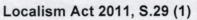
Notification by Member of a Local Authority of Pecuniary and Other Interests





| I, (full | name) | MRS 10 | DEBRA THOMPSON | | |
|-------------|--|---|---|--|--|
| a Member of | | Shadforth Parish Council | | | |
| * N-4 | ardica Shel | per of ferentiaming vito | (total endis) attrecit s evalt thy yorkward period a total of | | |
| partn | er; or a person v | | our spouse or partner means your spouse or civil ving as husband or wife; or a person with whom | | |
| SEC | TION 1 - DISCL | OSABLE PECUNIAR | RY INTERESTS (please state "None" where appropriate): | | |
| (1) | name of the per | son or body that employ | ssion or vocation carried on for profit or gain and the bys/has appointed you – this should include every ion that you have to declare for tax purposes. | | |
| Myse | elf | 1000 | My spouse or partner* | | |
| | none | | COACA COACA | | |
| (2) | made a paymer or any expense details of any pa trade union with 1992. You do r | nt or provision of any ot is incurred by you in car ayments made. This sh in the meaning of the T not need to declare the y making them. You d | body/ies (other than a relevant authority) who has/have other financial benefit to you in respect of your election arrying out your duties as a Member together with should include any payment of financial benefit from a Trade Union and Labour Relations (Consolidation) Act he amounts of any payments, only the name of the do not need to declare if you pay your election | | |
| Myse | elf | | My spouse or partner* | | |
| | hane | | | | |
| (3) | and /or which h firm in which yo | as not been fully discha | for goods, services or works which are to be executed; harged made between the Council and yourselves or a pany of which you are a remunerated director, or a cified in (1) | | |
| Myse | elf | | My spouse or partner* | | |
| | NOM | e . | | | |

(4) Land: Address or other description (sufficient to identify location) of any land in the Council's area in which you have a beneficial interest – this includes details of your home address, land, garages, allotments and any other properties you own, lease or rent and any other properties you are a mortgagee of within the Council's area.

| Myself | My spouse or partner* |
|--------|-----------------------|
| | ANUSQ ZVM |
| none | |
| | |

(5) Licences: Address or other description (sufficient to identify the location) of any land in the Council's area for which you have a licence (alone or jointly with others) to occupy for a month or longer. e.g. land in the Council area which you or your spouse/partner have a right to occupy, but neither own nor have tenancy of. "Land" includes any buildings or parts of buildings.

| Myself | My spouse or partner* |
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| vive | |

(6) Corporate Tenancies: Address or other description (sufficient to identify location) of any land where the landlord is the Council and you are the tenant. This means you, a firm in which you are a partner, a company of which you are a remunerated director, or a person or body of the description specified in (1) above has a beneficial interest.

| | My spouse or partner* |
|------|-----------------------|
| | |
| none | |
| reve | |

(7) Securities: Name(s) of any person(s) or body/ies having a place of business or land in the Council's area, and in which you have a beneficial interest in a class of securities of that person(s) or body/ies that exceeds the nominal value of £25,000, or one hundredth of the total issued share capital (whichever is lower) or if the share capital of that body is more than one class the total nominal value of the shares of any one claim in which you have an interest exceeds one hundredth of the total issued share capital of that class

| Myself | | My spouse or partner* |
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SECTION 2 – OTHER REGISTERABLE PERSONAL INTERESTS (8)I am a member or in a position of general control or management of the following body/ies to which I have been appointed or nominated by the Council - e.g. Outside Bodies (9)I am a member or in a position of general control or management of the following body/ies exercising functions of a public nature. e.g. County Councillor, Area Action Partnerships I am a member or in a position of general control or management of the following body/ies (10)directed to charitable purposes, e.g. local Freemasons Lodge, Rotary Club, Community Associations

| (11) | (11) I am a member or in a position of general control or management of the one of whose principal purposes include the influence of public opinion or any political party or trade unions) of which I am a Member (or in a positio or management) e.g. relevant Association of Councillors, trade unions Alliance and professional associations | | luding ral control |
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| | the following portyles as Action Partnerships | | mem a ms (8). |
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| SECT | TION 3 - NOTIFICATION C | F GIFTS AND HOSPITALITY | |
| previo | | ns from whom you have received gifts/hospitality within estimated value of more than £50 (whether or not you | |
| the off Counc | er) which is attributable to you | ur position as an elected member of co-opted member Nature of gift/hospitality | of the Estimated |
| Counc | er) which is attributable to you il | ur position as an elected member of co-opted member | of the |
| Counc | Name of donor | ur position as an elected member of co-opted member | Estimated Value |
| Counc | Name of donor | Nature of gift/hospitality | Estimated Value |
| Counc | Name of donor | Nature of gift/hospitality | Estimated Value |
| Counc | Name of donor | Nature of gift/hospitality | Estimated Value |
| Date Signed NOTES | Name of donor Name of donor | Nature of gift/hospitality | Estimated Value |

A member must within 28 days of becoming aware of any change to the interests specified above, register details of that new interest or change by providing written notification to the Council's monitoring officer.

For office use only

| NOTICE OF DISCLOSABI | NOTICE OF DISCLOSABLE PECUNIARY INTERESTS AND OTHER REGISTRABLE INTERESTS | |
|----------------------|---|--|
| DATE OF NOTICE | DATE OF RECEIPT BY MONITORING OFFICER | |
| 01.06.21 | 03.06.21 | |

| NOTICE(S) OF REVISION | | |
|-----------------------|--|--|
| DATE(S) OF NOTICE(S) | DATE(S) OF RECEIPT BY MONITORING OFFICER | |
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