

Conflict of Interest Form

Declaration of Interest

Municipal Conflict of Interest Act

MEETING DATE & TYPE:
Meeting Type: (Committee/Council) Finance Committee Date of Meeting: Jule 27th 2024
Date of Meeting: Jule 27th, 2024
SUBJECT MATTER:
Item Number on Agenda: $8.1 F_{11} - 24 - 15$
Item Number on Agenda: 8.1 Fin - 24-15 Item Title: West Linclon Memorial Hospital Dobt Issuan
DECLARATION:
I, Authory Scan Linauv declare a potential (deemed/direct/indirect) pecuniary interest on the Agenda Item listed above, for the following reason(s):
(Nature of Conflict)

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*.