

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



Localism Act 2011, S.29 (1)

I, (full name)

PETER OTTOMA MUSA

a Member of (please state name of Parish/Town Council)

GREAT NEWTON HELLFLE

\* Note: In the notice below reference to your spouse or partner means your spouse or civil partner; or a person with whom you are living as husband or wife; or a person with whom you are living as if you are civil partners.

**SECTION ONE – DISCLOSABLE PECUNIARY INTERESTS** (Please state NONE where appropriate)

(1) Your employment, office, trade, profession or vocation carried on for profit or gain and the name of the person or body that employs/has appointed you – this should include every business, employment and profession that you have to declare for tax purposes.

Myself	My spouse or partner*
NA	SOCIAL CARE YOUR CARE NURSING

(2) Sponsorships: Name of person(s) or body/ies (other than a relevant authority) who has/have made a payment or provision of any other financial benefit to you in respect of your election or any expenses incurred by you in carrying out your duties as a Member together with details of any payments made. This should include any payment of financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992. You do not need to declare the amounts of any payments, only the name of the person or body making them. You do not need to declare if you pay your election expenses yourself.

Myself	My spouse or partner*
NA	NA

(3) Contracts: Description of any contract for goods, services or works which are to be executed; and /or which has not been fully discharged made between the Council and yourselves or 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)

Myself	My spouse or partner*
NA	NA

- (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*	
Address or description	Land Type	Address or description	Land Type
NA		NA	

- (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*
NA	NA

- (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.

Myself	My spouse or partner*
NA	NA

- (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*
NA	NA

**SECTION TWO – 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 Parish/Town Council – e.g. Outside Bodies**

**Name of Body/Organisation and Position Held**

NA

- (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. School Governor, Member of another Local Authority, Area Action Partnerships etc.**

**Name of Body/Organisation and Position Held**

NA

- (10) I am a member or in a position of general control or management of the following body/ies directed to charitable purposes, **e.g. local Freemasons Lodge, Rotary Club, Community Associations**

**Name of Body/Organisation and Position Held**

NA

- (11) I am a member or in a position of general control or management of the following body/ies one of whose principal purposes include the influence of public opinion or policy (including any political party or trade unions) of which I am a Member (or in a position of general control or management) e.g. relevant Association of Councillors, trade unions, Countryside Alliance and professional associations

**Name of Body/Organisation and Position Held**

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**SECTION THREE – NOTIFICATION OF GIFTS AND HOSPITALITY**

Please provide details of any persons from whom you have received gifts/hospitality within the previous 3 years (or offer of) with an estimated value of more than £50 (whether or not you accept the offer) which is attributable to your position as an elected member of co-opted member of the Council

Date	Name of donor	Nature of gift/hospitality	Estimated Value

Signed ..... Date 10/6/24 .....

**NOTES:**

**FAILURE, WITHOUT REASONABLE EXCUSE, TO REGISTER A DISCLOSABLE PECUNIARY INTEREST IS A CRIMINAL OFFENCE UNDER S34 OF THE LOCALISM ACT 2011 AS WELL AS BEING A BREACH OF THE CODE OF CONDUCT.**

**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 DISCLOSABLE PECUNIARY INTERESTS AND OTHER REGISTRABLE INTERESTS	
DATE OF NOTICE	DATE OF RECEIPT BY MONITORING OFFICER
<b>10.06.2024</b>	<b>11.07.2024</b>

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