you of an interest in your land to a Trustee of a Trust</li> <li>transfer of land to your spouse or by your spouse to a third party</li> <li>transfer of title of your land subject to you continuing to receive a</li> </ul>	ereby you wholly or partly obtained 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;  t 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 J	ent box	NIL	
Should you require more detailed explanation on the information and 188(2) of the Local Govern			



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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:	
J DISCRETIONARY DISCLOSURES  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						
SIGNATU	IRE:					
DATE:		19 JULY 2023				

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

