

MY FULL NAME GIVEN NAME: Ngarie

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

DISCLOSURE OF INTERESTS

SURNAME: Macqueen

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

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

| RETURN PERIOD: 1 JULY 2023 TO 30 JUNE 2024 | | | | |
|--|---|-------------------------------------|---|--|
| | | | | |
| 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 tir period | | erest at any time during the return | Nature of my interest: select from the drop-down list | |
| MY PLACE(S | S) OF RESIDENCE: | | | |
| | | | Part Owner | |
| Suburb: Fairy Hill | | State: NSW | T dit Owner | |
| No: | Street: | Lot & DP: | SELECT FROM LIST BELOW | |
| Suburb: | | State: | | |
| OTHER REA | L PROPERTY POSTAL ADDRESS DE | TAILS: | | |
| No: 84 | Street: Hare St | Lot & DP: | Port Owner | |
| Suburb: Casino | | State: NSW | Part Owner | |
| No: | Street: | Lot & DP: | SELECT EDOM LIST DELOW | |
| Suburb: | | State: | SELECT FROM LIST BELOW | |
| No: | Street: | Lot & DP: | SELECT FROM LIST BELOW | |
| Suburb: | | State: | SELECT FROM LIST BELOW | |
| No: | Street: | Lot & DP: | SELECT FROM LIST BELOW | |
| Suburb: | | State: | | |
| No: | Street: | Lot & DP: | SELECT FROM LIST BELOW | |
| Suburb: | | State: | SELECT PROMICIST BELOW | |
| No: | Street: | Lot & DP: | SELECT EDOM LIST DELOW | |
| Suburb: | | State: | SELECT FROM LIST BELOW | |
| | If insufficient space, please atta | ach a schedule to this form. P | 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 incon | ne from an occupat | ion, a Trust or other so | urce, 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 and Address of Employer or | | | Name of Partnership (if applicable) | |
| Manager | Richmond-Upper (| Clarence Regiona | al Library | | |
| Partner | Silicon Wings | | | Silicon Wings | |
| | | | | | |
| SOURCES OF MY INCOM (sources of income, not amount) | | ~ - | he return period) | | |
| If you have nothing to declare, select | | | • | 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 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 Refer Below | | | | Refer Below | |
| Rental Income | | | | | |
| | | | | | |
| | | | | | |
| 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 0 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 | | | | | |
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DISCLOSURE OF INTERESTS

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

| 2020 2021 | AND DATE THEN R | RETURN TO COUN | ICIL 5 | GOVERNANCE DEPARTMENT | |
|---|--|---|--|--|--|
| D CONTRIBUTIONS TO TRAVEL | - | | | | |
| TIP: Do not include payments by Council for your | work-related travel | | | | |
| If you have nothing to declare, select the word 'NIL' and move to Section E | in the adjacent box | \(\rightarrow\) | | NIL | |
| NAME AND ADDRESS OF EACH PERSON WHO MA GREATER THAN \$250 FINANCIAL OR OTHER CONTRIBUTION TO ANY TRAVEL UNDERTAKEN BY DURING THE RETURN PERIOD | ME DATES TRA | DATES TRAVEL WAS UNDERTAKEN | | NAME OF STATES, TERRITORIES OF THE COMMONWEALTH AND OTHER COUNTRIES IN WHICH TRAVEL WAS UNDERTAKEN | |
| | | | | | |
| | | | | | |
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| E INTERESTS AND POSITIONS | IN CORPORATION | NS | | | |
| TIP: (i) Declare only if your shareholding was gre shareholder) you held in a corporation (including no or the position was a paid position | eater than 10% of voting right | ts in the corporation as Director, whethe | n (ii) ` er or not | 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 | \(\rightarrow\) | | 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 OF CORPORATION (EXCEPT IN CASE OF LISTED COMPANY) | |
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| F PROPERTY DEVELOPER | | | | | |
| TIP: In this section, you must disclose if you are a developer' for the purposes of the Electoral Funding are (a) the spouse of the person, or (b) where the p or partnership with the person in connection with the or carried out. (ii) You will be a close associate of a the corporation (b) you or your spouse have voting 20% (c) where the corporation is a trustee, manage (in the case of a unit trust) or you are a beneficiary 'relevant planning application' and you are likely to obtain a fi | g Act 2018. (i) You will be a c erson has made a 'relevant p e 'relevant planning applicatio corporation that is a property power in the corporation or a r or responsible entity in relat of the trust (in the case of a c are in a joint venture or part | close associate of a planning application on' and you are likel developer if (a) you related body corpo- cion to a trust, you had discretionary trust), thership with the co | person ' that is ly to ob u or you orate of oold mo or (d) | who is a property developer if you are in a joint venture tain a financial gain if it is approved ur spouse are a director or officer of the corporation that is greater than re than 20% of the units in the trust where the corporation has made a | |

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



No

date?

DISCLOSURE OF INTERESTS

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| G POSITIONS IN TRADE UNIONS OR PROFESSIONAL/BUSINESS ASSOCIATIONS | | | | | |
|--|---|--|--|--|--|
| 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 adjace and move to Section H | ent box | 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) rtgage, credit card or departme | debts to any relative, bank, building society, nt 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 L RETURN PERIOD | ABLE TO PAY ANY DEBT AT ANY TIME | | | |
| NAME OF CREDITOR | ESS OF CREDITOR | | | | |
| | | | | | |
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| 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 where disposal includes — grant of a lease or licence for all or part of the land, mortgage over your land, grant of easement over land by which you retain the ability sour 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 transfer of title of your land subject to you continuing to receive a | to use the land, licence granted to you or a rig of which you are a beneficiary; whereby you continue to occup benefit, e.g. rent from the land | the difference of the property; the for you to repurchase the land, (ii) or an one of the land; to the land; | | | |
| If you have nothing to declare, select the word 'NIL' in the adjace and move to Section J | ent dox | NIL | | | |
| Should you require more detailed explanation on the information and 188(2) of the Local Govern | | | | | |



DISCLOSURE OF INTERESTS

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| BEI | 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 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 | | | | | | | |
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| | | | | | | | |
| SIGNATU | RE: | | | | | | |
| DATE: | 02/07/2024 | | | | | | |

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

