



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

Please read instructions and notes below before completing this return

**Name:** Graham Reynolds

**Office held:** Councillor

### Statements to be completed:

- |  |  |
|--|--|
| 1. Provide a statement of any income source of a financial benefit <sup>4</sup> that you have or a person related to you <sup>5</sup> has received, or was entitled to receive, during the return period.  | <p>Department of Defence</p> <p>Calvary Healthcare Services (Wife)</p> <p>Calvary Central Districts (Wife)</p> <p>4 Andrew Ave, Salisbury East, SA, 5109 (Rental Property)</p> |
| 2. State the name of any company or other body, corporate or unincorporate, in which you held, or a member of your family <sup>8</sup> held, any office during the return period whether as director or otherwise.   | <p>Salisbury RSL – Vice President</p> <p>Uniting in Care (Salisbury) – Committee Member</p> <p>Australian Military Wives Choir – Coordinator SA (wife)</p>                     |
| 3. If you, or a member of your family <sup>8</sup> , received a contribution in cash or in kind of or above the amount of \$750 for or towards the cost of travel <sup>9</sup> 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 <sup>10</sup> of or above the amount or value of \$750 received by you or a person related to you <sup>5</sup> during the return period other than a person related by blood or marriage.   | Nil  |
| 5. If you, or a person related to you <sup>5</sup> , has, as a party to a transaction, had the use of property of the other person during the return period and –  | Nil  |
| <p>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</p> <p>b) the market value of the right is \$750 or more; and</p> <p>c) the person granting the right is not related by blood or marriage, state the name and address of that other person.</p>                                   |  |
| 6. State the name or description of any company, partnership, association or other body in which you or a person related to you <sup>5</sup> is an investor <sup>11</sup> .  | Nil  |
| 7. State the name of any political party, any body or association formed for political purposes or any trade or professional organisation <sup>12</sup> of which you are a member.   | <p>Liberal Party of South Australia</p> <p>Institution of Engineers (Australia)</p>  |
| 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.   | <p>Royal Australian Air Force</p> <p>c/o SRSPo</p> <p>Building 733S, RAAF Base Edinburgh, SA, 5111</p>   |
| 9. Provide a concise description of any trust (other than a testamentary trust) of which you or a person related to  | Nil  |

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you<sup>5</sup> is a beneficiary or trustee, and the name and address of each trustee.

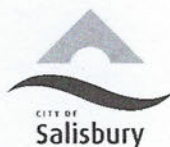
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|---|---|
| 10. Provide the address or description of any land in which you have or a person related to you <sup>5</sup> has any beneficial interest <sup>13</sup> other than by way of security for any debt.  | <div style="background-color: black; width: 150px; height: 1.2em; margin-bottom: 5px;"></div> 4 Andrew Ave, Salisbury East, SA, 5109                            |
| 11. Provide details of any fund in which you or a person related to you <sup>5</sup> has an actual or prospective interest to which contributions are made by a person other than you or a person related to you <sup>5</sup> .   | Military Super<br>Grow Wrap Super Service<br>Hesta (Wife)   |
| 12. If you are or a person related to you <sup>5</sup> 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.   | National Australia Bank Limited<br>(c/o 43 John Street, Salisbury, SA, 5108)  |
| 13. If you are or a person related to you <sup>5</sup> 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.  | Nil   |
| 14. Declare any other substantial interest of yours or of a person related to you <sup>5</sup> 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. | One Path (Life Insurance)<br>TAL (Life Insurance – Wife)  |
| 15. Provide any other additional information which you think fit.   | Member Adelaide Football Club<br>Member Salisbury RSL<br>Member Playford Baptist Church<br>Member Military Vehicle Museum of SA<br>Member Air Force Association |

**Signature:**



**Date:** 15 Aug 2022



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

Please read instructions and notes below before completing this return

**Name:** Graham Reynolds

**Office held:** Councillor

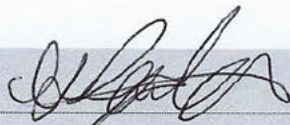
### Statements to be completed:

- |  |  |
|--|--|
| 1. Provide a statement of any income source of a financial benefit <sup>4</sup> that you have or a person related to you <sup>5</sup> has received, or was entitled to receive, during the return period.  | Dept of Defence<br>Calvary Healthcare Services (spouse)<br>4 Andrew Ave, Salisbury East (rental property)  |
| 2. State the name of any company or other body, corporate or unincorporate, in which you held, or a member of your family <sup>8</sup> held, any office during the return period whether as director or otherwise.   | Liberal Party of South Australia – President Wright SEC and Branch<br>Salisbury RSL – Vice President<br>Uniting in Care (Salisbury) Committee Member |
| 3. If you, or a member of your family <sup>8</sup> , received a contribution in cash or in kind of or above the amount of \$750 for or towards the cost of travel <sup>9</sup> 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 <sup>10</sup> of or above the amount or value of \$750 received by you or a person related to you <sup>5</sup> during the return period other than a person related by blood or marriage.   | Nil  |
| 5. If you, or a person related to you <sup>5</sup> , has, as a party to a transaction, had the use of property of the other person during the return period and –<br>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<br>b) the market value of the right is \$750 or more; and<br>c) the person granting the right is not related by blood or marriage, state the name and address of that other person. | Nil  |
| 6. State the name or description of any company, partnership, association or other body in which you or a person related to you <sup>5</sup> is an investor <sup>11</sup> .  | Nil  |
| 7. State the name of any political party, any body or association formed for political purposes or any trade or professional organisation <sup>12</sup> of which you are a member.   | Liberal Party of South Australia<br>Institution of Engineers (Australia)   |
| 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.   | Royal Australian Air Force<br>c/o SRSPO<br>Building 733S, RAAF Base Edinburgh, SA, 5111  |
| 9. Provide a concise description of any trust (other than a testamentary trust) of which you or a person related to you <sup>5</sup> 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 <sup>5</sup> has any beneficial interest <sup>13</sup> other than by way of security for any debt.  | <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> 4 Andrew Ave, Salisbury East, SA, 5109              |
| 11. Provide details of any fund in which you or a person related to you <sup>5</sup> has an actual or prospective interest to which contributions are made by a person other than you or a person related to you <sup>5</sup> .   | Military Super<br>HESTA (wife)<br>Super SA Superannuation Fund (wife)  |
| 12. If you are or a person related to you <sup>5</sup> 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.   | National Australia Bank (Limited)<br>(c/o 43 John Street, Salisbury, SA, 5108)   |
| 13. If you are or a person related to you <sup>5</sup> 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.  | Nil  |
| 14. Declare any other substantial interest of yours or of a person related to you <sup>5</sup> 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. | AIA Group (Life Insurance)<br>One Path (Life Insurance)<br>TAL (Life Insurance – Spouse)   |
| 15. Provide any other additional information which you think fit.   | Member Adelaide Football Club<br>Member Playford Baptist Church<br>Member Salisbury RSL (Vice President)<br>Member Military Vehicle Museum of SA |

Signature:



Date:

22 AUG 21



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

Please read instructions and notes below before completing this return

**Name:** Graham Reynolds

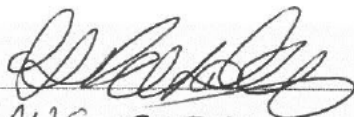
**Office held:** Councillor

### Statements to be completed:

1. Provide a statement of any income source of a financial benefit <sup>4</sup> that you have or a person related to you <sup>5</sup> has received, or was entitled to receive, during the return period.	Department of Defence Calvary Healthcare Services (Wife) 4 Andrew Ave, Salisbury East, SA, 5109 (Rental Property)
2. State the name of any company or other body, corporate or unincorporate, in which you held, or a member of your family <sup>8</sup> held, any office during the return period whether as director or otherwise.	Liberal Party of South Australia – President Wright SEC and Branch Salisbury RSL – Committee Member Uniting in Care (Salisbury) – Committee Member
3. If you, or a member of your family <sup>8</sup> , received a contribution in cash or in kind of or above the amount of \$750 for or towards the cost of travel <sup>9</sup> 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 <sup>10</sup> of or above the amount or value of \$750 received by you or a person related to you <sup>5</sup> during the return period other than a person related by blood or marriage.	Nil
5. If you, or a person related to you <sup>5</sup> , 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.	Nil
6. State the name or description of any company, partnership, association or other body in which you or a person related to you <sup>5</sup> is an investor <sup>11</sup> .	Nil
7. State the name of any political party, any body or association formed for political purposes or any trade or professional organisation <sup>12</sup> of which you are a member.	Liberal Party of South Australia Institution of Engineers (Australia)
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.	Royal Australian Air Force c/o SRSPO Building 733S, RAAF Base Edinburgh, SA, 5111
9. Provide a concise description of any trust (other than a testamentary trust) of which you or a person related to you <sup>5</sup> 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<sup>5</sup> has any beneficial interest<sup>13</sup> other than by way of security for any debt. [REDACTED]  
4 Andrew Ave, Salisbury East, SA, 5109
11. Provide details of any fund in which you or a person related to you<sup>5</sup> has an actual or prospective interest to which contributions are made by a person other than you or a person related to you<sup>5</sup>.  
Military Super  
Hesta (Wife)  
Super SA Superannuation Fund (Wife)
12. If you are or a person related to you<sup>5</sup> 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.  
National Australia Bank Limited  
(c/o 43 John Street, Salisbury, SA, 5108)
13. If you are or a person related to you<sup>5</sup> 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.  
Nil
14. Declare any other substantial interest of yours or of a person related to you<sup>5</sup> 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.  
AIA Group (Life Insurance)  
TAL (Life Insurance – Wife)
15. Provide any other additional information which you think fit.  
Member Adelaide Football Club  
Member Salisbury RSL (Committee Member)  
Member Playford Baptist Church  
Member Military Vehicle Museum of SA

