

Designated Senior Official ANNUAL FINANCIAL DISCLOSURE STATEMENT

Based on your financial affairs as of June 30, 2025

Due noon, November 4, 2025

Please submit completed form and accompanying material via email to disclosure@ethicscommissioner.ab.ca

Designated Senior Official's		
Name		
Agency name and responsible		
ministry		
Preferred email address for future		
contact pertaining to questions		
arising from your disclosure		
DECLARATION.		
DECLARATION:	ata of Interest Act (the	Act Chanter C 22 Pavined Statutes of Alberta 2000 and
		Act), Chapter C-23, Revised Statutes of Alberta 2000, and from the Office of the Ethics Commissioner of Alberta
where needed to inform myself of my obligatio		
, , ,		,
		ny knowledge, all assets, liabilities, financial interests, and
	en, and private corpor	ations 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	nterest hetween my o	official responsibilities and public duties and the matters
		, as far as is known to me, my spouse, minor children, and
private corporations controlled by any of us.	gg	, ao ian' ao io imonina aman' any apasaona amin' a
I agree to the above statement		
Investment and/or financial statemen	s included	
Cignotone of Designated Conice Officia		Cidnotono of Ethios Commissioner
Signature of Designated Senior Officia		Signature of Ethics Commissioner
		(after annual meeting has occurred)
Data Culturalities to Office of the Ethics		Data of Ethios Commissions and advised
Date Submitted to Office of the Ethics	Jonnmissioner	Date of Ethics Commissioner's signing
IMPORTANT:		
IFIFORIANI.		

There are four sections in this form. Everyone must complete Section 1.

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

If you have any questions, please feel free to contact us disclosure@ethicscommissioner.ab.ca

Designated Senior Official SECTION 1- Member's Section*

*Must be completed by each Designated Senior Official

PERSONAL INFORMATION

Spouse/Adult Interdependent Partner's Name		Or if N/A, chec	k here	
Given Names of Children under 18			Birthdate	
HOME MAILING ADDRESS (include street address, PO Box, City, an Code)	d Postal	Work Phone	Cell Phone	Home Phone
,				
CURRENT EMPLOYMENT INFORMATION (noluding one		iono hold in the la	oot voor)
CURRENT EMPLOYMENT INFORMATION (i Name of Company/Organization	Position/Tit		Salary	
Please attach a copy o your current emplo	oyment contra	ct and any am	endments,	
OR				
If previously provided, check here				

CORPORATE INFORMATION	
PRIVATE CORPORATION	
Name of Company/Organization	Position Title
OTHER INCOME	
OTHER INCOME	
f you have received income from any source in	the last year other than previously noted, please
f you have received income from any source in provide details below:	the last year other than previously noted, please Gross Amount
f you have received income from any source in provide details below: Type Rental Income	
f you have received income from any source in provide details below: Type Rental Income Disability or Pension Income	
f you have received income from any source in provide details below: Type Rental Income Disability or Pension Income	
f you have received income from any source in provide details below: Type Rental Income Disability or Pension Income Trust Fund Income Other Income from Private Corporations	
f you have received income from any source in provide details below: Type	

NON-PROFIT DIRECTORSHIPS AND OFFICES (ie-nonprofits, community leagues, political boards, etc)

Position Title

Name of Company/Organization

ASSETS (include all foreign assets/holdings)

REAL PROPERTY

*For urban properties, please use your municipal tax assessment value of your assessment notice.

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

(No need to include a copy of the assessments, please just record the information below)

Туре	Location (street address or plan, block, and city/town)	*Estimated Value	Outstanding Mortgage Balance	Who Mortgage is With
Primary Residence				
Secondary Residence				
Recreational Property				
Rental Property				
Rental Property				
Rental Property				
Other Property				
Other Property				

BANK ACCOUNTS AND OTHER DEPOSITS

Туре	Institution	Balance
Chequing		
Savings		
Foreign Holdings		
Other Deposits or Accounts		
Other Deposits or Accounts		
Other Deposits or Accounts		

PENSION RIGHTS

Plan	Administrator	Years of Service

LIFE INSURANCE POLICIES		
Plan	Administrator	
HOUSEHOLD AND PERSONAL PROPERTY (estimated rep	lacement value	total of items such as art.
jewelry, antiques and collectibles, musical instruments		
Brief description of items		Estimated Replacement Value
VEHIOLES (oor truck boot represtings) vehicles etc)		
VEHICLES (car, truck, boat, recreational vehicles, etc)	Fating	ated Total Fair Market Value
Brief description of vehicles	ESUIT	ated Total Fair Market Value

INVESTMENTS

**IMPORTANT NOTE: Please attach actual detailed investment statements and holdings as of the disclosure date that shows, in detail, what the money is invested in. Your bank, broker or financial advisor can assist you in obtaining these documents.

Such investments include, but are not limited to:

- 1. RRSP/RSP/LIRA
- 2. Stocks, corporate bonds, and other 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	Value

^{**} Please attach detailed investment statements showing how much money is invested in what

Do you hold, or own, any cryptocurrency investments or derivatives of any kind?

YES NO

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

Cryptocurrency Holding	Value

LIABILITIES

UNPAID MUNICIPAL OR FEDERAL TAXES

Type of unpaid tax (ie- income, property)	Creditor/Agency (ie- municipality of X or Revenue Canada)	Amount Owing	Arrears pertaining to what year(s)

OTHER LOANS AND LINES OF CREDIT

Creditor	Amount Owing

GUARANTEES

Creditor	Principal Debtor	Amount Guaranteed

SUPPORT OBLIGATIONS

R	Relationship to Recipient	Amount of Monthly Obligation

OTHER SIGNIFICANT LIABILITIES

Description of Liability	To Whom Owed	Amount Guaranteed

Legal Proceedings (where the Member is the defendant/respondent)			
OTHER PERSONAL OR FINANCIAL INTERESTS NOT ALREADY DISCLOSED			
Description of Interest(s)	Value(s)		
NON-COMMERCIAL AIR TRAVEL			
Please provide details of non-commercial flights, including the circumstances	as to why the flight		
was offered and accepted			
OTHER PERTINENT DISCLOSURES			
Provide details			
Have you received any inheritances of any kind in the last year? If so, please p	rovide details:		

Designated Senior Official SECTION 2- Spouse/Adult Interdependent Partner Section*

*Only needs to be completed if this is relevant to you

PERSONAL INFORMATION

Spouse/Adult Interdependent Partner's	Name				
HOME MAILING ADDRESS (if different tha	an Member)				
(include street address, PO Box, City, and Postal Code)		Work Phone	Cell P	hone	Home Phone
CURRENT EMPLOYMENT INFORMATION ((including any pr	evious positio	ns held	in the la	st year)
Name of Company/Organization	Position/Title			Salary	
CORPORATE INFORMATION					
PRIVATE CORPORATION					
Name of Company/Organization		Position Title	•		

OTHER INCOME

If you have received income from any source in the last year other than previously noted, please provide details below:

Туре	Gross Amount	
Rental Income		
Disability or Dansier Income		
Disability or Pension Income		
Trust Fund Income		
Other Income from Private Corporations		
Other Income (specify source)		
Other Income (specify source)		

ASSETS (include all foreign assets/holdings)

REAL PROPERTY

- *For urban properties, please use your municipal tax assessment value of your assessment notice.
- *For rural/farming properties, please use your best estimate or fair market value.

(No need to include a copy of the assessments, please just record the information below)

If joint with spouse, please record "joint with spouse"

Туре	Location (street address or plan, block, and city/town)	*Estimated Value	Outstanding Mortgage Balance	Who Mortgage is With
Primary Residence				
Secondary Residence				
Recreational Property				
Rental Property				
Rental Property				
Rental Property				
Other Property				
Other Property				

BANK ACCOUNTS AND OTHER DEPOSITS

Туре	Institution	Bal	ance
Chequing			
Savings			
Foreign Holdings			
Other Deposits or Accounts			
·			
Other Deposits or Accounts			
Other Deposits or Accounts			
PENSION RIGHTS	1	1	
Plan	Administrator	Yea	irs of Service
LIFE INSURANCE POLICIES			
Plan		Administrator	
		Administrator	
Plan	PROPERTY (estimated rep		of items such as art.
Plan HOUSEHOLD AND PERSONAL F		acement value total	
Plan HOUSEHOLD AND PERSONAL Fewelry, antiques and collectible fjoint with spouse, please reco	les, musical instruments	acement value total and equipment, hous	sehold contents, tools, e
Plan HOUSEHOLD AND PERSONAL F	les, musical instruments	acement value total and equipment, hous	sehold contents, tools, e imated Replacement
Plan HOUSEHOLD AND PERSONAL Frewelry, antiques and collectible for the policy of the	les, musical instruments	acement value total and equipment, hous	sehold contents, tools, e imated Replacement
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HOUSEHOLD AND PERSONAL F ewelry, antiques and collectible f joint with spouse, please reco Brief description of items	les, musical instruments a	acement value total and equipment, hous	sehold contents, tools, e imated Replacement
Plan HOUSEHOLD AND PERSONAL Frewelry, antiques and collectible figures in the policy of the policy	les, musical instruments ord "joint with spouse" reational vehicles, etc)	acement value total and equipment, hous	sehold contents, tools, e
Plan HOUSEHOLD AND PERSONAL Frewelry, antiques and collectible from the with spouse, please recommendate and collectible from the spouse of items VEHICLES (car, truck, boat, recommendate)	les, musical instruments ord "joint with spouse" reational vehicles, etc)	acement value total and equipment, hous Est Val	sehold contents, tools, e imated Replacement ue
Plan HOUSEHOLD AND PERSONAL Frewelry, antiques and collectible for the policy of the	les, musical instruments ord "joint with spouse" reational vehicles, etc)	acement value total and equipment, hous Est Val	sehold contents, tools, e imated Replacement
HOUSEHOLD AND PERSONAL Fewelry, antiques and collectible fjoint with spouse, please reconstruction of items /EHICLES (car, truck, boat, reconstruction)	les, musical instruments ord "joint with spouse" reational vehicles, etc)	acement value total and equipment, hous Est Val	sehold contents, tools, e imated Replacement ue

INVESTMENTS

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Other Investments and Significant Assets	Value

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Cryptocurrency Holding	Value

LIABILITIES

UNPAID MUNICIPAL OR FEDERAL TAXES

If joint with spouse, please record "joint with spouse"

Type of unpaid tax (ie- income, property)	Creditor/Agency (ie- municipality of X or Revenue Canada)	Amount Owing	Arrears pertaining to what year(s)

OTHER LOANS AND LINES OF CREDIT

If joint with spouse, please record "joint with spouse"

Creditor	Amount Owing

GUARANTEES

If joint with spouse, please record "joint with spouse"

Creditor	Principal Debtor	Amount Guaranteed

SUPPORT OBLIGATIONS

Relationship to Recipient	Amount of Monthly Obligation

OTHER SIGNIFICANT LIABILITIES

Description of Liability	To Whom Owed	Amount Guaranteed

OTHER PERSONAL OR FINANCIAL INTERESTS NOT ALREADY DISCLOSED Description of Interest(s) Value(s) OTHER PERTINENT DISCLOSURES

OTHER PERTINENT DISC	CLOSURES			
Provide details				
Have you received any	inheritances of an	y kind in the last y	year? If so, please pr	ovide details:
<u>-</u>			•	

Designated Senior Official SECTION 3- Minor Children (under the age of 18)*

*Only needs to be completed if this is relevant to you

PERSONAL INFORMATION

Minor Children's Given Names	
	Surname (if different)
INCOME	
Source of Income	Annual Amount
ASSETS (include all foreign assets/hol	
ASSETS (include all foreign assets/hol	dings) Holdings
Source	
Source Bank Accounts	
Source Bank Accounts Bonds and Government Securities	
Source Bank Accounts Bonds and Government Securities Life Insurance Policies Annuities/Trust Funds RESP (attach detailed investments statements	
Source Bank Accounts Bonds and Government Securities Life Insurance Policies Annuities/Trust Funds	

LIABILITIES

Source	Amount Owing
Loans	
Unpaid Income Tax	
Other Significant liabilities	
Other Significant Interests	

Designated Senior Official SECTION 4- Private Corporations*

*NOTE- No Section 4 is required for sole proprietorships or partnerships (except in cases where they are run by a private corporation, i.e. some law firms).

Do you, your spouse/adult interdependent partner or minor child, <u>separately or combined</u>, **own more than** 50% of the shares of a corporation?

YES NO

If YES, complete section 4 for EACH corporation

If YES, attach the most recent audited or unaudited financial statements**

CORPORATION INFORMATION

Name of Corporation	n
ANNUAL CORPORAT	'E INCOME
Gross	
Net	

ASSETS (include all foreign assets/holdings)

Real Property			
Location (street address or plan, block, lot and city/town)	Assessed Value	Outstanding Mortgage Balance	Who Mortgage is With
Other Assets			
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 Significant Interests		
Other digililicant interests		

^{**}Attach the most recent audited or unaudited financial statements