CONFIDENTIAL

OFFICE OF THE ETHICS COMMISSIONER - PROVINCE OF ALBERTA MEMBER



ANNUAL ETHICS DISCLOSURE STATEMENT

based on your financial affairs as of December 31, 2022

Due noon, January 30, 2023

Please submit via email to the Office of the Ethics Commissioner disclosure@ethicscommissioner.ab.ca

Member Name	
Constituency	
Preferred email address for future contact pertaining to questions arising from your disclosure	
2000, and all subsequent amendments and have of Alberta where needed to inform myself of my This private disclosure statement accurately dis	icts of Interest Act (the Act), Chapter C-23, Revised Statutes of Alberta sought advice and information from the Office of the Ethics Commissioner obligations and the information required to be disclosed. closes, to the best of my knowledge, all assets, liabilities, financial interests, alldren, and private corporations controlled by any of us, or a combination of
I hereby certify that there are no conflicts of in	terest between my official responsibilities and public duties and the matters oncerning myself and, as far as is known to me, my spouse, minor children, s.
	I Agree Investment and/or Financial Statements Included Gift Tracking Sheet Included
Ethics Commissioner	Member's Signature
Date of Meeting with Member	Date of Submission of Disclosure Forms
IMPORTANT: There are four sections in this form. Everyo	ne must complete Section 1.

Complete Sections 2, 3, and/or 4 ONLY if they are relevant to you.

1. Member's Section 1 (ALL must complete)

- 2. Spouse or Adult Interdependent Partner Section 2 (complete ONLY if married or in an interdependent relationship)
- 3. Minor Children Section 3 (complete **ONLY** if you have children who are under 18 years of age as of January 1 of this disclosure period)
- 4. Private Corporations Section 4 (complete one "private corporation" disclosure form for each company in which you or your spouse are a Director, or where any combination of you, your spouse, and your children jointly hold more than 10% of the shares of a company).

If you have any questions, please feel free to contact us at 780-422-2273 or disclosure@ethicscommissioner.ab.ca

Section 1 Member

PERSONAL INFORMATION

Spouse/Adult Interdependent Partner	Or if N/A, check here

Given Names of Children under 18	Birthdate (MM/DD/YY)

Home Address:			
Street Address, City, and Postal Code	Work Phone	Cell Phone	Home Phone

Current Employment Info (including any previous positions in the current disclosure period)				
Name of Company/Organization Position/Title Salary				
Government of Alberta	MLA	\$120,936		
Additional remuneration for additional, special or committee allowances (i.e. Minister, Whip, Leader, or Committee Chair)				
Other				

Non-Profit Directorships and Offices (Example: non-profits, community leagues, etc.)		
Name of Company/Organization	Position Title	
	<u> </u>	

CORPORATE INFORMATION

PrivateCorporations				
Name of Corporation/Organization	Director/Officer/Percentage			
	Ownership			

OTHER INCOME

	Gross Amount
Rental Income	
Disability or pension income	
Trust fund income	
Other income from Private Corporations	
Other income (annuities)	
Other income (specify source)	
Other income (specify source)	

ASSETS (include all foreign assets/holdings)

*For urban properties, please use your municipal tax assessment value as provided in your assessment notice.

*For rural/farming properties, please use your best estimate or fair market value.

Real Property					
Туре	Location (street address or plan, block, lot and city/town)	*Assessed Value (see note above)	Outstanding mortgage balance	Who is your mortgage with (name of bank or institution)	
Primary Residence					
Secondary Residence					
Recreational Property					
Rental Properties					
Rental Properties					
Rental Properties					
Other Properties					
Other Properties					

Bank Accounts and Other Deposits			
Туре	Institution	Balance	
Chequing			
Savings			
Foreign Holdings (if applicable)			
Other Deposits or Accounts			
Other Deposits or Accounts			
Other Deposits or Accounts			
Other Deposits or Accounts			

Pension Rights		
Plan	Administrator	Years of Service
Life Insurance Po	olicies	
Insurer and type	(whole or term)	Cash Surrender Value or Insured Value
	ersonal Property - estimated repla	
Appraisal not nece	ssary but may be submitted if avai	ilable
		Estimated Total Value
Art		
Torrioler		
Jewelry		
Antiques and colle	ectables	
miliques and con-	cettores	
Musical instrume	nts and equipment	
	• •	
Household conten		
Household Collecti	ts	
Tools	ts	

Car/Truck/Boat and Recreational Vehicles (include make and model), bicycles, and motorbikes.	Check	www.au	totrader.ca
Year/Make/Model	Value		
Vehicle 1:			
Vehicle 2:			
Vehicle 3:			
Recreational Vehicle:			
Other Vehicles:			
Other Vehicles:			
		-	
Have you or any of your direct associates received payments (oth or expense reimbursement) from the Crown during the reporting		LA remu	ineration
or expense reminursement, from the crown during the reporting	, periou:	Yes	No

INVESTMENTS

*IMPORTANT NOTE: Please attach actual, detailed investment statements showing all specific investments and holdings as of the disclosure date, or as close as possible, and as provided by your financial advisor and/or broker including, but not limited to the following:

- 1 RRSP/RSP/LIRA
- 2 Stocks, Corporate Bonds and Other Interests in Publicly Traded Securities
- 3 TFSA
- 4 RESP
- 5 GICs/Canada Savings Bonds/Term Deposits, and Government (federal, provincial, or municipal) Backed Securities

*Other Investments and Significant Assets – Not captured above		
	Value	

^{*} Please attach statements

Do you hold, or own, any crypto-currency investments or derivatives of any kind?

