UPDATE RETURN

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

MY FUI	LL NAME GIVEN	NAME: Arthur		SURNAMI	E: Lys	aught
RI	ETURN PERIOD:	31 December 202	20 to		3	1 March 2021
A REA	AL PROPERTY					
Aus	TIP: You must include: (i) of tralia that you had an interest eficiary, Occupier or Other	either the postal addresses C in at any time during the Ret	OR particulars of urn Period; (ii) t	f Title, i.e. Lot and he Nature of your I	DP (or s	SP) of properties anywhere in e. Owner, Part Owner, Lessee,
Address of Return Per	f each parcel of real properiod	erty in which I had an inte	erest at any tin	ne during the		of my Interest: Select from the drop-down list
MY PLAC	E OF RESIDENCE:					
						Part Owner
Suburb: Grafton		Sta	ate: NSW			
OTHER R	REAL PROPERTY POST	TAL ADDRESS DETAIL	.s:			
No:	Street:		t & DP:		SELECT FROM LIST BELOW	
Suburb:		Sta	ate:			
No:	Street:	Lot	t & DP:			
Suburb:		Sta	ate:		SELECT FROM LIST BELOW	
No:	Street:	Lot	t & DP:			
Suburb:	Suburb:		ite:		SELECT FROM LIST BELOW	
	If insuffi	cient space, please attach	a schedule to	this form.	ease tick	if adding an attachment □
B SOL	JRCES OF INCOM					
A A IIF.	Only provide information whe	re the amount of income from	an occupation,	a Trust or other sou	irce, exce	eeded \$500.
	OURCES OF MY INCOI			at anv time during	a the Re	turn Period)
Description of my Occupation(s)		Name and A	me and Address of Employer or ription of Office held (if applicable)			Name of Partnership (if applicable)
Occupation	is include: (i) an employee of Cou	ncil; (ii) an employee of other orga	anisations; (iii) self	-employed; (iv) a con	sultant; (v) an Office holder in a Company
2 Prince Street		CLARENCE VALLEY CC 2 Prince Street GRAFTON NSW 2460				N/A
Self funded	l Retiree					
Aged pens	ion					
Director GI	DSC					

If you have Nothing to Declare, select the word 'Nil' in the	adjacent Box	NIL
NAME AND ADDRESS OF SETTLOR A 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 receive)	d at any time during the Retum F	Period)
A TIPS: a Other Sources of Income may include income from b You must include a description sufficient to ide which, that income was received.		
If you have Nothing to Declare, select the word 'Nil' in the	adjacent Box	NIL
C GIFTS		
A TIP: Only include description of a single gift or multiple gift for multiple gift you have Nothing to Declare, select the word 'Nil' in the a and move to Section D		NIL
If you declare a gift	ifts and Benefits Declaration For	m in the Councillors Dropbox or located
DESCRIPTION OF EACH GIFT RECEIVED BY ME AT ANY TIME DURING THE RETURN PERIOD	NAME AND ADD	RESS OF GIFT DONOR
D CONTRIBUTIONS TO TRAVEL		
A A TIP: Do not include payments by Council for your work-rel	ated travel	
If you have Nothing to Declare, select the word 'Nil' in the a	adjacent Box	NIL
and move to Section E		the state of the s
	ifts and Benefits Declaration Forr	m in the Councillors Dropbox or located



UPDATE RETURN

ELECTRONICALLY COMPLETE THIS FORM, ELECTRONICALLY SIGN AND DATE THEN LODGE BY E-MAIL TO COUNCIL'S EXECUTIVE SUPPORT

A TIPS: (i) Declare only if your shareholding was green Shareholder) you held in a Corporation (including Corporation or the position was a paid position	ater than 10% of voting rights	s in the corporation (ii)	
If you have Nothing to Declare, select the word 'Nil' and move to Section F	in the adjacent Box	S	NIL
If you declare a Position U you held in a Corporati Interests Disclosure Form in the Councillors Dropbo			T 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)
F PROPERTY DEVELOPER			
A TIPS: In this section, you must disclose if you are a	'property developer' or a clos	se associate of an individu	al or corporation that is a 'property

A TIPS: In this section, you must disclose if you are a 'property developer' or a close associate of an individual or corporation that is a 'property developer' for the purposes of the Electoral Funding Act 2018. (i) You will be a close associate of a person who is a property developer if you are (a) the spouse of the person, or (b) where the person has made a 'relevant planning application' that is pending, you are in a joint venture or partnership with the person in connection with the 'relevant planning application' and you are likely to obtain a financial gain if it is approved or carried out. (ii) You will be a close associate of a corporation that is a property developer if (a) you or your spouse are a director or officer of the corporation (b) you or your spouse have voting power in the corporation or a related body corporate of the corporation that is greater than 20% (c) where the corporation is a trustee, manager or responsible entity in relation to a trust, you hold more than 20% of the units in the trust (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' 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 date?	No

A TIP: Do not include general membership but include details of any positions held whether remun	erated or not
f you have Nothing to Declare, select the word 'Nil' in the adjacent Box 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 DE	BTS			
A A TIP:	You do not need to provide information y, credit union or other financial institution	n on (i) the amounts; (ii) debts for such as for your home mortgage,	or less than \$500; (iii) de credit card or departmen	ebts to any relative, bank, building t store
	Nothing to Declare, select the word to Section I	'Nil' in the adjacent Box		NIL
NAME AN	D ADDRESS OF EACH PERSON OR OF	RGANISATION (CREDITOR) TO V DURING THE RETURN PERIO		PAY ANY DEBT AT ANY TIME
	NAME OF CREDITOR		ADDRESS OF	CREDITOR
I DIS	POSITIONS OF REAL PR	ROPERTY		
 disp o o crea crea trans trans 	ach disposal of real property by other personal includes — grant of a lease or licence for all or part of mortgage over your land, grant of easement over land by which yo sale of land (or grant of option by you) or easement or covenant over the land in fation of an option to purchase land in favoution by you of a charge over your land; after by you of an interest in your land to a ster of land to your spouse or by your spouser or title of your land subject to you control.	of the land, u retain the ability to use the land, with (i) a lease or licence granted vour of you ur of you; Trustee of a Trust of which you are use to a third party whereby you co	to you or a right for you a beneficiary; ontinue to occupy the lan	to repurchase the land, (ii) or an
	Nothing to Declare, select the word 'o Section J	Nil' in the adjacent Box	•	NIL
Should you	u require more detailed explanation o and 188(2) of the Local Go	n the information to be provide overnment (General) Regulatio	d in this Section, you s	should refer to Clauses 188(1)
RI Al	ARTICULARS OF EACH DISPO ETURN PERIOD AS A RESULT ND BENEFIT OF THE PROPER ATE	OSITION OF REAL PROP	ERTY BY ME AT , EITHER WHOLL	ANY TIME DURING THE Y OR IN PART, THE USE
No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:
UI RI	ARTICULARS OF EACH DISPONDER ARRANGEMENTS MADE ETURN PERIOD, AS A RESULIND BENEFIT OF THE PROPERT	E BY ME, BEING DISPOS T OF WHICH I OBTAINED	ITIONS MADE AT	ANY TIME DURING THE
No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:
No:	Street:	Lot & DP:	Suburb:	State:



J DISCRETIO	NARY DISCLOSURES		
A A TIP: To be com	pleted if you wish to make any additional disclosures		
	Declare, select the word 'Nil' in the adjacent Box e to complete this Return	Select option fro	m this list
Director of Grafton Dist	rict Services Club		
MY SIGNATURE:			
DATE SIGNED:	29 TH APRIL 2021		

NEXT STEPS:

- Ensure that wherever you had nothing to declare, that you have selected the word 'NIL' from the dropdrown lists.
- Electronically sign and date this page.
- Save your completed form and forward it by e-mail to Executive Support at lesley.mcbay@clarence.nsw.gov.au

