

CONFIDENTIAL

**OFFICE OF THE ETHICS COMMISSIONER
PROVINCE OF ALBERTA**

**MEMBER'S PRIVATE DISCLOSURE STATEMENT
FIRST TIME FILERS: FORM 1: MEMBER
As at April 1, 2009**



MEMBER' NAME:

CONSTITUENCY NAME:

DECLARATION:

I am familiar with the requirements of the *Conflicts of Interest Act*, Chapter C-23, Revised Statutes of Alberta 2000, and all subsequent amendments.

My private disclosure statement, to the best of my knowledge, accurately discloses all assets, liabilities, financial interests, and income of myself, my spouse or adult interdependent partner, my minor children, and private corporations controlled by any of us, or a combination of us, as required by that Act.

Member

Date of Submission of Disclosure Forms

Ethics Commissioner

Date of Meeting with Member

The following forms must be completed by the Member, if applicable. Please indicate with an "X" those additional forms that are applicable to your disclosure statement. Reference: *Conflicts of Interest Act*, section 12(a).

	<u>Applicable</u>	<u>Not Applicable</u>
Form 2 -- Member's Spouse or Adult Interdependent Partner (see Definitions on Form 2)	<input type="checkbox"/>	<input type="checkbox"/>
Form 3 -- Minor Child (defined in section 1(1)(e))	<input type="checkbox"/>	<input type="checkbox"/>
Form 4 -- Private Corporation (defined in section 1(1)(f))	<input type="checkbox"/>	<input type="checkbox"/>

GENERAL INFORMATION

1. PERSONAL INFORMATION

Home Address:	Phone No.	Fax No.
Legislature Office Address:	Phone No.	Fax No.
Constituency Office Address:	Phone No.	Fax No.

2. PRIVATE CORPORATIONS CONTROLLED BY THE MEMBER AND THE MEMBER'S SPOUSE OR ADULT INTERDEPENDENT PARTNER AND MINOR CHILDREN, OR ANY ONE OR MORE OF THEM.

Please provide a list of the names of all private corporations controlled by you, your spouse or adult interdependent partner, or your minor children, or any combination of you. Reference: *Conflicts of Interest Act*, section 12.

NOTE: Private corporations listed under this section are required to be further disclosed on Form 4. If a private corporation is inactive, you may use the short form to indicate that the private corporation has no individual income, assets, liabilities, or financial interests over \$1,000.

3. OFFICES AND DIRECTORSHIPS.

<p>(A) Are you a director or senior officer of any corporation? Please list the corporations and the position held by you in each corporation.</p>	<p>Corporation(s):</p>	<p>Position(s) Held:</p>
<p>(B) Do you hold any offices or directorships that are not permitted by section 6 of the <i>Conflicts of Interest Act</i>? Members of the Executive Council should also refer to section 21 of the Act. Please list any offices or directorships held by you, as defined in those sections.</p>	<p>Organization(s):</p>	<p>Office(s) or Directorship(s) Held:</p>

4. EMPLOYMENT.

Are you currently on leave of absence from any employer or employment? If so, please provide specifics.

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STATEMENT OF INCOME

1. INCOME FROM THE PROVINCE OF ALBERTA*. List all income you have received from any ministry, agency, board, commission, or committee of the Province of Alberta or from the Legislative Assembly of Alberta in the immediate past calendar year and income expected to be received within the current calendar year. Reference: *Conflicts of Interest Act*, sections 12(d), 14(3), 14(4)(b), and 14(6).

Immediate Past Calendar Year	Source	Description of Income	Amount
	Legislative Assembly of Alberta	Indemnity	
Legislative Assembly of Alberta	Tax Free Allowance		

Current Calendar Year (expected income to year-end)	Source	Description of Income	Amount
	Legislative Assembly of Alberta	Indemnity	
	Legislative Assembly of Alberta	Tax Free Allowance	

2. INCOME FROM ALL OTHER SOURCES*. List all other income you have received in the immediate past calendar year and income expected to be received within the current calendar year. Reference: *Conflicts of Interest Act*, sections 12(d), 14(3), 14(4)(b), and 14(6).

Immediate Past Calendar Year	Source	Description of Income	Amount

Current Calendar Year (expected income to year-end)	Source	Description of Income	Amount

* Should you receive income other than on a calendar year basis, please indicate the time period which applies to that particular circumstance (example: the fiscal year used by a private business interest or short-term committee or task force assignment).

3. CONFIDENTIALITY. Please state whether any source of income received by your spouse or adult interdependent partner or minor child or a private corporation is or will be received in respect of services or things that are customarily provided on a confidential basis. Reference: Section 14(7)(a) of the *Conflicts of Interest Act*. **NOTE:** No amounts or values relating to income, assets, liabilities, or financial interests will be disclosed publicly.

4. POSSIBILITY OF SERIOUS HARM TO BUSINESS. Please state whether there is a possibility of serious harm to a business of your spouse or adult interdependent partner or minor child or a private corporation which would justify a departure from the general principle of public disclosure. Reference: Section 14(7)(b) of the *Conflicts of Interest Act*.

STATEMENT OF ASSETS

1. REAL PROPERTY INTERESTS. List all interests in land held by you, including family residences, recreational property, leasehold interests, and mortgages, whether or not you are registered as owner, showing separately which properties are used primarily as a residence or for recreational purposes by you or one of your family. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a) and (c), and 14(6).

	Address/Legal Description	Nature of Interest*	Value
Residence(s)			

	Address/Legal Description	Nature of Interest*	Value
Recreational			

	Address/Legal Description	Nature of Interest*	Value
“Other” (e.g. “farm,” “rental,” etc.)			

* Examples of Nature of Interest: joint tenancy, tenancy in common, joint property, common property, part ownership (indicate percentage)

2. BANK AND OTHER DEPOSITS. List all money you have on deposit with a chartered bank, trust company, or other financial institution in Alberta that is lawfully entitled to accept deposits. (Account numbers are not required.) Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a), and 14(6).

Name of Financial Institution	Nature of Account	Approx. Amount

3. CANADA SAVINGS BONDS AND GOVERNMENT SECURITIES. List all Canada Savings Bonds, Alberta Capital Bonds, and other investments or securities of fixed value held by you and issued or guaranteed by any level of government in Canada or any agency of such government. (Serial numbers are not required.) Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a), and 14(6).

NOTE: If these instruments are held in an RRSP, please include them in section 6 of this Part and not in this section.

Description of Bond or Security	Face Value

4. GUARANTEED INVESTMENT CERTIFICATES, TERM DEPOSITS, AND SIMILAR INSTRUMENTS. List all guaranteed investment certificates (GICs), term deposits, and all other similar financial instruments held by you. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a), and 14(6).

NOTE: If these instruments are held in an RRSP, please include them in section 6 of this Part and not in this section.

Name of Issuer	Description of Instrument	Amount Invested

5. MUTUAL FUNDS. List all your holdings in mutual funds. Please indicate with an asterisk (*) which mutual funds held by you are open-ended mutual funds. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a), and 14(6).

NOTE: If these instruments are held in an RRSP, please include them in section 6 of this Part and not in this section.

Name of Fund	No. of Units	Value

6. REGISTERED RETIREMENT SAVINGS PLANS OR SIMILAR INSTRUMENTS. List all RRSPPs / LIRAs / RIFs owned by you, and indicate those plans that are self-directed. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a), and 14(6).

Name of Institution	Please ✓ if this account is self-directed	List of Holdings*	Value

* If it is more convenient, you may attach a recent statement from your financial advisor or the financial institution listing the holdings in your account.

7. PENSION RIGHTS. List all pension rights belonging to you, excluding the Canada Pension Plan. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), and 14(6).

Name of Plan	Administered by	Years of Pensionable Service

8. LIFE INSURANCE POLICIES. List all life insurance policies owned by you. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), and 14(6).

Issuer	Type of Policy (e.g. Term, Life)	Cash Surrender Value
MLA Group Plan		N/A

9. ANNUITIES. List all annuities held by you. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a), and 14(6).

Issuer	Description	Value

10. SECURITIES AND OTHER INTERESTS IN PUBLIC CORPORATIONS. List all securities or other interests held by you in public corporations. Reference: *Conflicts of Interest Act*, sections 1(1)(i) and (j), 1(2), 1(3), 12(a), 14(3), 14(4)(a), and 14(6). Members of the Executive Council and the Leader of the Opposition should also review sections 20, 22 and 23.

NOTE: If these instruments are held in an RRSP, please include them in section 6 of this Part and not in this section.

Name of Public Corporation	Description, inc. number of shares (if it is more convenient for you, you may attach a copy of a recent statement or print-out from a financial advisor/institution)	Value

11. PRIVATE BUSINESS INTERESTS. List all private business interests including shares or debt interests in private corporations, interests in sole proprietorships, partnerships, and joint ventures held by you. **NOTE:** Do not include the private corporations listed under paragraph 2 of Part I. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a), and 14(6).

