

Disclosure Statement

YOU ARE REQUIRED TO COMPLETE THIS FORM IF YOU ARE A COUNCILLOR, A CHIEF ADMINISTRATIVE OFFICER OR A TOWN OR CITY MANAGER/CLERK.

Print Name: _____ **Title:** _____

Municipality: _____

Spouse or Cohabiting Partner Information

As per the requirements of section 4(3) of the **Municipal Conduct Act**, I disclose the following:

Address(es) of real property that I/my spouse/cohabiting partner own or have an interest in within the municipality:

Name(s) of corporation(s) in which I/my spouse/cohabiting partner hold ten percent (10%) or more of the shares, regardless of location:

Partnerships and sole proprietorships in which I/my spouse/cohabiting partner hold ten percent (10%) or more interest, regardless of location:

Name(s) of business(es) owned by me/my spouse/cohabiting partner within the municipality:

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Name(s) of corporations, associations, or trade unions of which I/my spouse/cohabiting partner am/are a Director or Executive Director:

Source(s) of income for myself, my spouse/cohabiting partner:

Other Information (as determined by Council):

This is to certify that the information provided in this form is, to the best of my knowledge and ability, complete, true and correct. I acknowledge that I must report changes to this information in writing within 60 days of the change occurring and that I must file an updated copy with the municipality no later than March 1 annually.

Print Name: _____ Date: _____

Signature: _____

The information in this Disclosure Statement is collected and filed with the council in accordance with section 4 the **Municipal Conduct Act** and section 61(a) and (c) of the **Access to Information and Protection of Privacy Act, 2015**. It will be retained by the clerk of the council and made available for public inspection during council's normal business hours. Any concerns or inquiries regarding the collection or use of this information can be directed to the town office.