ANNEX B

|  |  |
| --- | --- |
| coar of Arms(No b (Converte | **DEPARTMENT OF AGRICULTURE, FORESTRY AND FISHERIES**  |
| DECLARATION OF INDEPENDENCE (DISCLOSURE OF INTERESTS FORM) |

**Declaration:**

I,

………………………………………………………… with identification number

(full name)

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |

(Insert identification number)

hereby certify that the following information is complete and correct to the best of my knowledge:

**1. Shares and other financial interests**

|  |  |  |
| --- | --- | --- |
| **Number of shares/Extent of financial interests**  | **Nature**  | **Name of Company/Entity**  |
|  |  |  |
|  |  |  |
|  |  |  |

**2. Directorships and partnerships**

|  |  |
| --- | --- |
| **Name of corporate entity or partnership** | **Type of business**  |
|  |  |
|  |  |
|  |  |

**3. Consultancies and retainerships**

|  |  |  |
| --- | --- | --- |
| **Name of client**  | **Nature**  | **Type of activity/business** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**4. Sponsorships**

|  |  |
| --- | --- |
| **Source of assistance / sponsorship**  | **Description of assistance / sponsorship** |
|  |  |
|  |  |
|  |  |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE OF FIRST LINE AUDITOR**

**DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PLACE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**