

MY FILL NAME BEN

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.

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

WIIIOLL	IVAIVIL	DEN				
RETURN PERIOD: 1 JULY 2022 TO 30 JUNE 2023						
A REAL	PROPE	RTY				
					P of properties anywhere in Australia that r, part owner, lessee, beneficiary, occupier	
Address of each parcel of real property in which I had an interest period			rest at any time duri	ng the return	Nature of my interest: select from the drop-down list	
MY PLACE(S	S) OF RES	IDENCE:				
No:	Street:		Lot & DP:		Owner	
Suburb: Casino	0		State: NSW			
No:	Street:		Lot & DP:		SELECT FROM LIST BELOW	
Suburb:			State:			
OTHER REA	L PROPE	RTY POSTAL ADDRESS DE	TAILS:			
No:	Street:		Lot & DP:			
Suburb: North	uburb: North Casino		State: NSW		Owner	
No:	Street:		Lot & DP:			
Suburb:	Suburb:		State:		SELECT FROM LIST BELOW	
No:	Street:		Lot & DP:			
Suburb:	Suburb:		State:		SELECT FROM LIST BELOW	
No:	Street:		Lot & DP:			
Suburb:	Suburb:		State:		SELECT FROM LIST BELOW	
No:	Street:		Lot & DP:			
Suburb:		State:		SELECT FROM LIST BELOW		
No:	Street:		Lot & DP:			
Suburb:	Suburb:		State:		SELECT FROM LIST BELOW	
		If insufficient space, please atta	nch a schedule to thi	is form. P	lease tick if adding an attachment	



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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 occupation, a Trust or other	source, exceeded \$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 Descrip	Name of Partnership (if applicable) address			
Director	Richmond Valley (Graeme Place Cas				
2 SOURCES OF MY INCOM (sources of income, not amount of the source) If you have nothing to declare, select the source of t	unts, I received from	n a Trust during the return period)	NIL		
NAME AND ADDRESS OF SETTLOR NAME AND ADDRESS OF TRUSTEE 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)					
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 the word 'NIL' in the adjacent box					
C GIFTS					
TIP: Only include a description of a single gift or multiple gifts from the same donor, the total value of which exceeded \$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 U then you MUST also complete a Personal Benefit Disclosure Form and return to the General Manager.					
DESCRIPTION OF EACH GIFT RECEIVE TIME DURING THE RETURN		NAME AND ADD	NAME AND ADDRESS OF GIFT DONOR		



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TIP: Do not include payments by Council for your	work-related travel			
you have nothing to declare, select the word 'NIL' nd move to Section E	in the adjacent box	>	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, TERRITORIES OF THE COMMONWEALTH AND OTHER COUNTRIES IN WHICH TRAVEL WAS UNDERTAKEN	
INTERESTS AND POSITIONS	IN CORPORATION)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, whether	n (ii) You must declare any positi er or not you held shares in the corp	
you have nothing to declare, select the word 'NIL' nd move to Section F	in the adjacent box	-	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) CORPORATION (EXCE	
		l	-	
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 PROFESSIONAL/BUSINESS 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 IN WHICH I HELD ANY POSITION (WHETHER REMUNE AT ANY TIME DURING THE RETURN PER	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 mo	(ii) debts for less than \$500; (iii) d	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 ADDRI		ESS OF CREDITOR		
I DISPOSITIONS OF REAL PROPERTY				
TIP: 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 whe 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 osale 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 transfer of title of your land subject to you continuing to receive a	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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RET	TURN PERIOD AS A RESULT OF WHITE OF THE INTERIOR OF THE PROPERTY OR THE INTERIOR OF THE INTERI	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:		
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 DISC	RETIONARY DISCLOSURES	S				
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	RE:					
DATE:	19/7/23					