YES NO

If YES, please attach statements or list which crypto investments you hold, how many units/ shares you have, and provide the most recent market value (as listed on your crypto-currency exchange or in your crypto-currency wallet).

LIABILITIES (includes all foreign liabilities/debts)					
Unpaid Municipal or Federal Taxes					
Type of unpaid tax (i.e. income, property)	Creditor/Agency (i.e. Municipality of X or Revenue Canada)	Amount Owing		3	Arrears pertaining to what years
Other Loans and Lines	of Credit				
Creditor			Amo	unt Owi	ng
Guarantees					
Creditor	Principal Debtor			Amount	Guaranteed
Support Obligations					
Relationship to Recipier	<u>nt </u>	An	ount	of Month	ly Obligation

Other Significant Liabilities			
Description of Liability	To Whom Owed	Amount Owing	
Legal Proceedings			
OTHER PERSONAL OR I	FINANCIAL INTERESTS NO	T ALREADY DISCI	LOSED
Description of Interest			Value
NON COMMEDCIAL AID	FRAVEL – Please list all Non-Con	mmanaial Ain Tuarral	Include ein
travel previously reported and		ilinerciai Air Travei -	include air
l proportion and	,,,,,		
OTHER REDTINENT DIS	CLOCUDEC		
OTHER PERTINENT DIS	CLOSURES		
Provide details below:			
Have you or your spouse roll foo, please provide details	eceived any inheritances of any s.	kind in the last year	•?
I			

Section 2

$Spouse \, or \, Adult \, Interdependent \, Partner \, (if applicable)$

Important Note: Please attach actual, detailed investment statements
(RRSP&Spousal/RSP/LIRA/Securities/TFSA/GICs/Bonds, etc.) showing all specific investments
and holdings as at the disclosure dates and as provided by your financial advisor and/or broker.

Spouse/Partner Full	Name				
INCOME:					
Source of Income	Comp	any and Position		 Annual A	A mount
Employment Employment	Comp	any and i ostion		Aimuai	Amount
Business					
Rental					
Pension					
Investments					
Other					
	·			1	
ASSETS (include all	foreign	holdings) – if joint with	spouse, please e	enter "joint v	with spouse'
Real Property					
Location (street address o block, lot and city/town)	or plan,	*Assessed Value (per municipal assessment notice)	Outstandin balance	ng mortgage	Who is your mortgage with (name of bank or institution)
Bank Accounts and	Other 1				
Type		Institution	Balance		

Vehicles	Make/Model/Year	Value
	Value	
Household and personal property		
(if separate from spouse/partner)		
	Name of Employer,	Value and Years of Service
Pension Rights		
8		
	Company Name and	l Value
Insurance Policies		
	Value	
Non-incorporated business		
interests		
	Attach Statements	
Investments	Attach detailed inve	estment statements

LIABILITIES: If joint with spouse, please enter "joint with spouse"		
	To Whom	Amount
Unpaid Municipal Realty Taxes		
Loans or Lines of Credit		
Guarantees		
Unpaid Income Tax		
Support Obligations		
Other Significant Liabilities		

OTHER PERTINENT DISCLOSURES AND FINANCIAL	INTERESTS – if joint with spouse, please enter "joint with spouse"

Section 3

Minor Children (under the age of 18)

Please attach actual, detailed investment statements

(RRSP/RSP/RESP/LIRA/Securities/TFSA/GICs/Stocks/Bonds, etc.) showing all specific investments and holds as at the disclosure date and as provided by your financial advisor and/or broker.

Minor Child/Children Given Names	Surname if Different
INCOME.	
INCOME:	Annual Amount
Source of Income	Annual Amount
ASSETS: - include foreign holdings if ap	pplicable
	11
Bank Accounts	
Bank Accounts	
Bonds and Government Securities	
Bonds and Government Securities	
Bonds and Government Securities Life Insurance	
Bonds and Government Securities Life Insurance	
Bonds and Government Securities Life Insurance Annuities/Trust Fund	
Bonds and Government Securities Life Insurance Annuities/Trust Fund	
Bank Accounts Bonds and Government Securities Life Insurance Annuities/Trust Fund RESP (attach statements) Other Significant Assets	

LIABILITIES:	
Loans	
Unpaid Income Tax	
Other Significant Liabilities	
	,
OTHER SIGNIFICANT INTERESTS	

Section 4

Private Corporations

Note: Please complete one 'Private Corporation' disclosure form for each company in which you or your spouse are a Director, or where any combination of you, your spouse and your children jointly hold more than 10% of the shares of a company.

NAME OF CORPORATION:			
ANNUAL CORPORATE INCOM	ME:		
Gross:			
Net:			
ACCEPTO			
ASSETS:			
Real Property	T		T
Location (street address or plan, block, lot and city/town)	Assessed Value (per municipal assessment	Outstanding mortgage balance	Who is your mortgage with (name of bank or
	notice)		institution)
Cash and Equivalencies			
Bonds and Government Securities			
GICs, Term Deposits, etc.			
Stocks/Securities/Interests			
in Public Corporations			
Annuities			
Other Business Interests			
Equipment			
Furnishings and Other Corporate Property			

LIABILITIES	
Legal Proceedings	
Unpaid Income Tax	
Loans and Lines of Credit	
Unpaid Municipal Taxes	
Other Significant Liabilities	
OTHER FINANCIAL INTE	RESTS: