This declaration of financial and other personal interests is to be completed annually by:

* all Kyeema Board members;
* any other person associated with Kyeema to whom the Board or CEO consider the declarations policy should apply because of their responsibilities or the nature of their work.

On completion, this declaration is to be forwarded to the Administration office at Kyeema.

Name:

Position:

I declare that:

* I am aware of my responsibilities under Kyeema’s Code of Conduct to behave honestly and with integrity, to disclose, and take reasonable steps to avoid, any conflict of interest (real, perceived or potential) in connection with Kyeema and not make improper use of (a) inside information, or (b) my duties, status, power or authority, in order to gain, or seek to gain, a benefit or advantage for myself or for any other person;
* I have read and understood:
  + Kyeema’s Board Charter and Code of Conduct Policy
  + any other policies and guidelines on declarations of personal interests that Kyeema have put in place

that require me to declare any private interests or relationships which could or could be seen to influence the decisions I am taking or the advice I am giving;

* The attached list (GF-24 Declaration of Interests) of my private interests and relationships has been prepared on the basis of:
  + the particular roles and responsibilities of Kyeema;
  + my particular roles and responsibilities at Kyeema

I undertake to immediately inform Kyeema’s Board Chairperson or CEO of any changes to:

* my responsibilities or to the issue or subjects on which I am required to make decisions or give advice; and
* my personal circumstances

that could affect the contents of this declaration and to provide an amended declaration/s using this pro forma.

I undertake to declare any private interests or relationships of my immediate family that I am aware of, should circumstances arise in which I consider that they could or could be seen to influence the decisions I am taking or the advice I am giving. I understand that this would require the consent of the family member to the collection by my agency of personal information and a declaration that he/she is aware of the purpose for which the personal information has been collected, the legislative requirements authorising the collection and the third parties to whom the personal information may be disclosed, and consents.

Signature:

Name:

Date: