MY FULL NAME | GIVEN NAME: ANNIZA

DISCLOSURE OF INTERESTS

SURNAME: ABDULLAH

ELECTRONICALLY COMPLETE THIS FORM, PRINT HARD COPY, SIGN AND LODGE VIA SCANNED E-MAIL TO governance@wollondilly.nsw.gov.au

RETURN DATE		25 MAY 2020 TO 31 JUL	Y 2020
A REA	AL PROPERTY		
AT that	P: You must include: (i) eith	her the postal addresses OR particulars of Title, ie Lot and Return Date; (ii) the Nature of your Interest, ie Owner, Les	DP (or SP) of properties anywhere in Australi see, Beneficiary, Other
OR select	Nothing to Declare, sele the words 'Refer Below' in ant details below then move		Nil
Address of each parcel of real property in which I had an interest at the Return Date		Nature of my Interest: Select from the drop-down list	
MY PLAC	E(S) OF LIVING (IN W	HICH I HAD AN INTEREST):	
No:	Street:		Lessee
Suburb:		State: NSW	
No: 15	Street: WHITE STR	EET	Lessee
Suburb: V	VILTON	State: NSW	
OTHER F	REAL PROPERTY POS	TAL ADDRESS DETAILS:	
No:	Street:		Select from List
Suburb:		State:	
No:	Street:		Select from List
Suburb:		State:	
No:	Street:		Select from List
Suburb:		State:	
OR OTHE	ER REAL PROPERTY	PARTICULARS OF TITLE, IE LOT AND DP DE	TAILS:
No:	Street:		Select from List
Suburb:		State:	
No:	Street:		Select from List
Suburb:		State:	
No:	Street:		Select from List
Suburb		State	

DISCLOSURE OF INTERESTS

A TIP: Only provide information wh	nere the amount of income from ar	occupation, a Trust or other source	, exceeded \$500.
	ME FROM AN OCCUPATION I PROPERTY OF THE PROPER	ON(S) occupation in the period commer	ncing on the first day after the
Description of my Occupation(s) eg Labourer, Cadet, Project Officer, Manager, etc	Name and Address of Employer or Description of Office held (if applicable)		Name of Partnership (if applicable)
Occupations include: (i) an employee of Con	uncil; (ii) an employee of other organis	ations; (iii) self-employed; (iv) a consultat	nt; (v) an Office holder in a Company
ACTING LIBRARY TEAM LEADER	Wollondilly Shire Council, 62-64 Menangle St, Picton I	NSW 2571	
Date and ending on the following f you have Nothing to Declare, select	Celefolina Mila		
	the adjacent Box ve on to 3. Other sources of mo	y Income' NAME AND ADDRE	Nil SS OF TRUSTEE
	the adjacent Box ve on to 3. Other sources of mo	2000 March 1998	
NAME AND ADDRESS ATIP: The 'Settlor' is the name of a	the adjacent Box ve on to 3. Other sources of my OF SETTLOR person who created the Trust MY INCOME income I expect to receive in the source of the sources.	2000 March 1998	SS OF TRUSTEE
NAME AND ADDRESS A TIP: The 'Settlor' is the name of a 3 OTHER SOURCES OF M (sources, not amounts, of other and ending on the following 30 of the county and ending on the sources of Income	the adjacent Box ye on to 3. Other sources of my OF SETTLOR person who created the Trust MY INCOME income I expect to receive in the June) may include income from rental peription sufficient to identify the peription sufficient suf	NAME AND ADDRE	SS OF TRUSTEE sst day after the Return Date ties, welfare payments;
NAME AND ADDRESS A TIP: The 'Settlor' is the name of a 3 OTHER SOURCES OF IN (sources, not amounts, of other and ending on the following 30 TIPS: a Other Sources of Income b You must include a description.	the adjacent Box ye on to 3. Other sources of my OF SETTLOR person who created the Trust IY INCOME income I expect to receive in a June) may include income from rental p ription sufficient to identify the person sufficient to identify the person of the adjacent Box	NAME AND ADDRE	SS OF TRUSTEE sst day after the Return Date ties, welfare payments;



DISCLOSURE OF INTERESTS

C GIFTS			
ATIP: Only include description of a single gift or mult	tiple gifts from the same do	onor, the total value of w	hich exceeded \$500
If you have Nothing to Declare, select the word 'Nil' at OR select the words 'Refer Below' in the adjacent Bos enter relevant details below then move on to Section	x 🗢	0	Nil
If you declare a gift U then you MUST also complete Forms + Templates / Corporate Administration / Gifts	e a Gifts and Benefits D and Benefits Declaratio	eclaration Form local	ed on Council's Intranet:
DESCRIPTION OF EACH GIFT RECEIVED BY ME SINCE		NAME AND ADDRESS	OF GIFT DONOR
D CONTRIBUTIONS TO TRAVEL			
ATIP: Do not include payments by Council for your w	work-related travel		
If you have Nothing to Declare, select the word 'Nil' an OR select the words 'Refer Below' in the adjacent Bosenter relevant details below then move on to Section	x ⊃		Nil
If you declare a travel contribution then you MUS Intranet: Forms + Templates / Corporate Administration			tion Form located on Council's
NAME AND ADDRESS OF EACH PERSON WHO MADE GREATER THAN \$250 FINANCIAL OR OTHER CONTRIBUTION TO ANY TRAVEL UNDERTAKEN BY M SINCE THE DATE OF MY LAST RETURN		VEL WAS	NAME OF STATES, TERRITORIES OF THE COMMONWEALTH AND OTHER COUNTRIES IN WHICH TRAVEL WAS UNDERTAKEN
E INTERESTS AND POSITIONS IN	N COPPOPATIO	ane.	
TIPS: (i) Declare only if your shareholding was great Shareholder) you held in a Corporation (including Corporation or the position was a paid position	ter than 10% of voting right	ts in the corporation (ii) You must declare any position (no ther or not you held shares in th
If you have Nothing to Declare, select the word 'Nil' at OR select the words 'Refer Below' in the adjacent Bos enter relevant details below then move on to Section	x 🧢		Nii
If you declare a Position U you held in a Corporation Interests Disclosure Form located on Council's IntrancConflict of Interest – Council Officer			
NAME AND ADDRESS OF EACH CORPORATION IN WHICH I HAD AN INTEREST OR HELD A POSITION AT THE RETURN DATE	NATURE OF INTEREST (IF ANY) EG SHAREHOLDER	DESCRIPTION OF POSITION (IF ANY) EG DIRECTOR, COMPANY SECRETARY	PRINCIPAL OBJECTS OF CORPORATION (EXCEPT IN CASE OF LISTED COMPANY



DISCLOSURE OF INTERESTS

POSITIONS IN TRADE UNIONS OR PROFESSIONAL OR BUSINESS ASSOCIATIONS A TIP: Do not include general membership but include details of any positions held whether remunerated or not If you have Nothing to Declare, select the word 'Nil' and move on to Section G Nil OR select the words 'Refer Below' in the adjacent Box enter relevant details below then move on to Section G NAME OF EACH TRADE UNION AND EACH PROFESSIONAL OR BUSINESS ASSOCIATION IN WHICH I HELD ANY POSITION (WHETHER REMUNERATED OR NOT) AT THE RETURN DATE DESCRIPTION OF POSITION

G DEBTS A TIP: You do not need to provide information on (i) the amounts of any debts; (ii) debts for less than \$500; (iii) debts to any relative, bank, building society, credit union or other financial institution such as for your home mortgage, credit card or department store If you have Nothing to Declare, select the word 'Nil' and move on to Section H Nil OR select the words 'Refer Below' in the adjacent Box enter relevant details below then move on to Section H NAME AND ADDRESS OF EACH PERSON OR ORGANISATION (CREDITOR) TO WHOM I WAS LIABLE TO PAY ANY DEBT AT THE RETURN DATE NAME OF CREDITOR ADDRESS OF CREDITOR

H DISPOSITIONS OF REAL PROPERTY

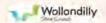


TIPS: You must disclose details:

- . of each disposal of real property since your last return was made by which you wholly or partly retained the use or benefit of the property or the right to repurchase the property;
- of each disposal of real property by other persons or entities whereby you wholly or partly obtained the use of the property;
- disposal includes
 - · grant of a lease or licence for all or part of the land,
 - · mortgage over your land,
 - · grant of easement over land by which you retain the ability to use the land,
 - sale of land (or grant of option by you) with (i) a lease or licence granted to you or a right for you to repurchase the land, (ii) or an easement or covenant over the land in favour of you
- · creation of an option to purchase land in favour of you;
- creation by you of a charge over your land;
- transfer by you of an interest in your land to a Trustee of a Trust of which you are a beneficiary;
- transfer of land to your spouse or by your spouse to a third party whereby you continue to occupy the land;
- transfer of title of your land subject to you continuing to receive a benefit, eg rent from the land.

If you have Nothing to Declare, select the word 'Nil' and move on to Section I Nil OR select the words 'Refer Below' in the adjacent Box enter relevant details below then move on to Section I

Should you require more detailed explanation on the information to be provided in this Section, you should consult your solicitor



DISCLOSURE OF INTERESTS

	OF MY LAST RETURN AS A R	POSITION OF REAL PROPERTY BY ME A ESULT OF WHICH I RETAINED, EITHER W PERTY OR THE RIGHT TO REACQUIRE	HOLLY OR IN PART, THE USE
No:	Street:	Suburb:	State:
No:	Street:	Suburb:	State:
No:	Street:	Suburb:	State:
No:	Street:	Suburb:	State:

2 PARTICULARS OF EACH DISPOSITION OF REAL PROPERTY TO A PERSON BY ANOTHER PERSON UNDER ARRANGEMENTS MADE BY ME, BEING DISPOSITIONS MADE AT ANY TIME SINCE THE DATE OF MY LAST RETURN, AS A RESULT OF WHICH I OBTAINED EITHER WHOLLY OR IN PART, THE USE AND BENEIFIT OF THE PROPERTY Suburb: Street: State: No: Suburb: No: Street: State: Suburb: State: No: Street: No: Street: Suburb: State:

A TIP: To be co	impleted if you wish to make any additional disclosures	
If you have Nothing to I and then Print, Sign and	Declare, select the word 'Nil' in the adjacent Box	Nil

MY SIGNATURE:	
DATE SIGNED:	22 MAY 2020

NEXT STEPS:

- Print the form.
- Sign and date this page.
- Ensure that wherever you had nothing to declare, that you have selected the word 'Nil' from the drop-drown menu.
- Your form should then be forwarded via e-mail to governance@wollondilly.nsw.gov.au.
- Did you complete the optional Statutory Declaration on the next page? If 'yes' you must list the reasons for completing the form and then have your signature witnessed by a Justice of the Peace.

