

# 2019 - 2020 ANNUAL RETURN DISCLOSURE OF INTERESTS

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

<b>MY FULL NAME</b>	<b>GIVEN NAME: IAN</b>	<b>SURNAME: BERTHON</b>
<b>RETURN PERIOD: 1 JULY 2019 TO 30 JUNE 2020</b>		

## A REAL PROPERTY



**A TIP:** You must include: (i) either the postal addresses OR particulars of Title, ie Lot and DP (or SP) of properties anywhere in Australia that you had an interest in at any time during the Return Period; (ii) the Nature of your Interest, ie Owner, Lessee, Beneficiary, Other

If you have Nothing to Declare, select the word 'Nil' and move on to Section B

OR select the words 'Refer Below' in the adjacent Box enter relevant details below then move on to Section B

Refer Below

Address of each parcel of real property in which I had an interest at any time during the Return Period

Nature of my Interest: Select from the drop-down list

### MY PLACE(S) OF LIVING (IN WHICH I HAD AN INTEREST):

No: [REDACTED]

Street: [REDACTED]

Owner

Suburb: [REDACTED]

State: NSW

No:

Street:

Select from List

Suburb:

State:

### OTHER REAL PROPERTY POSTAL ADDRESS DETAILS:

No:

Street:

Select from List

Suburb:

State:

No:

Street:

Select from List

Suburb:

State:

No:

Street:

Select from List

Suburb:

State:

### OR OTHER REAL PROPERTY PARTICULARS OF TITLE, IE LOT AND DP DETAILS:

No:

Street:

Select from List

Suburb:

State:

No:

Street:

Select from List

Suburb:

State:

No:


Street:

Select from List

Suburb:

State:

**B SOURCES OF INCOME**

 **A TIP:** Only provide information where the amount of income from an occupation, a Trust or other source, exceeded \$500.

 **1 SOURCES OF MY INCOME FROM AN OCCUPATION(S)**


(sources, *not amounts*, of income I received from my Occupation(s) at any time during the Return Period)

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 Council; (ii) an employee of other organisations; (iii) self-employed; (iv) a consultant; (v) an Office holder in a Company		
Civil Engineer	Wollondilly Shire Council 62-64 Menangle Street PICTON NSW 2571	


 **2 SOURCES OF MY INCOME FROM A TRUST**

(sources of income, *not amounts*, I received from a Trust during the Return Period)

If you have Nothing to Declare, select the word 'Nil' and move on to Section C


OR select the words 'Refer Below' in the adjacent Box  enter relevant details below then move on to Section C


Nil

 <b>A TIP:</b> The 'Settlor' is the name of a person who created the Trust	NAME AND ADDRESS OF TRUSTEE
NAME AND ADDRESS OF SETTLOR	

 **3 OTHER SOURCES OF MY INCOME**


(sources of other income, *not amounts*, I received at any time during the Return Period)


 **TIPS:** a Other Sources of Income may include income from rental property, investments, business activities, welfare payments;  
b You must include a description sufficient to identify the person, property or business activity from whom, or the circumstances in which, that income was received.

If you have Nothing to Declare, select the word 'Nil' in the adjacent Box  OR if you are Declaring an Interest, select the words 'Refer below'

Nil


**C GIFTS**

 **A TIP:** Only include description of a single gift or multiple gifts from the same donor, the total value of which exceeded \$500


If you have Nothing to Declare, select the word 'Nil' in the adjacent Box  and go to Section D OR if you are Declaring an Interest, select the words 'Refer below'


Nil

If you declare a gift  then you MUST also complete a Gifts and Benefits Declaration Form located on Council's Intranet:  
[Forms + Templates / Corporate Administration / Gifts and Benefits Declaration Form](#)


DESCRIPTION OF EACH GIFT RECEIVED BY ME AT ANY TIME DURING THE RETURN PERIOD	NAME AND ADDRESS OF GIFT DONOR


## D CONTRIBUTIONS TO TRAVEL

 **A TIP:** Do not include payments by Council for your work-related travel


If you have Nothing to Declare, select the word 'Nil' in the adjacent Box  and go to Section E OR if you are Declaring an Interest, select the words 'Refer below'