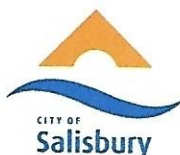
Signature:



Date:

11 AUG 2020.





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

Please read instructions and notes below before completing this return

Name: GRAHAM RONALD REYNOLDS

Office held: COUNCILLOR, CITY OF SALISBURY, NORTH WARD

### Statements to be completed:

- |  |   |
|--|---|
| 1. Provide a statement of any income source of a financial benefit <sup>4</sup> that you have or a person related to you <sup>5</sup> has received, or was entitled to receive, during the return period.  | DEPARTMENT OF DEFENCE<br>CALVARY HEALTHCARE SERVICES (WIFE)<br>OFFICEWORKS (SON)<br>PEREGRINE CORPORATION (DAUGHTER)<br>4 ANDREW AVE, SALISBURY EAST, SA, 5109 (RENTAL PROPERTY)<br>11 MCGUIRE CRT, HACKHAM, SA, 5163 (RENTAL PROPERTY) |
| 2. State the name of any company or other body, corporate or unincorporate, in which you held, or a member of your family <sup>8</sup> held, any office during the return period whether as director or otherwise.   | NIL   |
| 3. If you, or a member of your family <sup>8</sup> , received a contribution in cash or in kind of or above the amount of \$750 for or towards the cost of travel <sup>9</sup> 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 <sup>10</sup> of or above the amount or value of \$750 received by you or a person related to you <sup>5</sup> during the return period other than a person related by blood or marriage.   | NIL   |
| 5. If you, or a person related to you <sup>5</sup> , has, as a party to a transaction, had the use of property of the other person during the return period and –<br>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<br>b) the market value of the right is \$750 or more; and<br>c) the person granting the right is not related by blood or marriage, state the name and address of that other person. | NIL   |
| 6. State the name or description of any company, partnership, association or other body in which you or a person related to you <sup>5</sup> is an investor <sup>11</sup> .  | NIL   |
| 7. State the name of any political party, any body or association formed for political purposes or any trade or professional organisation <sup>12</sup> of which you are a member.   | LIBERAL PARTY OF SOUTH AUSTRALIA<br>INSTITUTION OF ENGINEERS (AUSTRALIA)  |
| 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.   | ROYAL AUSTRALIAN AIR FORCE<br>C/O SRSP0<br>BUILDING 733S, RAAF BASE EDINBURGH, SA, 5111   |

9. Provide a concise description of any trust (other than a testamentary trust) of which you or a person related to you<sup>5</sup> 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<sup>5</sup> has any beneficial interest<sup>13</sup> other than by way of security for any debt. [REDACTED]  
4 ANDREW AVE, SALISBURY EAST, SA, 5109  
11 MCGUIRE CRT, HAKHAM, SA, 5163
11. Provide details of any fund in which you or a person related to you<sup>5</sup> has an actual or prospective interest to which contributions are made by a person other than you or a person related to you<sup>5</sup>. MILITARY SUPER  
HESTA (WIFE)  
SUPER SA SUPERANNUATION FUND (WIFE)
12. If you are or a person related to you<sup>5</sup> 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. NIL
13. If you are or a person related to you<sup>5</sup> 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. NIL
14. Declare any other substantial interest of yours or of a person related to you<sup>5</sup> 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. AIA GROUP (LIFE INSURANCE)  
TAL (LIFE INSURANCE – WIFE)
15. Provide any other additional information which you think fit. MEMBER ADELAIDE FOOTBALL CLUB  
MEMBER SALISBURY RSL  
MEMBER RAAF ASSOCIATION  
MEMBER MILITARY VEHICLE MUSEUM OF SA  
MEMBER PLAYFORD BAPTIST CHURCH

