

***Form 1
Confidential
Member's Disclosure Statement***

Members' Conflict of Interest Act

.....
Name of member

.....
Signature of member

.....
Date of disclosure

PART A
General Information

A-1 Contact Information

A. Home address	Phone number	Fax number
.....
.....	E-mail address
.....
B. Legislature address	Phone number	Fax number
.....
.....	E-mail address
.....
C. Constituency address	Phone number	Fax number
.....
.....	E-mail address
.....

A-2 Family Information

A. Do you have a spouse?	[] yes [] no
If yes, what is your spouse's name?	
B. Do you have children under the age of 19?	[] yes [] no
If yes, list their names and birthdates below:	
<i>Name</i>	<i>Birthdate</i>
.....
.....
.....
<u>Please attach separate sheet if needed</u>	

A-3 Private Corporation Ownership

A. Do you, your spouse or your children under the age of 19, or any combination of you, control one or more private corporations? [] yes [] no

If yes, complete **FORM 3** and in addition complete the following for each corporation:

1. Private Corporation

Name of corporation

Address

.....
.....

Nature of business

Affiliated corporation

.....
.....

• *Does this corporation have any business contracts or receive benefits from the Government of British Columbia?* [] yes [] no

If yes, describe:

.....
.....

2. Private Corporation

Name of corporation

Address

.....
.....

Nature of business

Affiliated corporation

.....
.....

• *Does this corporation have any business contracts or receive benefits from the Government of British Columbia?* [] yes [] no

If yes, describe:

.....
.....

Please attach separate sheet for additional corporations

PART B
STATEMENT OF ASSETS

B-1 Common Financial Interests

A. Do you or a member of your family have any assets? yes no
If yes indicate (√) in the following categories:

<i>Asset category</i>	<i>Member</i>	<i>Spouse</i>	<i>Child(ren)</i>
1. Bank and other deposits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Government bonds and securities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Guaranteed Investment Certificates or debentures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Pension rights	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Annuities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Life insurance policies with a cash surrender value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Registered Educational Savings Plans with a cash surrender value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B-2 Mutual/Segregated Funds

A. Do you or a member of your family hold mutual funds and/or segregated funds (*Other than those contained in RRSPs and RRIFs*)? [] yes [] no

If yes, complete the following and indicate (√) the holder of each fund.
 (M=Member, S=Spouse, C=Child(ren)):

<i>M</i>	<i>S</i>	<i>C</i>	<i>Fund name</i>	<i>Fund administrator</i>
[]	[]	[]
[]	[]	[]
[]	[]	[]
[]	[]	[]
[]	[]	[]
[]	[]	[]
[]	[]	[]
[]	[]	[]
[]	[]	[]
[]	[]	[]

Please attach most recent list of assets or a fund statement as supplied by the fund administrator/manager

B-3 Registered Retirement Savings Plans (RRSPs)

D. Do you or your spouse have an RRSP? [] yes [] no

If yes, complete the following for each RRSP plan (*M=Member, S=Spouse; Y=Yes, N=No*):

Plan number	Owner (✓)		Spousal (✓)	Self (✓) administered?		Trustee name
	M	S		Y	N	
1.	[]	[]	[]	[]	[]
2.	[]	[]	[]	[]	[]
3.	[]	[]	[]	[]	[]
4.	[]	[]	[]	[]	[]
5.	[]	[]	[]	[]	[]
6.	[]	[]	[]	[]	[]
7.	[]	[]	[]	[]	[]
8.	[]	[]	[]	[]	[]
9.	[]	[]	[]	[]	[]
10.	[]	[]	[]	[]	[]
11.	[]	[]	[]	[]	[]

Please attach separate sheet for additional plans

B-4 RRSP: Deposit and Bond Details

A. Within any of your RRSPs do you have any money on deposit (including term deposits and/or general investment certificates)? yes no

If yes, indicate in the box below the plan number for each deposit and/or certificate

(Plan # as shown in B3-D):

Plan # [____] [____] [____] [____] [____] [____] [____] [____] [____] [____] [____]

B. Within any of your RRSPs do you have any government or government guaranteed bonds? yes no

If yes, indicate in the box below the plan number for each bond

(Plan # as shown in B-3D):

Plan # [____] [____] [____] [____] [____] [____] [____] [____] [____] [____] [____]

C. Within any of your RRSPs do you have any other bonds? yes no

If yes, indicate the plan number and the name of the corporation or institution which issued the bond:

Plan # (i.e. 1, 2 etc)

Name of corporation or institution

.....
.....
.....
.....
.....