Nil

If you declare a travel contribution  then you MUST also complete a Gifts and Benefits Declaration Form located on council's Intranet: [Forms + Templates / Corporate Administration / Gifts and Benefits Declaration Form](#)


NAME AND ADDRESS OF EACH PERSON WHO MADE GREATER THAN \$250 FINANCIAL OR OTHER CONTRIBUTION TO ANY TRAVEL UNDERTAKEN BY ME DURING THE RETURN PERIOD	DATES TRAVEL WAS UNDERTAKEN	NAME OF STATES, TERRITORIES OF THE COMMONWEALTH AND OTHER COUNTRIES IN WHICH TRAVEL WAS UNDERTAKEN

## E INTERESTS AND POSITIONS IN CORPORATIONS

 **TIPS:** (i) Declare only if your shareholding was greater than 10% of voting rights in the corporation (ii) You must declare any position (not Shareholder) you held in a Corporation (including not-for-profit corporation) such as Director, whether or not you held shares in the Corporation or the position was a paid position


If you have Nothing to Declare, select the word 'Nil' in the adjacent Box  and go to Section F OR if you are Declaring an Interest, select the words 'Refer below'


Nil

If you declare a Position  you held in a Corporation that had a relationship with Council, you MUST complete a Conflict of Interests Disclosure Form located on Council's Intranet: [Forms + Templates / Corporate Administration / Declaration Form - Conflict of Interest – Council Officer](#)

NAME AND ADDRESS OF EACH CORPORATION IN WHICH I HAD AN INTEREST OR HELD A POSITION AT ANY TIME DURING THE RETURN PERIOD	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)

## F 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' in the adjacent Box  and go to Section G OR if you are Declaring an Interest, select the words 'Refer below'

Refer Below

NAME OF EACH TRADE UNION AND EACH PROFESSIONAL OR BUSINESS ASSOCIATION IN WHICH I HELD ANY POSITION (WHETHER REMUNERATED OR NOT) AT ANY TIME DURING THE RETURN PERIOD	DESCRIPTION OF POSITION
Professionals Australia (LGEA)	Delegate

**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' in the adjacent Box  and go to Section H OR if you are Declaring an Interest, select the words 'Refer below'

Nil


NAME AND ADDRESS OF EACH PERSON OR ORGANISATION (CREDITOR) TO WHOM I WAS LIABLE TO PAY ANY DEBT AT ANY TIME DURING THE RETURN PERIOD

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' in the adjacent Box  and go to Section I OR if you are Declaring an Interest, select the words 'Refer below'

Nil

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


 **1 PARTICULARS OF EACH DISPOSITION OF REAL PROPERTY BY ME AT ANY TIME DURING THE RETURN PERIOD AS A RESULT OF WHICH I RETAINED, EITHER WHOLLY OR IN PART, THE USE AND BENEFIT OF THE PROPERTY OR THE RIGHT TO REACQUIRE THE PROPERTY AT A LATER DATE**


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 DURING THE RETURN PERIOD, AS A RESULT OF WHICH I OBTAINED EITHER WHOLLY OR IN PART, THE USE AND BENEFIT OF THE PROPERTY**

No:	Street:	Suburb:	State:
No:	Street:	Suburb:	State:
No:	Street:	Suburb:	State:
No:	Street:	Suburb:	State:

**I DISCRETIONARY DISCLOSURES**

 **A TIP:** To be completed if you wish to make any additional disclosures

If you have Nothing to Declare, select the word 'Nil' in the adjacent Box  and go to Sign and Date to complete this Return OR if you are Declaring an Interest, select the words 'Refer below'

Nil

<b>MY SIGNATURE:</b>	 
<b>DATE SIGNED:</b>	29/09/2020

**NEXT STEPS:**

- Ensure that wherever you had nothing to declare, that you have selected the word 'Nil' from the drop-down menu.
- Print the form.
- Sign and date this page.
- Your form should then be forwarded via e-mail to [governance@wollondilly.nsw.gov.au](mailto:governance@wollondilly.nsw.gov.au).