# DISCLOSURE OF INTERESTS

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

MY FU	LL NAME	GIVEN NAME: NOE	L SURNAM	IE: LOWRY	
		RETURN PERIOD:	1 JULY 2019 TO 30 JUNE	2020	
A RE	AL PROPE	RTY			
tha	TIP: You must in tyou had an interest	nclude: (i) either the postal address est in at any time during the Return	es OR particulars of Title, ie Lot and DP Period; (ii) the Nature of your Interest,	(or SP) of properties anywhere in Australia	
OR select	the words 'Refe	clare, select the word 'Nil' and mer Below' in the adjacent Box w then move on to Section B	nove 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 PLAC	CE(S) OF LIVI	NG (IN WHICH I HAD AN IN	ITEREST):		
No:	Street:		Lessee		
Suburb:			State: NSW		
No:	Street:			Select from List	
Suburb:			State:		
OTHER F	REAL PROPE	RTY POSTAL ADDRESS D	ETAILS:		
No:	o: Street:			Select from List	
Suburb:			State:		
No:	Street:		Select from List		
Suburb:		State:			
No:	: Street:		Select from List		
Suburb:			State:		
OR OTH	ER REAL PRO	PERTY PARTICULARS OF	TITLE, IE LOT AND DP DETA	ILS:	
No: Street:		Select from List			
Suburb: State:					
No:	No: Street:		Select from List		
Suburb:			State:		
No:	Street:			Select from List	
Suburb:	1		State:		

# DISCLOSURE OF INTERESTS

B SOURCES OF INCOM	ΛΕ			
A TIP: Only provide information w	here the amount of inc	ome from an occupation, a Trust or other source	e, exceeded \$500.	
SOURCES OF MY INCOI     (sources, not amounts, of inc	ME FROM AN OC	CUPATION(S)  my Occupation(s) at any time during the R	Return Period)	
Description of my Occupation(s) eg Labourer, Cadet, Project Officer, Manager, etc	Name	e and Address of Employer or tion of Office held (if applicable)	Name of Partnership (if applicable)	
Occupations include: (i) an employee of Cou	ncil; (ii) an employee of o	ther organisations; (iii) self-employed; (iv) a consultan	t; (v) an Office holder in a Company	
Councillor	Wollondilly Shire C 62-64 Menangle S PICTON NSW 2	Street		
2 SOURCES OF MY INCOL (sources of income, not am) If you have Nothing to Declare, select OR select the words 'Refer Below' in enter relevant details below then move	ounts, I received from t the word 'Nil' and m the adjacent Box	m a Trust during the Return Period)	Nil	
NAME AND ADDRESS ( A TIP: The 'Settlor' is the name of		NAME AND ADDRE	SS OF TRUSTEE	
TIPS: a Other Sources of Incom	not amounts, I receive the may include income scription sufficient to ide	ed at any time during the Return Period) from rental property, investments, business act entify the person, property or business activity f		
If you have Nothing to Declare, selection of the original of t	ct the word 'Nil' in the		Refer Below	
Wombaroo Publishers (Liline LowryT Salary/Employees	/AS) Manager			
C GIFTS				
A TIP: Only include description o	f a single gift or multiple	e gifts from the same donor, the total value of w	hich exceeded \$500	
If you have Nothing to Declare, sele and go to Section D OR if you are De	ct the word 'Nil' in the	e adjacent Box Select the words 'Refer below'	Nil	
If you declare a gift then you MU Forms + Templates / Corporate Adm		Gifts and Benefits Declaration Form locate I Benefits Declaration Form	d on Council's Intranet:	
DESCRIPTION OF EACH GIFT RECEIVED	VED BY ME AT ANY	NAME AND ADDRESS O	F GIFT DONOR	

# DISCLOSURE OF INTERESTS

D CONTRIBUTIONS TO TRAVEL	-			
A TIP: Do not include payments by Council for you	our work-related travel			
If you have Nothing to Declare, select the word 'Ni and go to Section E OR if you are Declaring an Inte		'Refer below'		Nil
If you declare a travel contribution 🔱 then you MU Intranet: Forms + Templates / Corporate Administr	JST also complete a Cation / Gifts and Bene	Gifts and Benefits D fits Declaration For	eclaratio m	n Form located on council's
NAME AND ADDRESS OF EACH PERSON WHO MA GREATER THAN \$250 FINANCIAL OR OTHER CONTRIBUTION TO ANY TRAVEL UNDERTAKEN BY DURING THE RETURN PERIOD	ME DATES	TRAVEL WAS DERTAKEN	OF	ME OF STATES, TERRITORIES F THE COMMONWEALTH AND THER COUNTRIES IN WHICH TRAVEL WAS UNDERTAKEN
	reater than 10% of votin	rights in the corpora	tion (ii) her or not	You must declare any position (r you held shares in the Corporati
TIPS: (i) Declare only if your shareholding was g Shareholder) you held in a Corporation (including no	reater than 10% of votin ot-for-profit corporation) s I' in the adjacent Box	g rights in the corpora uch as Director, wheth	tion (ii) iner or not	You must declare any position (r you held shares in the Corporati Nil
TIPS: (i) Declare only if your shareholding was g Shareholder) you held in a Corporation (including no or the position was a paid position  f you have Nothing to Declare, select the word 'Ni and go to Section F OR if you are Declaring an Inte f you declare a Position U you held in a Corporat nterests Disclosure Form located on Council's Intra	reater than 10% of votinot-for-profit corporation) solution in the adjacent Box erest, select the words on that had a relation	g rights in the corporal uch as Director, wheth character below'	ou MUS	you held shares in the Corporati  Nil  T complete a Conflict of
TIPS: (i) Declare only if your shareholding was g Shareholder) you held in a Corporation (including no or the position was a paid position  If you have Nothing to Declare, select the word 'Ni and go to Section F OR if you are Declaring an Interest of you declare a Position of you held in a Corporatinterests Disclosure Form located on Council's IntraConflict of Interest – Council Officer	reater than 10% of votinot-for-profit corporation) solution in the adjacent Box erest, select the words on that had a relation	g rights in the corporation as Director, whether the corporate Adiptor of the corporate Adiptor	ou MUS ministrat	you held shares in the Corporat  Nil  T complete a Conflict of
TIPS: (i) Declare only if your shareholding was g Shareholder) you held in a Corporation (including no or the position was a paid position  If you have Nothing to Declare, select the word 'Ni and go to Section F OR if you are Declaring an Interest of you declare a Position of you held in a Corporatinterests Disclosure Form located on Council's Interest of Interest - Council Officer  NAME AND ADDRESS OF EACH CORPORATION IN WHICH I HAD AN INTEREST OR HELD A POSITION	reater than 10% of votinot-for-profit corporation) solution in the adjacent Box erest, select the words ion that had a relation anet: Forms + Temple NATURE OF INTERE (IF ANY)	rights in the corporal uch as Director, wheth the corporate of the corpora	ou MUS ministrat	Nil T complete a Conflict of ion / Declaration Form - PRINCIPAL OBJECTS OF CORPORATION (EXCEPT I

