

**PREMIER'S AND MINISTERS' STAFF
ANNUAL ETHICS DISCLOSURE STATEMENT**

Based on your financial affairs as of September 30, 2024

Please submit via email to disclosure@ethicscommissioner.ab.ca

| | |
|-------------------------------------------------------------------------------------------------|--|
| Premier's or Ministers' Staff Name | |
| Ministry | |
| Preferred email address for future contact pertaining to questions arising from your disclosure | |

DECLARATION:

I am familiar with the requirements of the Conflicts of Interest Act (the Act), Chapter C-23, Revised Statutes of Alberta 2000, and all subsequent amendments and have sought advice and information from the Office of the Ethics Commissioner of Alberta where needed to inform myself of my obligations and the information required to be disclosed.

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

I hereby certify that there are no conflicts of interest between my official responsibilities and public duties and the matters contained in this private disclosure statement concerning myself and, as far as is known to me, my spouse, minor children, and private corporations controlled by any of us.

- ☐ Investment and/or Financial Statements Included
- ☐ I Agree

Ethics Commissioner

Premier's or Ministers' Staff

Date of Meeting with Premier's
or Ministers' Staff

Date of Submission of Disclosure Forms

IMPORTANT: *There are four sections in this form. Everyone must complete Sections 1. Complete Sections 2, 3, and/or 4 ONLY if they are relevant to you.*

1. Premier's and Ministers' Staff 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

Premier's and Ministers' Staff

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 | | |
| | | |
| | | |

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

CORPORATE INFORMATION

| Private Corporations | |
|----------------------------------|---------------------------------------|
| Name of Corporation/Organization | Director/Officer/Percentage Ownership |
| | |
| | |
| | |

OTHER INCOME

| If you have received income from any source in the last year other than previously noted, please provide details below. | |
|-------------------------------------------------------------------------------------------------------------------------|--------------|
| | 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 of fair market value. | | | | |
| Real Property | | | | |
| Type | 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 | | |
|----------------------------------|-------------|---------|
| Type | 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 Policies | |
|----------------------------------|---------------------------------------|
| Insurer and type (whole or term) | Cash Surrender Value or Insured Value |
| | |
| | |

| Household and Personal Property (estimated replacement value or appraised value <i>(only if applicable)</i>) | |
|------------------------------------------------------------------------------------------------------------------|-----------------------|
| | Estimated Total Value |
| Art | |
| Jewelry | |
| Antiques and collectables | |
| Musical instruments and equipment | |
| Household contents | |
| Tools | |

| | | |
|-----------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------|
| Car/Truck/Boat and Recreational Vehicles (include make and model), bicycles, and motorbikes. | | Check www.autotrader.ca |
| Year/Make/Model | | Value |
| Vehicle 1: | | |
| Vehicle 2: | | |
| Vehicle 3: | | |
| Recreational Vehicle: | | |
| Other Vehicle: | | |
| Other Vehicle: | | |

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 | Arrears pertaining to what years |
| | | | |
| | | | |

| Other Loans and Lines of Credit | |
|----------------------------------------|---------------------|
| Creditor | Amount Owing |
| | |
| | |
| | |

| Guarantees | | |
|-------------------|-------------------------|--------------------------|
| Creditor | Principal Debtor | Amount Guaranteed |
| | | |
| | | |
| | | |
| | | |

| Support Obligations | |
|----------------------------------|-------------------------------------|
| Relationship to Recipient | Amount of Monthly Obligation |
| | |
| | |
| | |

| Other Significant Liabilities | | |
|-------------------------------|--------------|--------------|
| Description of Liability | To Whom Owed | Amount Owing |
| | | |
| | | |
| | | |

| Legal Proceedings |
|-------------------|
| |

| OTHER PERSONAL OR FINANCIAL INTERESTS NOT ALREADY DISCLOSED | |
|-------------------------------------------------------------|-------|
| Description of Interest | Value |
| | |

| NON-COMMERCIAL AIR TRAVEL – Please list all Non-Commercial Air Travel - Include air travel previously reported and any travel not yet reported. |
|-------------------------------------------------------------------------------------------------------------------------------------------------|
| |

| OTHER PERTINENT DISCLOSURES |
|-----------------------------|
| Provide details below: |
| |

| Have you or your spouse received any inheritances of any kind in the last year? If so, please provide details. |
|-------------------------------------------------------------------------------------------------------------------|
| |

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 | Company and Position | Annual Amount |
| Employment | | |
| Business | | |
| Rental | | |
| Pension | | |
| Investments | | |
| Other | | |

| ASSETS (include all foreign holdings) – if joint with spouse, please enter “joint with spouse” | | | |
|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------|----------------------------------------------------------------|
| Real Property | | | |
| Location (street address or plan, block, lot and city/town) | *Assessed Value (per municipal assessment notice) | Outstanding mortgage balance | Who is your mortgage with (name of bank or institution) |
| | | | |
| | | | |
| | | | |
| Bank Accounts and Other Deposits | | | |
| Type | Institution | Balance | |
| | | | |
| | | | |
| | | | |
| | | | |

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

If you have minor child/children under 18 years of age as at March 30 of the reporting period, please provide details below.

| Minor Child/Children Given Names | Surname if Different |
|----------------------------------|----------------------|
| | |
| | |
| | |
| | |

INCOME:

| Source of Income | Annual Amount |
|------------------|---------------|
| | |
| | |

ASSETS: - include foreign holdings if applicable

| | |
|---------------------------------|--|
| 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 INCOME: | |
| Gross: | |
| Net: | |

| | | | |
|-------------------------------------------------------------|--------------------------------------------------|------------------------------|---------------------------------------------------------|
| ASSETS: | | | |
| Real Property | | | |
| Location (street address or plan, block, lot and city/town) | Assessed Value (per municipal assessment notice) | Outstanding mortgage balance | Who is your mortgage with (name of bank or 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 INTERESTS: |
|-----------------------------------|
| |