Declaration of Interest
Municipal Conflict of Interest Act

Agenda:

☒ Council ☐ Committee of the Whole

Details:

Subject matter: BROCK COMMUNITY HEALTH CENTRE SUPPORT

Communication number / deputation:

Date of meeting: JANUARY 27, 2020

Application signature / certification:

I, Mayor/ Regional Councillor/ Councillor W.E. TED SMITH

declare a potential (☒ deemed / ☐ direct / ☐ indirect) pecuniary interest on Council /

Committee communication number

subject matter BROCK COMMUNITY HEALTH CENTRE SUPPORT

for the following reason:

I AM CHAIR OF THE BOARD OF DIRECTORS OF THE CHC

Councillor signature: W.E. Ted Smith

Councillor name: W.E. TED SMITH

For an "indirect pecuniary interest" see Section 2 of the *Municipal Conflict of Interest Act.*

For a "deemed" direct or indirect pecuniary interest see Section 3 of the *Municipal Conflict of Interest Act.*

This document is available in alternate formats upon request.
Please contact the Township at 705-432-2355.