

Office of the Conflict of Interest Commissioner

FORM 1 MEMBER'S CONFIDENTIAL DISCLOSURE STATEMENT

Prepared under the authority of the Members' Conflict of Interest Act (the "Act")	
Member's Name:	
Constituency Name:	
DECLARATION:	
I am familiar with the requirements of the Act. My abest of my knowledge, information and belief, accurinterests and sources of income of me, my spouse, not controlled by any of us.	•
	Signature of Member
	Date of Disclosure (yyyy-mm-dd)
Conflict of Interest Commissioner	
Date of Meeting with Member (yyyy-mm-dd)	

General Instructions

This Form applies primarily to you and your spouse. Complete this Form by answering <u>all</u> the questions. If you have nothing to disclose for a particular question, please check the "not applicable" box rather than leave it blank.

M = Member S = Spouse

Changes to Previous Statements

Material Change – A "material change" is an acquisition or disposition, whether in whole or in part, occurring after you file a disclosure statement, of any asset, liability, financial interest or source of income by you, your spouse or your minor children, or a private corporation controlled by any of you, if the change or event would reasonably be expected to have a significant effect on the information previously disclosed.
Since your most recent Member's Confidential Disclosure Statement, have you filed a Statement of Material Change (Form 4)?
YES NO N/A (i.e. no previous Member's Confidential Disclosure Statement)
Since your most recent Member's Confidential Disclosure Statement, has a material change occurred?
YES NO N/A (i.e. no previous Member's Confidential Disclosure Statement)
Blind Trusts
Have you created a blind trust?
f YES, was the trust approved by the Commissioner? YES NO
Gifts
Gifts and Benefits – Gifts or personal benefits connected directly or indirectly with the performance of your official duties received by you, your spouse or minor children must be reported immediately, if the value of the gift or benefit exceeds \$250, or if the value of all the gifts and benefits received from one source in any 12 month period exceeds \$250.
Since your most recent Member's Confidential Disclosure Statement, have you received any gifts which may have been given, directly or indirectly, in connection with your official duties? YES NO
f YES, have you disclosed the details to the Commissioner by submitting a Statement of Gifts and Personal Benefits (Form 5)? YES NO

Other Disclosure Forms which may be Applica	nie	
Please check if the following Forms apply to you, and if so, s	ubmit them together v	vith Form 1:
Form 2: Disclosure Statement for Minor Children See Question A.2 for details	applicable	not applicable
Form 3: Controlled Private Corporation Statement See Question A.3 for details	applicable	not applicable

PART A – PERSONAL INFORMATION

1. Contact Information			
Address	Phone (000) 000-000	Fax (000) 000-0000	Email
Home			(optional)
Legislature			
Constituency Office			
Constituency Office			
2. Family Information – Please list children.	the name of your sp	oouse and indicate	if you have minor
A "spouse" is a person who is married like relationship but does not include o	·	=	=
(a) has entered into a written	agreement under whic	h the member has a	greed to live apart, or
(b) is subject to an order of th	e court recognizing the	separation.	
A "child" includes a person to whom a or her family.	member has demonstr	ated a settled intent	ion to treat as a child of his
A "minor child" is a child under the ago	e of 19 years.		
Spouse's Name:		o	r not applicable
Do you have minor children?	YES NO		
YOU MUST ALSO COMPLE	IE <u>FORM 2</u> IF YO	OU HAVE ANY	VIINOK CHILDREN.

3. Private Corporation Ownership						
A "private corporation" is a corporation all of whose issued and outstanding securities are subject to restrictions on transfer and are beneficially owned directly or indirectly by not more than 50 persons.						
You, your spouse or one of your minor children individually controls a private corporation if any one of you, individually, holds enough shares in the corporation to be able to either elect or appoint a majority of its directors.						
If you or your spouse or one of your minor children inc corporations, please list below.	lividually <u>controls</u> one or more private					
Name of Corporation						
or not applicable						
	YOU MUST ALSO COMPLETE <u>FORM 3</u> FOR <u>EACH</u> OF THE CORPORATIONS LISTED ABOVE.					
 Offices and Directorships – If you hold an office or of corporation (other than in a social club, religious organ please list below. 	•					
NOTE:						
 Members of the Executive Council must not hold a social club, religious organization or political part conflict with the Member's public duties. 	•					
 <u>DO NOT</u> list offices or directorships in a controlled above. These should be listed in Form 3. 	private corporation listed in Question A.3					
Organization or Corporation	Position Held					
or not applicable	1					

