

Form 4 - Register of Members' Interests (Ordinary Return) Please read instructions and notes below before completing this return

Na	me: SHARON JOY McK	CELL
	ice held: ELECTED MEMB,	ER (WEST WARD)
Sta	tements to be completed:	
1.	Provide a statement of any income source of a financial benefit ⁴ that you have or a person related to you ⁵ has received, or was entitled to receive, during the return period.	PSS - SUPER FUND PENSI ALLOWANCE - CITY OF SALT PARTNER - WAGE FROM DO
2.	State the name of any company or other body, corporate or unincorporate, in which you held, or a member of your family ⁸ held, any office during the return period whether as director or otherwise.	NIL
3.	If you, or a member of your family ⁸ , received a contribution in cash or in kind of or above the amount of \$750 for or towards the cost of travel ⁹ beyond the limits of the State during the return period (other than a contribution by the council, the State, an employer or a person related to you by blood or marriage), state the source of the contribution.	NIL
4.	Provide particulars (including the name of donor) of any gift ¹⁰ of or above the amount or value of \$750 received by you or a person related to you ⁵ during the return period other than a person related by blood or marriage.	NIL
5.	If you, or a person related to you ⁵ , has, as a party to a transaction, had the use of property of the other person during the return period and – a) the use of property was not acquired for adequate consideration or through an ordinary commercial transaction or in the ordinary course of business; and b) the market value of the right is \$750 or more; and	N/L
	 the person granting the right is not related by blood or marriage, state the name and address of that other person. 	
6.	State the name or description of any company, partnership, association or other body in which you or a person related to you ⁵ is an investor ¹¹ .	N/L
7.	State the name of any political party, any body or association formed for political purposes or any trade or professional organisation 12 of which you are a member.	NIL
8.	State the name and business address of any employer for whom you work and, if you are employed, the name of the office or place where you work or a concise description of the nature of your work.	NIL
9.	Provide a concise description of any trust (other than a testamentary trust) of which you or a person related to you ⁵ is a beneficiary or trustee, and the name and address of each trustee.	NIL

10.	Provide the address or description of any land in which you have or a person related to you ⁵ has any beneficial interest ¹³ other than by way of security for any debt.	N/L
11.	Provide details of any fund in which you or a person related to you ⁵ has an actual or prospective interest to which contributions are made by a person other than you or a person related to you ⁵ .	PARTNER - AUSTRALIA, SUPER.
12.	If you are or a person related to you ⁵ is indebted to another person (not being related by blood or marriage) in an amount of or exceeding \$7 500—state the name and address of that other person.	N/L
13.	If you are or a person related to you ⁵ is owed money by a natural person (not being related by blood or marriage) in an amount of or exceeding \$10 000—state that person.	N/L
14.	Declare any other substantial interest of yours or of a person related to you ⁵ whether of a pecuniary nature or not, of which you are aware and which you consider might appear to raise a material conflict between your private interest and the public duty that you have or may subsequently have as a member of the council.	NIL
	Provide any other additional information which you think fit. That we have the state of the sta	'ell'
Dat	e: 15-07-	2024



Form 4 - Register of Members' Interests (Ordinary Return) Please read instructions and notes below before completing this return

Na	me: SHARON JOY MCKE		
Name: SHARON TOY MCKELL Office held: COUNCILLOR (WEST WARD)			
Sta	tements to be completed:		
1.	Provide a statement of any income source of a financial benefit ⁴ that you have or a person related to you ⁵ has received, or was entitled to receive, during the return period.	PSS SUPER FUND ALLOWANCE CITY OF SALIST PARTNER - WAGE FROM DOWNE	
2.	State the name of any company or other body, corporate or unincorporate, in which you held, or a member of your family ⁸ held, any office during the return period whether as director or otherwise.	NIL	
3.	If you, or a member of your family ⁸ , received a contribution in cash or in kind of or above the amount of \$750 for or towards the cost of travel ⁹ beyond the limits of the State during the return period (other than a contribution by the council, the State, an employer or a person related to you by blood or marriage), state the source of the contribution.	NIX	
4.	Provide particulars (including the name of donor) of any gift ¹⁰ of or above the amount or value of \$750 received by you or a person related to you ⁵ during the return period other than a person related by blood or marriage.	NIX	
5.	If you, or a person related to you ⁵ , has, as a party to a transaction, had the use of property of the other person during the return period and – a) the use of property was not acquired for adequate consideration or through an ordinary commercial transaction or in the ordinary course of business; and b) the market value of the right is \$750 or more; and c) the person granting the right is not related by blood or marriage, state the name and address of that other person.	N/L	
6.	State the name or description of any company, partnership, association or other body in which you or a person related to you ⁵ is an investor ¹¹ .	N/2	
7.	State the name of any political party, any body or association formed for political purposes or any trade or professional organisation ¹² of which you are a member.	NIL	
8.	State the name and business address of any employer for whom you work and, if you are employed, the name of the office or place where you work or a concise description of the nature of your work.	N/L	
9.	Provide a concise description of any trust (other than a testamentary trust) of which you or a person related to you ⁵ is a beneficiary or trustee, and the name and address of each trustee.	N/K	

10.	Provide the address or description of any land in which you have or a person related to you ⁵ has any beneficial interest ¹³ other than by way of security for any debt.	At NIK
11.	Provide details of any fund in which you or a person related to you ⁵ has an actual or prospective interest to which contributions are made by a person other than you or a person related to you ⁵ .	PARTNER - AUSTRALIAN
12.	If you are or a person related to you ⁵ is indebted to another person (not being related by blood or marriage) in an amount of or exceeding \$7 500—state the name and address of that other person.	1/12
13.	If you are or a person related to you ⁵ is owed money by a natural person (not being related by blood or marriage) in an amount of or exceeding \$10 000—state that person.	N/L
14.	Declare any other substantial interest of yours or of a person related to you ⁵ whether of a pecuniary nature or not, of which you are aware and which you consider might appear to raise a material conflict between your private interest and the public duty that you have or may subsequently have as a member of the council.	N/L
	Provide any other additional information which you think fit. nature: Maray Makell	
Dat	e: (24/-04-2023.	



Register of Interests: Elected Members (Primary Return)

S.65 and Schedule 3 clause 2(a1) Local Government Act 1999
Please read instructions and notes attached before completing this return

SHARON McKELL Name: COUNCILLOR - WEST WARD Office held: Statements to be completed: ELECTED MEMBER -CITY OF SALISBURY. 1. Provide a statement of any income source² that you have or a designated person or entity in relation to you³ has or expects to PSS SUPER FUND have in the period of 12 months after the date of the primary return. State the name of any company or other body, corporate or unincorporate, in which you hold, or a member of your family⁴ holds, any office whether as director or otherwise. PSS SUPER FUND 3. State the name or description of any company, partnership, association or other body in which you or a designated person or entity in relation to you 3 is an investor5. 4. State the name and business address of any employer for whom you work and, if you are employed, the name of the office or place where you work or a concise description of the nature of vour work. 5. State the name of any political party, any body or association RAA formed for political purposes or any trade or professional organisation⁶ of which you are a member. 6. Provide a concise description of any trust (other than a testamentary trust) of which you or a designated person or entity in relation to you³ is a beneficiary or trustee, and the name and address of each trustee. 7. Provide the address or description of any land in which you have or a designated person or entity in relation to you³ has any beneficial interest⁷ other than by way of security for any debt. PARTNER - AUSTRALIAN 8. Provide details of any fund in which you or a designated person or entity in relation to you³ has an actual or prospective interest to which contributions are made by a person other than you or a designated person or entity in relation to you3. 9. If you are or a designated person or entity in relation to you³ is indebted to another person (not being your relative8 or a relative8 of a member of your family4) in an amount of or exceeding \$7 500—state the name and address of that other person. 10. If you are or a designated person or entity in relation to you³ is owed money by a natural person (not being your relative⁸ or a 1116 relative8 of a member of your family4) in an amount of or exceeding \$10 000—state that person.

11.	Declare any other substantial interest of yours or of a designated person or entity in relation to you ³ whether of a pecuniary nature or not, of which you are aware and which you consider might appear to raise a material conflict between your private interest and the public duty that you have or may subsequently have as a member of the council.	NIL
12.	Provide any other additional information which you think fit.	N/L
Sig	nature: Maroy McKell te: 18-01-2023.	



Primary Return—Register of interests—Council member

s.65 and Schedule 3 clause 2(a1) Local Government Act 1999

Please read instructions and notes below before completing this return.

SURNAME:

McKELL **OTHER NAMES:**

OFFICE HELD:

SHARON TOY COUNCILLOR

Registrable interests	Details
Provide a statement of any income source ² that you have or a designated person or entity in relation to you ³ has or expects to have in the period of 12 months after the date of the primary return.	PSS SUPERANNUAT PENSION. PARTNER - SPOTER
State the name of any company or other body, corporate or unincorporate, in which you hold, or a member of your family ⁴ holds, any office whether as director or otherwise.	NIL
State the name or description of any company, partnership, association or other body in which you or a designated person or entity in relation to you ³ is an investor ⁵ .	NIL
State the name and business address of any employer for whom you work and, if you are employed, the name of the office or place where you work or a concise description of the nature of your work.	NIL
State the name of any political party, any body or association formed for political purposes or any	σ

NIK

trade or professional organisation⁶ of which you are

a member.

6	Provide a concise description of any trust (other than a testamentary trust) of which you or a designated person or entity in relation to you ³ is a beneficiary or trustee, and the name and address of each trustee.	NIL
7	Provide the address or description of any land in which you have or a designated person or entity in relation to you ³ has any beneficial interest ⁷ other than by way of security for any debt.	N/K
8	Provide details of any fund in which you or a designated person or entity in relation to you ³ has an actual or prospective interest to which contributions are made by a person other than you or a designated person or entity in relation to you ³ .	NIL
9	If you are or a designated person or entity in relation to you ³ is indebted to another person (not being your relative ⁸ or a relative ⁸ of a member of your family ⁴) in an amount of or exceeding \$7 500—state the name and address of that other person.	N/L
10	If you are or a designated person or entity in relation to you ³ is owed money by a natural person (not being your relative ⁸ or a relative ⁸ of a member of your family ⁴) in an amount of or exceeding \$10 000—state that person.	N/L
11	Declare any other substantial interest of yours or of a designated person or entity in relation to you ³ whether of a pecuniary nature or not, of which you are aware and which you consider might appear to raise a material conflict between your private interest and the public duty that you have or may subsequently have as a member of the council.	N/L
12	Provide any other additional information which you think fit.	
	NATURE: Maran A McKell OE: 21-11-2022.	
DAT	TE: 2/1-//- 2022.	