Name of Business	Business Activities	Nature of Interest (i.e. sole proprietorship, 50%, etc.)	Value

12. HOUSEHOLD AND PERSONAL PROPERTY. List personal property with a commercial resale value over \$1,000. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a) and (d), and 14(6). **NOTE:** Things used personally by a Member or one of the Member's family primarily for transportation, household, educational, recreational, social or esthetic purposes will not be disclosed publicly.

Description of Property	Approximate Value

13. OTHER SIGNIFICANT ASSETS. List all other significant assets owned by you. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a), and 14(6).

Description of Asset	Approximate Value

STATEMENT OF LIABILITIES

1. MORTGAGES. List all mortgages in respect of which you owe money. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a), and 14(6).

Name of Person/Institution Who Holds the Mortgage	Property on which Mortgage is Held	Approximate Amount

2. LOANS AND LINES OF CREDIT. List all loans other than mortgages or lines of credit in respect of which you owe money. If you have an existing line of credit but do not owe any money on it, please include the details, noting the approximate amount owing is \$0. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a), and 14(6).

Person/Institution to Whom Money is Owed	Reason for Loan/Line of Credit	Approximate Amount

3. GUARANTEES. List all guarantees given by you. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a), and 14(6).

Name of Creditor	Person/Entity for whom guarantee is given	Amount

4. UNPAID MUNICIPAL REALTY TAXES. List any unpaid realty taxes owing by you (other than for the current tax year). Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a) and (e), and 14(6). NOTE: Unpaid taxes under the *Municipal Government Act* or the *School Act* will be disclosed publicly.

Property Address	Municipality	Taxation Period	Amount

5. UNPAID INCOME TAX. List all income taxes unpaid and owing by you. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), 14(4)(a) and (e), and 14(6). NOTE: Unpaid income taxes will not be disclosed publicly.

Year	Amount Owing

6. SUPPORT OBLIGATIONS. List all support obligations upon you. Reference: *Conflicts of Interest Act*, sections 12(a), 12(b.2), 14(3), 14(4)(a) and (f), and 14(6). NOTE: Support obligations will not be disclosed publicly.

Relationship to Member	Amount of Obligation

Are you in arrears with respect to any maintenance payable? If so, please provide further information:

7. OTHER SIGNIFICANT LIABILITIES. List all other significant liabilities, including amounts owing on a personal credit card over \$1,000, carried for more than three months and unpaid at the date of filing. Reference: *Conflicts of Interest Act*, sections 12(a), (b), (b.1) and (b.2), 14(3), 14(4)(a), and 14(6).

To whom is the liability owed?	Description	Amount

Are you aware of any legal proceedings being brought against you? If so, please provide further information:

STATEMENT OF FINANCIAL INTERESTS

List all other significant financial interests you have. Reference: *Conflicts of Interest Act*, sections 12(a), 14(3), and 14(6).

Description of Interests	Value

FEES, GIFTS, AND OTHER BENEFITS

Section 7 of the *Conflicts of Interest Act* deals with disclosure of fees, gifts, or other benefits received by you, your spouse or adult interdependent partner, or your minor children. If the fee, gift, or other benefit was accepted as an incident of protocol or as part of the social obligations of your office **and** the total value from any one source during the calendar year was more than \$400, you must seek the approval of the Ethics Commissioner to retain the fee, gift, or other benefit. If you have accepted any such item(s), please provide further details below.

- No fees, gifts, or other benefits received over \$400 from any one source
- The following fees, gifts or other benefits over \$400 have been received by me, my spouse or adult interdependent partner or my minor children

Description of Fee, Gift or Benefit	Received From	Circumstances surrounding receipt *	Estimated Value

NOTE:

You are not required to report a gift or other non-monetary benefit that is accepted by you or your spouse or adult interdependent partner or minor child from your political party or constituency association or from a charitable organization.

TRAVEL ON NON-COMMERCIAL AIRCRAFT

Have you travelled on non-commercial aircraft in your capacity as a Member of the Legislative Assembly or as a member of the Executive Council or as a holder of an office to which you were elected or appointed by the Legislative Assembly? For the purposes of this disclosure, “non-commercial aircraft” does not include non-commercial aircraft chartered by the Crown or private aircraft owned or leased by the Crown. Yes No If you have accepted such travel, please provide information below.

Date of Travel	Travel provided by	Purpose of the travel