5. Employment, Business or Professions – If you or your spouse is employed or engaged in a profession or business, please list below. Indicate whether the employment is full-time (F/T) or part-time (P/T). If you or your spouse receives income from the activities listed here, you must list the source of income and describe the type of income received in the questions that follow, in Part B.							
NOTE:							
-	Council must not engage in employment or the practice my of these activities are likely to conflict with the Memb		-	sion			
Name of Employer	Nature of Employment	F/T	P/T	М	S		
Name of Business	Nature of Business	F/T	P/T	М	S		
Name of Profession	Nature of Profession	F/T	P/T	М	S		
or not applicable							

PART B – STATEMENT OF INCOME

	h Columbia – List any income received by you or your ard, committee or commission of the Province of Britis	h	
NOTE: You <u>DO NOT</u> need to include you Assembly.	our MLA's salary and allowances from the Legislative		
Source	Description of Income (e.g. salary, fee for service, honorarium, etc.)	М	S
or not applicable			
any <u>OTHER SOURCES</u> during the last 1 NOTE: Include income from any person	you or your spouse has received income over \$1,000 for 2 months, please list below. In, corporation or subsidiary, partnership or organization for, manager, proprietor, partner or employee.		
Source	Description of Income (e.g. salary, fee for service, sales commission, rental income, etc.)	Μ	S
or not applicable			

PART C – STATEMENT OF ASSETS

1. Real Property Interests – An interest in real property includes registered ownership (joint tenancy or tenancy in common), part ownership (list percentage), interests in agreements for sale, rights or options to purchase, timeshares, leasehold interests, mineral claims, woodlot licences, mineral leases, and grazing permits. List all interests in real property held by you or your spouse, whether or not you are registered as owner.

NOTE:

- **DO NOT** list interests in a mortgage (i.e. money owed to you secured by a mortgage) as this is addressed in Question C.2, below.
- **DO NOT** include your constituency office.

	Address or Legal Description	Nature of Interest (e.g. joint tenancy, timeshare, rental agreement)	М	S
Primary/Family Residences				
Recreational (personal use)				
Investment (e.g. revenue				
property, commercial				
property)				
Other (specify e.g. vacant				
land, non- residential				
lease)				
or not appli	cable			

2. Money Owed to You Secured by a Mortgage – List below if you or your spouse is owed any money that is secured by a mortgage or an agreement for sale.							
Address or legal description of mortgaged property	Name of th	e person who owes	Relationship to M and/or S	М	S		
or not applicable							
3. Other Money Owed to You – any source (e.g. personal loans y associates). NOTE: If you are doubtful that the Commissioner.	ou have mad	de to friends, family men	nbers or business	from	1		
Description of the money owed (e.g. loan, promissory note, lien)		Name of the person or entity that owes you the money Relationship to M and/or S					
or not applicable							
4. Bank and Other Deposits – Lis company or other financial instit							
Name of Financial Institution		Type of Account		М	S		
or not applicable							

5. Hold-Mail Investment Accounts – A "hold-mail investment account" is one where you have given your broker complete investment discretion and have deliberately chosen not to receive any statements listing your investment holdings. Indicate below if you have hold-mail accounts for your investments held inside or outside an RRSP or similar registered plan (e.g. TSFA, RRIF, RESP, etc).					
Do you have a hold-mail account(s)? YES (registered) YES (non-registered) NO					
If YES, have you provided the Commissioner with a copy of your hold mail investment agreement? YES NO					
→ If you have a hold-mail account(s), it is sufficient when					
answering questions C.6, C.7 and C.8 relating to your					
investments to indicate "hold-mail account" in the column					
marked *, as by the nature of these accounts you do not have					
knowledge of your specific holdings.					

HOW TO REPORT INVESTMENTS - QUESTIONS C.6 – C.11

Mutual funds and segregated funds

List those held both INSIDE and OUTSIDE a registered plan such as an RRSP in Q. C.6

Investments OTHER THAN mutual funds and segregated funds (e.g. shares, GICs, bonds etc)

- List those held **INSIDE** a registered plan in **Q. C.7**
- ➤ List those held <u>OUTSIDE</u> a registered plan in **Q. C.8 C.11**
- 6. Mutual Funds and Segregated Funds List all mutual funds and segregated funds held by you or your spouse, both INSIDE and OUTSIDE of an RRSP or similar registered plan (e.g. RRIF, RESP, TFSA, etc). Indicate with a checkmark those plans that are SELF-DIRECTED ("SD").

