RELATED PARTY DISCLOSURES BY KEY MANAGEMENT PERSONNEL

See Council's Related Party Disclosure Policy FIN27

Name of Key Management Personnel:	
Position of Key Management Personnel:	

Please read the Privacy Collection Notice provided with this notification, which explains what a related party transaction is and the purposes for which Council is collecting and will disclose, the related party information provided by you in this notification.

Please complete the table below for **each related party transaction with Council** that you, or a close member of you family, or an entity related to you or a close member of your family:

a) Has previously entered into **and** which will continue in the 2016/2017 financial year; or
b) Has entered into, or is reasonably likely to enter into, in the 2016/2017 financial year.

Description of Related Party Transaction	Is Transaction Existing/Potential?	Related Party's Name (Individual's or Entity's Name)	Related Party's Relationship/Reasons why Related	Description of Transaction Documents of Changes to the Related Party Relationship

See Council's Related Party Disclosure Policy FIN27

Notification

I, _____(name)_____ , _____(position)_____
notify that, to the best of my knowledge, information and belief as at the date of this notification, the
above list includes all existing and potential related party transactions with Council involving myself,
close members of my family, or entities controlled or jointly controlled by me or close members of my
family, relevant to the 2016/2017 financial year.

I make this notification after reading the Privacy Collection Notice provided by City of Palmerston,
which details the meaning of the words "related party", "related party transaction", "close members of
the family of a person" and in relation to an entity "control" or "joint control", and the purposes for which
this information will be used and disclosed.

I permit the Finance Manager and other permitted recipients specified in Council's Related Party
Disclosure Policy to access the register of interest of me and persons related to me and to use the
information for the purposes specified in that policy.

Signature of named Key Management Personnel: _____

Dated: _____