# 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' 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

# DISCLOSURE OF INTERESTS

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building	You do not need to provide information on (i) society, credit union or other financial institution	the amounts of any debts; (ii) debts for less the such as for your home mortgage, credit card	nan \$500; (iii) debts to any relative, bank, I or department store
If you have and go to S	Nothing to Declare, select the word 'Nil' in ection H OR if you are Declaring an Interes	Nil	
NAME AND	ADDRESS OF EACH PERSON OR ORGANIS	ATION (CREDITOR) TO WHOM I WAS LIAB	LE TO PAY ANY DEBT AT ANY TIME
	NAME OF CREDITOR	ADDRES	S OF CREDITOR
H DISI	POSITIONS OF REAL PROP	ERTY	
• mo • gra • sal or • creal • creal • trans • trans	ant of a lease or licence for all or part of the land, ortgage over your land, ant of easement over land by which you retain the of land (or grant of option by you) with (i) a least covenant over the land in favour of you ion of an option to purchase land in favour of you ion by you of a charge over your land; fer by you of an interest in your land to a Truster of land to your spouse or by your spouse to a fer of title of your land subject to you continuing  Nothing to Declare, select the word 'Nil' in	e ability to use the land, se or licence granted to you or a right for you to u; e of a Trust of which you are a beneficiary; a third party whereby you continue to occupy to receive a benefit, eg rent from the land.	
S 100 S 100 S	ection I OR if you are Declaring an Interest ou require more detailed explanation on the	,, , , , , , , , , , , , , , , , , , , ,	a you should consult your solicitor
Should yo		information to be provided in this Section	ii, you should consult your solicitor
RI BI	ETURN PERIOD AS A RESULT OF W ENEFIT OF THE PROPERTY OR THE	RIGHT TO REACQUIRE THE PRO	LY OR IN PART, THE USE AND PERTY AT A LATER DATE
Ri Bi No:	ETURN PERIOD AS A RESULT OF WENEFIT OF THE PROPERTY OR THE Street:	HICH I RETAINED, EITHER WHOLE RIGHT TO REACQUIRE THE PROSuburb:	LY OR IN PART, THE USE AND PERTY AT A LATER DATE  State:
No:	ETURN PERIOD AS A RESULT OF WENEFIT OF THE PROPERTY OR THE Street:  Street:	Suburb:	LY OR IN PART, THE USE AND PERTY AT A LATER DATE  State:  State:
No: No: No:	Street: Street:	HICH I RETAINED, EITHER WHOLE RIGHT TO REACQUIRE THE PROSUBURE:  Suburb: Suburb: Suburb:	LY OR IN PART, THE USE AND PERTY AT A LATER DATE  State: State: State:
No:	ETURN PERIOD AS A RESULT OF WENEFIT OF THE PROPERTY OR THE Street:  Street:	Suburb:	LY OR IN PART, THE USE AND PERTY AT A LATER DATE  State:  State:
No: No: No: Vo: UI RI	Street: Street:	Suburb: Suburb: Suburb: Suburb: Suburb: Suburb: Suburb: Suburb: Suburb: MOREAL PROPERTY TO A PEME, BEING DISPOSITIONS MAD	LY OR IN PART, THE USE AND PERTY AT A LATER DATE  State: State: State: State: State: AND THER PERSON BY ANOTHER PERSON BY ANOTHER PERSON BY THE DURING THE
No: No: No: Vo: UI RI	Street: ARTICULARS OF EACH DISPOSITION ARRANGEMENTS MADE BY ETURN PERIOD, AS A RESULT OF V	Suburb: Suburb: Suburb: Suburb: Suburb: Suburb: Suburb: Suburb: Suburb: MOREAL PROPERTY TO A PEME, BEING DISPOSITIONS MAD	LY OR IN PART, THE USE AND PERTY AT A LATER DATE  State: State: State: State: State: AND THER PERSON E AT ANY TIME DURING THE
No: No: No: Vo: Vo: Vo: Vo: Vo: Vo: Vo: Vo: Vo: V	Street: ARTICULARS OF EACH DISPOSITION PERIOD, AS A RESULT OF VENEIFIT OF THE PROPERTY	Suburb:	State:
No: No: No: O: No: No: No: No: No: No: No: No:	Street:	Suburb:	State:  RSON BY ANOTHER PERSON E AT ANY TIME DURING THE LY OR IN PART, THE USE AND State:  State:

# DISCLOSURE OF INTERESTS

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'			

MY SIGNATURE:	Ø		*	
DATE SIGNED:	7/8/2	0		
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### **NEXT STEPS:**

- Ensure that wherever you had nothing to declare, that you have selected the word 'Nil' from the drop-drown menu.
- Print the form.
- Sign and date this page.
- 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.