Please attach separate sheet for additional RRSPs

B-5 RRSP Continued

B. Do you hold within your RRSP any mutual funds or segregated funds? [] yes [] no

If yes, please indicate the plan number and the name of each fund:

<i>Plan #</i>	<i>Name of fund</i>
.....
.....
.....
.....
.....
.....
.....

Please provide a list of assets in each of the funds as provided by the fund administrator/manager

C. Do you hold within your RRSP any mortgage investments? [] yes [] no
If yes, indicate the plan number and the name of the corporation in which the investment is made:

<i>Plan #</i>	<i>Name of fund</i>
.....
.....
.....
.....
.....
.....
.....

D. Do you hold within your RRSP a *National Housing Act* mortgage backed security? [] yes [] no

Please attach separate sheet if needed

B-6 Registered Retirement Income Funds (RRIFs)

A. Do you or your spouse have any RRIFs? [] yes [] no

If yes, complete the following for each RRIF plan:

<i>Plan number</i>	<i>Owner (✓)</i>		<i>Spousal (✓) RRIF</i>	<i>Financial institution name</i>
	<i>Member</i>	<i>Spouse</i>		
.....	[]	[]	[]
.....	[]	[]	[]
.....	[]	[]	[]
.....	[]	[]	[]

Please attach separate sheet if needed

B-7 Other Common Financial Interests

A. Do you or a member of your family have any other financial interests which do not conveniently fit within the asset categories provided in B-1? [] yes [] no

If yes, list details:

.....

.....

.....

.....

.....

.....

.....

Please attach separate sheet if needed

B-8 Real Property Interests

A. Are you or a member of your family a registered owner of residential property that is primarily occupied by you or a member of your family? [] yes [] no

If yes, complete the following:

	<i>Owner (✓)</i>		<i>Address</i>	<i>Legal description</i>
	<i>Member</i>	<i>Spouse</i>		
1.	[]	[]
		
		
2.	[]	[]
		
		

B. Are you or a member of your family the registered owner of recreational property that is primarily used by you or a member of your family? [] yes [] no

If yes, complete the following:

	<i>Owner (✓)</i>		<i>Address</i>	<i>Legal description</i>
	<i>Member</i>	<i>Spouse</i>		
1.	[]	[]
		
		
2.	[]	[]
		
		

Please attach separate sheet if needed

B-8 Continued

C. Are you or a member of your family the registered owner of other land and improvements? [] yes [] no

If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

	<i>Owner (✓)</i> <i>M S C (✓)</i>	<i>Address and legal description</i>	<i>Name of debtor</i>
1.	[] [] []
2.	[] [] []
3.	[] [] []

D. Are you or a member of your family the holder (i.e. mortgagee) of a mortgage or an agreement for sale from someone else? [] yes [] no

If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

	<i>Owner (✓)</i> <i>M S C (✓)</i>	<i>Address and legal description</i>	<i>Name of debtor</i>
1.	[] [] []
2.	[] [] []

Please attach separate sheet if needed

B-8 Continued

E. Do you or a member of your family hold a lease as either owner or tenant? [] yes [] no

If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

	<i>M</i>	<i>S</i>	<i>C</i> (✓)	<i>Address of property</i>	<i>Owner</i>	<i>Tenant</i> (✓)
1.	[]	[]	[]	[]	[]
2.	[]	[]	[]	[]	[]
3.	[]	[]	[]	[]	[]
4.	[]	[]	[]	[]	[]

Please attach separate sheet if needed

B-8 Continued

F. Do you or a member of your family have other interests in relation to land held by you or a member of your family (i.e. mineral claims and leases, grazing permits and other similar interests)? [] yes [] no

If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

<i>M</i>	<i>S</i>	<i>C</i> (✓)	<i>Location of land</i>	<i>Nature of interest</i>
1.	[]	[]	[]
2.	[]	[]	[]
3.	[]	[]	[]
4.	[]	[]	[]

Please attach separate sheet if needed

B-9 Shares, Securities and Other Interests in Public Corporations

A. Do you or members of your family hold shares, securities or other interests in a public corporation?
[You need not include qualifying (membership) shares in a credit union or cooperative, but must include such things as bonds, debentures and stock options.]

[] yes [] no

If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

	<i>M</i>	<i>S</i>	<i>C (✓)</i>	<i>Name of corporation</i>	<i>Type of interest</i>
1.	[]	[]	[]
2.	[]	[]	[]
3.	[]	[]	[]
4.	[]	[]	[]
5.	[]	[]	[]
6.	[]	[]	[]
7.	[]	[]	[]

Please attach separate sheet if needed

B-9 Continued

B. Are you or a member of your family an “insider” (*an insider is someone who owns more than 10% of the voting shares or is a director or senior officer of a corporation*) in any of the corporations identified in B-9A? [] yes [] no

If yes, indicate (✓) which family member and corporations (*M=Member, S=Spouse, C=Child(ren)*):

	<i>M</i>	<i>S</i>	<i>C</i> (✓)	<i>Name of corporation</i>	<i>% of <u>Total</u> shares</i>
1.	[]	[]	[]
2.	[]	[]	[]
3.	[]	[]	[]
4.	[]	[]	[]
5.	[]	[]	[]
6.	[]	[]	[]
7.	[]	[]	[]
8.	[]	[]	[]

Please attach separate sheet if needed

B-10 Private Business Interests

A. Do you or a member of your family hold shares or debt interests in private corporations, interests in sole proprietorships, partnerships or joint ventures (other than private corporations identified in FORM 3)? [] yes [] no

If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

<i>M</i>	<i>S</i>	<i>C</i> (✓)	<i>Name and nature of business</i>	<i>Description of interest owned</i>
[]	[]	[]
		
		
		
[]	[]	[]
		
		
		
[]	[]	[]
		
		
		

Please attach separate sheet if needed

B-11 Trust Property

A. Are you or a member of your family the beneficiary of a trust that holds property? [] yes [] no

If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

<i>M</i>	<i>S</i>	<i>C</i> (✓)	<i>Name of trustee</i>	<i>Nature of trust property</i>
[]	[]	[]
		
[]	[]	[]
		

Please attach separate sheet if needed

B-12 Guarantees

A. Have you received any financial guarantee in your favour or in favour of a member of your family? yes no

If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

<i>M</i>	<i>S</i>	<i>C</i> (✓)	<i>Name and address of guarantor</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		
		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		
		

Please attach additional sheet if needed

B-13 All Other Assets

A. Do you or a member of your family own any other assets not previously listed? yes no

If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

<i>M</i>	<i>S</i>	<i>C</i> (✓)	<i>Nature of asset</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		

Please attach separate sheet if needed

PART C
Statement of Liabilities

C-1 Mortgages

A. Do you or members of your family owe money under a mortgage or a similar obligation? yes no

If yes, please complete the following (*M=Member, S=Spouse, C=Child(ren)*):

M S C (✓) *Address and legal description of mortgaged property*
1.

.....

Name and address of mortgagee (lender)

.....

.....

M S C (✓) *Address and legal description of mortgaged property*
2.

.....

Name and address of mortgagee (lender)

.....

.....

Please attach separate sheet if needed

C-2 Loans

A. Do you or a member of your family owe money to creditors other than on mortgages? [] yes [] no

If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

<i>M</i>	<i>S</i>	<i>C</i> (✓)	<i>Name and address of creditor</i>
[]	[]	[]
[]	[]	[]
[]	[]	[]
[]	[]	[]
[]	[]	[]

Please attach separate sheet if needed

C-3 Guarantees

A. Have you or a member of your family given guarantees (e.g. co-signed a loan) for anyone? yes no

If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

<i>M</i>	<i>S</i>	<i>C</i> (✓)	<i>Name and address of creditor</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

.....

Name and address of principal debtor

.....

.....

Name and address of creditor

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	-------

.....

Name and address of principal debtor

.....

.....

Name and address of creditor

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	-------

.....

Name and address of principal debtor

.....

.....

Please attach separate sheet if needed

C-4 Other Liabilities

A. Do you or members of your family have any other liabilities (other than delinquent taxes)? [You need not disclose commercial accounts and credit card indebtedness for less than 60 days and which you expect to pay within 60 days.] [] yes [] no

If yes, complete the following (M=Member, S=Spouse, C=Child(ren)):

<i>M</i>	<i>S</i>	<i>C</i> (✓)	<i>Description of liability</i>
[]	[]	[]
		

Name and address of person to whom liability owed

.....
.....

			<i>Description of liability</i>
[]	[]	[]
		

Name and address of person to whom liability owed

.....
.....

Please attach separate sheet if needed

C-5 Delinquent Taxes

A. Do you or a member of your family owe any delinquent taxes including overdue land taxes and unpaid income tax? yes no
 If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

<i>M</i>	<i>S</i>	<i>C</i> (✓)	<i>Description of delinquent taxes</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please attach additional sheet if needed

PART D
SOURCES OF INCOME

D-1 Income from the Province of British Columbia

A. Have you or a member of your family received income from any ministry, agency, board or commission of the Province of British Columbia during the last 12 months? [] yes [] no

If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

<i>M</i>	<i>S</i>	<i>C</i> (✓)	<i>Source</i> (Who paid it to you?)	<i>Type of income</i>
[]	[]	[]
		
[]	[]	[]
		
[]	[]	[]
		
[]	[]	[]
		

Please attach separate sheet if needed

D-2 Income from All Other Sources

A. Have you or a member of your family received income from any other sources during the last 12 months? [*Include income from any person, corporation or subsidiary, partnership or organization for services performed as an officer, director, manager, proprietor, partner or employee.*] yes no

If yes, complete the following (*M=Member, S=Spouse, C=Child(ren)*):

<i>M</i>	<i>S</i>	<i>C</i> (✓)	<i>Source</i> (Who paid it to you?)	<i>Type of income</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		

Please attach separate sheet if needed

PART E

EXECUTIVE COUNCIL MEMBERS ONLY

E-1 Employment, Profession or Business

A. Are you or your spouse or minor children engaged in any employment or profession or business in addition to your duties as a member of the Legislative Assembly and Executive Council?

Member [] yes [] no

Spouse [] yes [] no

Child(ren) [] yes [] no

If yes, what is the nature of the employment, profession or business?

[Please complete for each Member, Spouse and Child(ren)]

Member

Name of employment,
profession or business

Address of employment,
profession or business

Nature of employment,
profession or business

Spouse

Name of employment,
profession or business

Address of employment,
profession or business

Nature of employment,
profession or business

Please attach separate sheet if needed

E-1 Continued

	<i>Child(ren)</i>
Name of employment, profession or business
Address of employment, profession or business
Nature of employment, profession or business
<u><i>Please attach separate sheet if needed</i></u>	

E-2 Current Relationship

A. What is the current relationship you, your spouse or your minor children have with respect to an employment, profession or business identified in question E-1?

<i>Nature of relationship</i>	<i>Member</i>		<i>Spouse</i>		<i>Child(ren)</i>	
	<i>Yes</i>	<i>No</i>	<i>Yes</i>	<i>No</i>	<i>Yes</i>	<i>No</i>
Working full time or part time?	[]	[]	[]	[]	[]	[]
On leave of absence or sabbatical?	[]	[]	[]	[]	[]	[]
In receipt of benefits?	[]	[]	[]	[]	[]	[]

(please specify)

.....

Eligible for deferred benefits? [] [] [] [] [] []

(please specify)

.....

Other [] [] [] [] [] []

(please specify)

.....

.....

.....

.....

.....

.....

Please attach separate sheet if needed

E-3 Offices and Directorships

A. Do you hold an office or directorship? [Other than in a social club (i.e. a group formed with the principal purpose of promoting and providing for social purposes), religious organization, political party or Crown corporation.] yes no

If yes, identify the organization and list the *Offices (O)* or *Directorships (D)* held:

<i>Organization</i>	<i>List of O or D held</i>
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

Please attach separate sheet if needed

Form 2
Member's Declaration

Members' Conflict of Interest Act

(as of)
date declaration signed

Name of Member:

.....

I am familiar with the requirements of the *Members' Conflict of Interest Act*. My attached confidential Disclosure Statement, to the best of my knowledge, information and belief, accurately discloses all assets, liabilities, financial interests and sources of income of me, my spouse (if any) and my children under age 19 including a child to whom I have demonstrated a settled intention to treat the child as a child of my family (if any), and particulars of private corporations controlled by any of us, or a combination of us (if any), and all other information required by the Disclosure Statement.

.....
Date of disclosure

.....
Signature of Member

.....
Signature of Commissioner

.....
Date of meeting with Commissioner