Declaration of Interest

Municipal Conflict of Interest Act

Meeting:
Committee Name or Council: Community and Health Services Committee
Date of Meeting: August 15, 2023

Details:
Subject Matter: 
Report Number: 

Applicant signature/certification:
I, Councillor, Colleen James, declare a ☒ deemed/☐ direct/☐ indirect pecuniary interest on Council/Committee report number __________________ for the following reason.

Reason:
I am disclosing a non-pecuniary conflict of interest as an immediate family member is directly involved in the project.

It would not be appropriate for me to participate in and vote or attempt to influence the vote with respect to this recommendation.

I will also leave the meeting during the taking of the vote on this matter so that my abstention from voting will not be counted as a negative vote in accordance with the Municipal Act, 2001.

Councillor signature: Colleen James

Councillor name: (print): Colleen James

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.

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