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

MY FUL	LNAME	NAME GIVEN NAME: KEN SURNA		RNAME: KIM
RETURN PERIOD: 1 JULY 2019 TO 30 JUNE			JUNE 2020	
A REA	L PROPE	RTY		
A TI Austra Other	P: You must alia that you ha	include: (i) either the postal addre d an interest in at any time during the	sses OR particulars of Title Return Period; (ii) the Nat	ie Lot and DP (or SP) of properties anywhere in ure of your Interest, ie Owner, Lessee, Beneficiary,
If you have N OR select th	e words 'Refe	clare, select the word 'Nil' and mo er Below' in the adjacent Box w then move on to Section B	ve on to Section B	Select from this Drop-Down List Refer below
Address of e Return Perio		of real property in which I had an	i interest at any time dur	Nature of my Interest: Select from the drop-down list
MY PLACE	(S) OF LIVI	NG (IN WHICH I HAD AN INT	EREST):	
No:	Street:			Owner
Suburb:			State: NSW	
No:	Street:		Select from List	
Suburb:			State:	
OTHER RE	AL PROPE	RTY POSTAL ADDRESS DE	TAILS:	
No:	No: Street:		Select from List	
Suburb:			State:	
No:	Street:		Select from List	
Suburb:			State:	
No: Street:				Select from List
Suburb:	Suburb:		State:	
OR OTHER	REAL PRO	PERTY PARTICULARS OF	TITLE, IE LOT AND DE	DETAILS:
No: Street:		Select from List		
Suburb:			State:	
No:	Street:			Select from List
Suburb:			State:	
No:	Street:			Select from List
Suburb:			State:	

DISCLOSURE OF INTERESTS

B SOURCES OF INCOM	E		
A TIP: Only provide information wh	ere the amount of inco	me from an occupation, a Trust or other source	exceeded \$500.
SOURCES OF MY INCOM (sources, not amounts, of inco		CUPATION(S) my Occupation(s) at any time during the R	eturn Period)
Description of my Occupation(s) eg Labourer, Cadet, Project Officer, Manager, etc	ourer, Cadet, Project Officer, Manager, Description of Office held (if applicable)		Name of Partnership (if applicable)
Occupations include: (i) an employee of Council	cil; (ii) an employee of oth	ner organisations; (iii) self-employed; (iv) a consultant	(v) an Office holder in a Company
CONSTRUCTION	Wollondilly Shire Co 62-64 Menangle St PICTON NSW 25	reet	
2 SOURCES OF MY INCOM		T a a Trust during the Return Period)	
f you have Nothing to Declare, select to DR select the words 'Refer Below' in the enter relevant details below then move	he word 'Nil' and mo ne adjacent Box		Nil
NAME AND ADDRESS OF A TIP: The Settlor is the name of a		NAME AND ADDRES	S OF TRUSTEE
TIPS: a Other Sources of Income b You must include a desc	t amounts, I received may include income for ription sufficient to idea	d at any time during the Return Period) rom rental property, investments, business activity from the person, property or business activity from the person activity fr	
which, that income was r f you have Nothing to Declare, select OR if you are Declaring an Interest, se	the word 'Nil' in the		Nil
C GIFTS			
A TIP: Only include description of	a single gift or multiple	gifts from the same donor, the total value of wh	ich exceeded \$500
f you have Nothing to Declare, select and go to Section D OR if you are Dec			Nil
If you declare a gift $oldsymbol{0}$ then you MUS Forms + Templates / Corporate Admin		Sifts and Benefits Declaration Form located Benefits Declaration Form	on Council's Intranet:
DESCRIPTION OF EACH GIFT RECEIVE TIME DURING THE RETURN I		NAME AND ADDRESS OF	GIFT DONOR

