Declaration Form

	(Full Name)			
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The Declaration Form must be submitted to observe on Blands spin now any by \$100pm on the day of the meeting.

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Attendance at Remote Meetings

Declaration Form

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	Declaration Form
I, Councillor And	G KGZ declare that I will be participating remotely (Full Name)
	g/Services/ Outcomes / Council meeting/Public Forum being held on (select one)
13 (1C) (date)	
In order to maintain con location specified above	nfidentiality, I acknowledge that no other persons are present in the for the duration of the meeting.
I will not record, downlo	ad or track the meeting proceedings.
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Meeting:	Services/Outcomes/Council
Date:	2020
Item No:	LUCU
Type of Interest:	Pecuniary/Non-pecuniary Significant/Not Significant
In accordance with Pa Interest Form will be st the Committee Clerk.	art 16 of the Code of Meeting Practice, a completed Conflict of ubmitted before the conclusion of the abovementioned meeting, to
Matter Raised/Genera	ll Business (Committee Meeting)
Meeting:	Services/Outcomes
Date:	2020
Subject:	
Questions to the May	or (Council)
Meeting:	Ordinary Council
Date:	2020
Question/Subject:	
In accordance with Part in writing prior to the ab	9 of the Code of Meeting Practice, the question/s will be submitted overnentioned meeting, to the Manager Governance & Legal.
Signature	Date

This Declaration Form must be submitted to governance@fairfieldcity.nsw.gov au by 5.00pm on the day of the meeting.



	Declaration Form
I, Councillor An	(Full Name) declare that I will be participating remotely
- ^ - ^	/Services/Outcomes/Council meeting/Public Forum being held on (select one)
10 /11/2C	2020 from Five Dock (location)
	fidentiality, I acknowledge that no other persons are present in the for the duration of the meeting.
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Conflicts of Interest	
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Date:	2020
Question/Subject:	
	t 9 of the Code of Meeting Practice, the question/s will be submitted bovementioned meeting, to the Manager Governance & Legal.
Signature	Date 2020

This Declaration Form must be submitted to governance@fairfieldcdv.nsw.gov.au by 5.00pm on the day of the meeting.



	Declaration Form	
I, Councillor Anrico	(Full Name) declare that I will be participating re	emotely
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