

Office of the Conflict of Interest Commissioner

FORM 5

MEMBER'S STATEMENT OF GIFTS AND PERSONAL BENEFITS

Member's Name:

General Instructions

You are prohibited from accepting gifts or personal benefits given to you in connection with the performance of your official duties, whether directly or indirectly. This includes gifts or benefits given to your spouse or minor children. However there is an exception for gifts or personal benefits given to you or members of your family as an "incident of protocol or social obligations". If you are unsure whether you may accept a gift or benefit, please contact the Commissioner.

If you do accept a gift or personal benefit, you must complete and file this Form immediately in the event that:

- (a) the value of the gift or benefit exceeds \$250; or
- (b) the value of all the gifts and benefits you received directly or indirectly from one source in any 12 month period exceeds \$250.

1. Gifts and Personal Benefits – List all gifts and personal benefits with a value of over \$250 received by you, your spouse or minor children.					
Recipient (i.e. Member, spouse, child)	Donor	Value (0.00)	Date Received (yyyy-mm-dd)		
Description of Gift/Benefit					
Circumstances					

Recipient (i.e. Member, spouse, child)	Donor	Value (0.00)	Date Received (yyyy-mm-dd)		
Description of Gift/Benefit					
Circumstances					

Recipient (i.e. Member, spouse, child)	Donor	Value (0.00)	Date Received (yyyy-mm-dd)
Description of Gift/Benefit			
Circumstances			

Declaration:

By checking this checkbox in lieu of a signature, I certify that this statement, to the best of my knowledge, information and belief, discloses gifts or personal benefits accepted by me, my spouse, or minor children.

Date of Disclosure (yyyy-mm-dd)