TOWN OF LAMPMAN PUBLIC DISCLOSURE STATEMENT Form 1

Name:		
Address:		
employer, person, corporation, orga	nization, associat	es Act, I hereby disclose the name of every cion, or other body from which I or someone in led as an employee, director, manager,
My Name or Name of Family Member	Payer	Nature of Relationship
corporation in which I or someone in in my family is a director or a senior o	my family has a	es Act, I hereby disclose the name of each controlling interest, or of which I or someone
My Name or Name of Family Member	Name of Corpo	ration
Disclosure of Partnerships: Pursuant to subclause 142(2)(a)(iii) o partnership or firm of which I or som		<i>ies Act,</i> I hereby disclose the name of each y is a member:
My Name or Name of Family Member	Name of Partne	ership or Firm

Disclosure of Other Involvements:

Pursuant to subclause 142(2)(a)(iv) of *The Municipalities Act*, I hereby disclose the name of any corporation, enterprise, firm, partnership, organization, association, or body that I or someone in my family directs, manages, operates or is otherwise involved in that:

- (a) transacts business with the municipality;
- (b) the council considers appropriate or necessary to disclose; or
- (c) is prescribed:

My Name or Name of Family Member	Name of Corporation, Enterprise, Firm, Partnership, Organization, Association, or Body	

Disclosure of Property Holdings:

Pursuant to clause 142(2)(b) of *The Municipalities Act*, I hereby disclose the municipal address or legal description of any property located in the municipality or an adjoining municipality that is owned by:

- (a) me or someone in my family; or
- (b) a corporation, incorporated or continued pursuant to *The Business Corporations Act* or the *Canada Corporations Act*, of which I or someone in my family is a director or senior officer or in which I or someone in my family has a controlling interest:

Owner(s)	Municipal Address or Legal Description	Municipality

Disclosure of Contracts and Agreements:

Pursuant to clause 142(2)(c) of *The Municipalities Act*, I hereby disclose the general nature and any material details of any contract or agreement involving me or someone in my family that could reasonably be perceived to be affected by a decision, recommendation or action of the council and to affect my impartiality in the exercise of my office:

My Name or Name of Family Member	General Nature and Any Material Details of Any Contract or Agreement	

DECLARATION

do hereby declare that to the ballegations contained and made	, of the TOWN OF LAMPMAN, in the Province of Saskatchewan est of my knowledge, information and belief, the statements and e in this form are true and complete. I make this declaration for the in the full knowledge that it will be available for public examination.
Dated this day of	, 20
	Signature of Declaran
	Date Received: