



Form 4 - Register of Members' Interests (Ordinary Return)

Please read instructions and notes below before completing this return

Name: SHIRAZEE REARDON

Office held: ELECTED MEMBER - COUNCILLOR.

Statements to be completed:

1. Provide a statement of any income source of a financial benefit⁴ that you have or a person related to you⁵ has received, or was entitled to receive, during the return period.
COUNCIL ALLOWANCE
SHARES
2. State the name of any company or other body, corporate or unincorporate, in which you held, or a member of your family⁸ held, any office during the return period whether as director or otherwise.
NIA.
3. If you, or a member of your family⁸, received a contribution in cash or in kind of or above the amount of \$750 for or towards the cost of travel⁹ 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.
NIA.
4. Provide particulars (including the name of donor) of any gift¹⁰ of or above the amount or value of \$750 received by you or a person related to you⁵ during the return period other than a person related by blood or marriage.
NIA.
5. If you, or a person related to you⁵, has, as a party to a transaction, had the use of property of the other person during the return period and –
NIA.
 - 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.
6. State the name or description of any company, partnership, association or other body in which you or a person related to you⁵ is an investor¹¹.
TABA
MEDICARE.
7. State the name of any political party, any body or association formed for political purposes or any trade or professional organisation¹² of which you are a member.
NIA.
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.
NIA.
9. Provide a concise description of any trust (other than a testamentary trust) of which you or a person related to you⁵ is a beneficiary or trustee, and the name and address of each trustee.
NIA.

4 MURDOCK CRT. PENRICE *PR*

10. Provide the address or description of any land in which you have or a person related to you^s has any beneficial interest¹³ other than by way of security for any debt.

6 IRVING PL. - PARA HILLS.
~~4 DUNKLEY CRT, Penrice~~ *PR*

11. Provide details of any fund in which you or a person related to you^s has an actual or prospective interest to which contributions are made by a person other than you or a person related to you^s.

N/A.

12. If you are or a person related to you^s 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/A.

13. If you are or a person related to you^s 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/A.

14. Declare any other substantial interest of yours or of a person related to you^s 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/A.

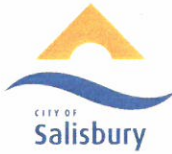
15. Provide any other additional information which you think fit.

Signature:



Date:

22. 7. 2024



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Please read instructions and notes below before completing this return

Name: SHIRAZEE REARDON

Office held: ELECTED MEMBER - COUNCILLOR.

Statements to be completed:

1. Provide a statement of any income source of a financial benefit⁴ that you have or a person related to you⁵ has received, or was entitled to receive, during the return period.

PAC - BOARD MEMBER.

2. State the name of any company or other body, corporate or unincorporate, in which you held, or a member of your family⁸ held, any office during the return period whether as director or otherwise.

THE PADDOCKS - CHAIR (UNPAID)
NHWSA - VICE PRESIDENT (UNPAID)
BSSA - PUBLIC OFFICER (UNPAID)
NEBS - VICE PRESIDENT (UNPAID) ^{TIL NOV 2022}

3. If you, or a member of your family⁸, received a contribution in cash or in kind of or above the amount of \$750 for or towards the cost of travel⁹ 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.

NIA.

4. Provide particulars (including the name of donor) of any gift¹⁰ of or above the amount or value of \$750 received by you or a person related to you⁵ during the return period other than a person related by blood or marriage.

NIA.

5. If you, or a person related to you⁵, has, as a party to a transaction, had the use of property of the other person during the return period and -

NIA.

- 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.

6. State the name or description of any company, partnership, association or other body in which you or a person related to you⁵ is an investor¹¹.

SHARES - TELSTRA
- MEDICARE

7. State the name of any political party, any body or association formed for political purposes or any trade or professional organisation¹² of which you are a member.

NIA.

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.

NIA.

9. Provide a concise description of any trust (other than a testamentary trust) of which you or a person related to you⁵ is a beneficiary or trustee, and the name and address of each trustee.

NIA.

10. Provide the address or description of any land in which you have or a person related to you⁵ has any beneficial interest¹³ other than by way of security for any debt. [REDACTED] LOT 6 IRVING PLACE, PARA HILLS
11. Provide details of any fund in which you or a person related to you⁵ has an actual or prospective interest to which contributions are made by a person other than you or a person related to you⁵. TELSTRA SUPER.
12. If you are or a person related to you⁵ 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/A.
13. If you are or a person related to you⁵ 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/A.
14. Declare any other substantial interest of yours or of a person related to you⁵ 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/A.
15. Provide any other additional information which you think fit. N/A

Signature:

Reorda

Date:

21/08/2023