Signature:



Date:

31 JUL 2019





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

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**Name:** GRAHAM RONALD REYNOLDS

**Office held:** COUNCILLOR, CITY OF SALISBURY, NORTH WARD

### Statements to be completed:

- |  |   |
|--|---|
| 1. Provide a statement of any income source of a financial benefit <sup>4</sup> that you have or a person related to you <sup>5</sup> has received, or was entitled to receive, during the return period.  | DEPARTMENT OF DEFENCE<br>CALVARY HEALTHCARE SERVICES (WIFE)<br>OFFICEWORKS (SON)<br>PEREGRINE CORPORATION (DAUGHTER)<br>4 ANDREW AVE, SALISBURY EAST, SA, 5109 (RENTAL PROPERTY)<br>11 MCGUIRE CRT, HACKHAM, SA, 5163 (RENTAL PROPERTY) |
| 2. State the name of any company or other body, corporate or unincorporate, in which you held, or a member of your family <sup>8</sup> held, any office during the return period whether as director or otherwise.   | NIL   |
| 3. If you, or a member of your family <sup>8</sup> , received a contribution in cash or in kind of or above the amount of \$750 for or towards the cost of travel <sup>9</sup> 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 <sup>10</sup> of or above the amount or value of \$750 received by you or a person related to you <sup>5</sup> during the return period other than a person related by blood or marriage.   | NIL   |
| 5. If you, or a person related to you <sup>5</sup> , has, as a party to a transaction, had the use of property of the other person during the return period and –<br>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<br>b) the market value of the right is \$750 or more; and<br>c) the person granting the right is not related by blood or marriage, state the name and address of that other person. | NIL   |
| 6. State the name or description of any company, partnership, association or other body in which you or a person related to you <sup>5</sup> is an investor <sup>11</sup> .  | NIL   |
| 7. State the name of any political party, any body or association formed for political purposes or any trade or professional organisation <sup>12</sup> of which you are a member.   | LIBERAL PARTY OF SOUTH AUSTRALIA<br>INSTITUTION OF ENGINEERS (AUSTRALIA)  |
| 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.   | ROYAL AUSTRALIAN AIR FORCE<br>C/O WASS SPO<br>BUILDING 171, DSTG EDINBURGH, SA, 5111  |

- |   |  |
|---|--|
| 9. Provide a concise description of any trust (other than a testamentary trust) of which you or a person related to you <sup>5</sup> 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 <sup>5</sup> has any beneficial interest <sup>13</sup> other than by way of security for any debt.  | <div style="background-color: black; width: 200px; height: 1.2em; margin-bottom: 0.5em;"></div> 4 ANDREW AVE, SALISBURY EAST, SA, 5109<br>11 MCGUIRE CRT, HAKHAM, SA, 5163 |
| 11. Provide details of any fund in which you or a person related to you <sup>5</sup> has an actual or prospective interest to which contributions are made by a person other than you or a person related to you <sup>5</sup> .   | MILITARY SUPER<br>HESTA (WIFE)<br>SUPER SA SUPERANNUATION FUND (WIFE)  |
| 12. If you are or a person related to you <sup>5</sup> 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.   | NIL  |
| 13. If you are or a person related to you <sup>5</sup> 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.  | NIL  |
| 14. Declare any other substantial interest of yours or of a person related to you <sup>5</sup> 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. | AIA GROUP (LIFE INSURANCE)<br>TAL (LIFE INSURANCE – WIFE)  |
| 15. Provide any other additional information which you think fit.   | MEMBER ADELAIDE FOOTBALL CLUB<br>MEMBER SALISBURY RSL<br>MEMBER RAAF ASSOCIATION<br>MEMBER MILITARY VEHICLE MUSEUM OF SA<br>MEMBER PLAYFORD BAPTIST CHURCH                 |

Signature:



Date:

12 AUG 2018