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related travel	
	Nil
complete a Gifts and Benefits Diffs and Benefits Declaration For	eclaration Form located on council's m
DATES TRAVEL WAS UNDERTAKEN	NAME OF STATES, TERRITORIES OF THE COMMONWEALTH AND OTHER COUNTRIES IN WHICH TRAVEL WAS UNDERTAKEN
	ect the words 'Refer below' complete a Gifts and Benefits D ifts and Benefits Declaration For

TIPS: (i) Declare only if your shareholding was (not Shareholder) you held in a Corporation (inclu Corporation or the position was a paid position	greater than 10% of voting r uding not-for-profit corporation	ights in the corporation n) such as Director, whe	(ii) You must declare any position the or not you held shares in the
If you have Nothing to Declare, select the word 'Ni and go to Section F OR if you are Declaring an Inte		fer below'	Nil
If you declare a Position U you held in a Corporati Interests Disclosure Form located on Council's Intra Conflict of Interest – Council Officer			
NAME AND ADDRESS OF EACH CORPORATION IN	NATURE OF INTEREST	DESCRIPTION OF POSITION (IF ANY)	PRINCIPAL OBJECTS OF CORPORATION (EXCEPT IN
WHICH I HAD AN INTEREST OR HELD A POSITION AT ANY TIME DURING THE RETURN PERIOD	(IF ANY) EG SHAREHOLDER	EG DIRECTOR, COMPANY SECRETARY	CASE OF LISTED COMPANY)

A TIP: Do not include general membership but include details of any positions held whether rem	unerated 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'	Nil
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
	DESCRIPTION OF TOSTINGTY

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G DEE	BTS				
公 A TII bank,	?: You do not need to provide information obuilding society, credit union or other financia	on (i) the amounts of any debts; (ii) debts for le I institution such as for your home mortgage, cred	ess than \$500; (iii) debts to any relative, lit card or department store		
	Nothing to Declare, select the word 'Ni Section H OR if you are Declaring an Inte		Nil		
NAME AN	D ADDRESS OF EACH PERSON OR ORGA	INISATION (CREDITOR) TO WHOM I WAS LIAB DURING THE RETURN PERIOD	LE TO PAY ANY DEBT AT ANY TIME		
	NAME OF CREDITOR	ADDRES	ADDRESS OF CREDITOR		
H DIS	POSITIONS OF REAL PRO	PERTY			
• disp • gr • m • gr • sa • crea • crea • tran • tran	osal includes – ant of a lease or licence for all or part of the la ortgage over your land, ant of easement over land by which you retain le of land (or grant of option by you) with (i sement or covenant over the land in favour o tion of an option to purchase land in favour o tion by you of a charge over your land; sfer by you of an interest in your land to a Tru sfer of land to your spouse or by your spouse	n the ability to use the land, i) a lease or licence granted to you or a right for f you f you; istee of a Trust of which you are a beneficiary; to a third party whereby you continue to occupy the to receive a benefit, eg rent from the land.	or you to repurchase the land, (ii) or an		
	Section I OR if you are Declaring an Inte		Nil		
Should y	ou require more detailed explanation on	the information to be provided in this Section	n, you should consult your solicitor		
R	ETURN PERIOD AS A RESULT O	ITION OF REAL PROPERTY BY ME OF WHICH I RETAINED, EITHER WH Y OR THE RIGHT TO REACQUIRE	IOLLY OR IN PART, THE USE		
No:	Street:	Suburb:	State:		
No:	Street:	Suburb:	State:		
No:	Street:	Suburb:	State:		
No:	Street:	Suburb:	State:		
U R	NDER ARRANGEMENTS MADE I	TION OF REAL PROPERTY TO A PE BY ME, BEING DISPOSITIONS MAD OF WHICH I OBTAINED EITHER WH	E AT ANY TIME DURING THE		
No:	Street;	Suburb:	State:		
No:	Street:	Suburb:	State:		
No:	Street:	Suburb:	State:		
No:	Street:	Suburb:	State:		

DISCLOSURE OF INTERESTS

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

MY SIGNATURE:	Ø		
DATE SIGNED:		21/07/2020	

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.