

Form 2 – Private Disclosure – Short Form
[Subsections 5(4) and (5)]

SASKATCHEWAN MEMBER'S DECLARATION

MEMBER		
Last Name	First Name	Constituency
Home Address		
ADDRESS		PHONE NUMBER
CITY	PROVINCE	POSTAL CODE
Legislature Address		
ADDRESS		PHONE NUMBER
CITY	PROVINCE	POSTAL CODE
Constituency Address		
ADDRESS		PHONE NUMBER
CITY	PROVINCE	POSTAL CODE

DECLARATION

- ☐ I am familiar with the requirements of *The Members' Conflict of Interest Act*.
- ☐ I have reviewed my private disclosure statement dated _____ and declare that no material changes have occurred respecting my assets, liabilities and financial interests and those of my family and of any private companies that are controlled by all or any of us since that statement was filed.
- OR—**
- ☐ I have reviewed my private disclosure statement dated _____ and declare that the following details the material changes that have occurred respecting my assets, liabilities and financial interests and those of my family and of any private companies that are controlled by all or any of us since that statement was filed:

MATERIAL CHANGE (clearly identify each material change and number consecutively)

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SUBMISSION

I request the commissioner's permission to submit this declaration pursuant to subsection 11(6) of *The Members' Conflict of Interest Act*.

Date

Member (Signature)

AUTHORIZATION

For office use only

_____ is authorized to submit this declaration pursuant to subsection 11(6) of
The Members' Conflict of Interest Act.

Date

Conflict of Interest Commissioner (Signature)