NOTE:

- If the fund is limited to one industry or sector of the economy, name the sector or industry. Otherwise it is sufficient to state "open-ended".
- "SELF-DIRECTED" means an investment in which a person or the person's investment dealer or agent invests as selected or directed by the person.
- A **SPOUSAL** plan is where one spouse contributes to an RRSP but the other spouse owns the plan. For spousal plans, indicate who the contributor is (M or S) and check "SP".
- You **DO NOT** need to include a list of holdings within the fund.
- If you have a hold mail account, it is sufficient to state "hold-mail account" in the boxes marked with an *

MUTUAL FUNDS/SEGREGATED FUNDS HELD **INSIDE** A REGISTERED PLAN Name of Sector/Industry Type of Plan (e.g. RRSP, Name of Fund* SD? M S SP Institution or open-ended*? TFSA etc.) not applicable or

MUTUAL FUNDS/SEGREGATED FUNDS HELD OUTSIDE A REGISTERED PLAN						
Name of Institution	Name of Fund*		Sector/Industry or open-ended*?	SD?	М	s
or not applicable					•	
Γ						
plan (e.g. RRIF, RESP, plans that are <u>SELF-DI</u> NOTE:	TFSA, etc) owned IRECTED ("SD").	by you	red Retirement Savings Plan or similar r or your spouse. Indicate with a checkm h a person or the person's investment dec son.	ark t	hose	
Name of Institution	Type of Plan (e.g. RRSP)	SD?	List of Holdings (e.g. shares, cash, bonds, GICs etc.) *	М	s	SP
or not applicable		•				

QUESTIONS C.8 - C.11: INVESTMENTS HELD **OUTSIDE** A REGISTERED PLAN

8. Securities and Other Interests in Public Corporations – List all securities or other interests in public corporations held by you or your spouse.						
Name of Public Corporation *	Description of (e.g. shares,	of interest held bonds etc.)	М	S		
or not applicable						
9. Insider Holdings in Public CorporationsAn "insider" is someone who owns more than 10% officer of a public corporation.List below if you or your spouse is an insider of a			or			
Name of Public Corporation		% of total shares owned	М	S		
or not applicable						

10. Other Financial Assets – Check all inves	tments/assets held by you or your spouse.		
Asset		М	S
Government Bonds			
Corporate Bonds – please list here			
Debentures			
Annuities			
Pension Rights, including survivor benefits			
Guaranteed Investment Certificates (GICs) or o	other term deposits		
Life insurance with a cash surrender value			
Other (specify)			
or not applicable		ı	
shares or debt interests, interests in sole price held by you or your spouse. NOTE: • <u>DO NOT</u> include interests in control Question A.3.	rests in a PRIVATE business or corporation, include oprietorships, partnerships, and joint ventures ended to be a second point ventures ended private corporations already listed in	_	
<u>DO NOT</u> include interests in public			
Name of Private Business or Corporation	Nature of Interest (e.g. shares, joint venture)	М	S
or not applicable	<u>I</u>]	

Name of Trustee	Nature or Description of Trust Property	М	S
not applicable			
13. Trusteeship – List below if property.	you or your spouse administers a trust that holds real or pe	sona	al
Name of Beneficiary	Nature or Description of Trust Property	M	9
not applicable			
or not applicable			
or not applicable			
	you or your spouse has received a financial guarantee from	any	
14. Guarantees – List below if person or entity.	you or your spouse has received a financial guarantee from Relationship to M or S	any	9
14. Guarantees – List below if person or entity.			
14. Guarantees – List below if person or entity.			5
14. Guarantees – List below if y person or entity.			S
14. Guarantees – List below if y person or entity.			
14. Guarantees – List below if y person or entity. Name of Guarantor or not applicable	Relationship to M or S	M	
14. Guarantees – List below if y person or entity. Name of Guarantor or not applicable 15. Any Other Significant Asset		M	5
14. Guarantees – List below if y person or entity. Name of Guarantor or not applicable 15. Any Other Significant Asset listed owned by you or your specific properties.	Relationship to M or S t – List all other significant assets or investments not previo	M	
14. Guarantees – List below if y person or entity. Name of Guarantor or not applicable 15. Any Other Significant Asset	Relationship to M or S t – List all other significant assets or investments not previo	M	

PART D – STATEMENT OF LIABILITIES

1. Mortgages – List any debts you or your spouse owes that are secured by a mortgage.						
Name of Person/Institution who holds the mortgage	Address or legal description of mortgaged property			tion of property sidence)	М	S
or not applicable						
2. Guarantees – List all guarantees that you or your spouse has given.						
Name of debtor	Relationship to M or S			/Creditor (e.g. al institution)	М	S
or not applicable				I		
3. Unpaid municipal property taxes t	-	OTHER THAN FOR THE CUR your spouse owes.	RENT TA	X YEAR, list any un	pai	d
Property Address	Municipality		Taxa	ation Period	М	S
or not applicable			<u> </u>			I

4. Other unpaid taxes – <u>OTHER THAN</u> that you or your spouse owes (e.g. in		, list any other unpaid ta	xes	
Description of taxes owing	To whom taxes are owed	Taxation Period	М	S
or not applicable				
5. Support obligations – List any state per year (e.g. spousal, child support) NOTE: Support obligations will not be	that you or your spouse has.	bligations of \$5,000 or m	ore	
Person to whom support is paid			М	S
or not applicable				
6. Arrears – If you or your spouse is in further information below.	n arrears with respect to any s	upport obligations, prov	ide	
Description of Arrears			М	S
or not applicable			<u> </u>	1

7. Other Liabilities – List any other debts or liabilities of \$10,000 or more not listed above (e.g. loans, lines of credit, promissory notes, judgment debt). NOTE: You <u>DO NOT</u> need to disclose commercial accounts and credit card indebtedness that have been owing for less than 60 days and you expect to pay within 90 days.				
Name of person/institution to whom money is owed	Relationship	Description of liability	Δ	S

not applicable

or

PART E – MISCELLANEOUS INTERESTS

The information in this Part will not be publicly disclosed.

1. Party to Litigation – Indicate below if you or your spouse is named as a party, either as a Plaintiff or Defendant, in any existing civil litigation in British Columbia or elsewhere.					
Note: You <u>DO NOT</u> need to disclose any litigation in which you are named as a party solely in you capacity as one or both of a Member of the Legislative Assembly and a Member of the Executive Council.					
Named as a Party	М	S			
Plaintiff					
Defendant					
or not applicable	•				
2. Bankruptcy – Indicate below if you or your spouse is an undischarged bankrupt.					
Undischarged bankrupt	М	S			
or not applicable					
3. Estate Administration – Indicate below if you or your spouse is an executor of an estate for which probate has been sought or granted.					
Executor	М	S			
or not applicable	•				

Additional Forms

Throughout the year, you must submit the following Forms, as applicable:

Form 4: Material Change – Any material change must be reported to the Commissioner within 30 days.

A "material change" is an acquisition or disposition, whether in whole or in part, occurring after you file a disclosure statement, of any asset, liability, financial interest or source of income by you, your spouse or your minor children, or a private corporation controlled by any of you, if the change or event would reasonably be expected to have a significant effect on the information previously disclosed.

Form 5: Gifts and Benefits - Gifts or personal benefits connected directly or indirectly with the performance of your official duties received by you, your spouse or minor children must be reported immediately, if the value of the gift or benefit exceeds \$250, or if the value of all the gifts and benefits received from one source in any 12 month period exceeds \$250.

Public Disclosure

This confidential disclosure statement and other disclosure statements members are required to submit under section 16 of the Act are confidential and will be kept in a personal, protected file.

Once the meeting with the commissioner as required by s. 16(3) of the Act has taken place, and the contents of the member's disclosure statements have been confirmed, the commissioner will, in accordance with s. 17 of the Act, prepare a public disclosure statement containing all relevant information provided by the member. After the member has approved the accuracy of its contents, the public disclosure statement will be filed with the Clerk of the House.

The Office of the Conflict of Interest Commissioner retains all documents relating to a member for a period of five years after he or she ceases to be a member, after which the documents are destroyed unless there is an inquiry in progress under the Act concerning the member, or if a charge has been laid against the member under an Act of the Legislature and the documents relate to the matter.