

VILLAGE OF GLASLYN
PUBLIC DISCLOSURE STATEMENT
FORM 1

NAME: KYLE WELLS

ADDRESS: 173 3RD STREET WEST

DISCLOSURE OF EMPLOYER:

Pursuant to subclause 142(2)(a)(i) of *The Municipalities Act*, I hereby disclose the name of every employer, person, corporation, organization, association, or other body from which I or someone in my family receives remuneration for services performed as an employee, director, manager, operator, contractor, or agent:

MY NAME OR FAMILY MEMBER NAME	PAYEE	NATURE OF RELATIONSHIP

DISCLOSURE OF CORPORATE INTERESTS:

Pursuant to subclause 142(2)(a)(ii) of *The Municipalities Act*, I hereby disclose the name of each corporation in which I or someone in my family has a controlling interest, or of which I or someone in my family is a director or a senior officer:

MY NAME OR FAMILY MEMBER NAME	NAME OF CORPORATION

DISCLOSURE OF PARTNERSHIPS

Pursuant to subclause 142(2)(a)(iii) of *The Municipalities Act*, I hereby disclose the name of each partnership or firm in which I or someone in my family is a member:

MY NAME OR FAMILY MEMBER NAME	NAME OF PARTNERSHIP OR FIRM

DISCLOSURE OF BUSINESS ARRANGEMENTS

Pursuant to subclause 142(2)(a)(iv) of *The Municipalities Act*, I hereby disclose the name of corporation, organization, enterprise, firm, association, or other body from which I or someone in my family directs, manages, operates or is otherwise involved that:

- a) transacts business with the municipality;
- b) the council considers appropriate or necessary to disclose; or
- c) is prescribed.

MY OR FAMILY MEMBER NAME	NAME OF CORPORATION, ENTERPRISE, FIRM, PARTNERSHIP, ORGANIZATION, ASSOCIATION OR BODY

DISCLOSURE OF PROPERTY HOLDINGS:

Pursuant to clause 142(2)(b) of *The Municipalities Act*, I hereby disclose the municipal address or legal description of any property located in the municipality of an adjoining municipality that is owned by:

- a) myself or someone in my family; or
- b) a corporation, incorporated or continued pursuant to *The Business Corporations Act* or the *Canada corporations Act*, of which I or someone in my family has a controlling interest.

OWNERS	MUNICIPAL ADDRESS OR LEGAL DESCRIPTION	MUNICIPALITY

DISCLOSURE OF CONTRACTS AND AGREEMENTS


Pursuant to clause 142(2)(c) of *The Municipalities Act*, I hereby disclose the general nature and any material details of any contract or agreement involving myself or someone in my family that could reasonably be perceived to be affected by a decision, recommendation or action of the council and to affect my impartiality in the exercise of my office:


MY NAME OR FAMILY MEMBER NAME	GENERAL NATURE AND ANY MATERIAL DETAILS OF ANY CONTRACT OR AGREEMENT

DECLARATION

I, Kyle Wells, of the Municipality of the Village of Glaslyn, in the province of Saskatchewan, do hereby declare that to the best of my knowledge, information and belief, the statements and allegations contained and made in this form are true and complete, and I make this declaration for the purpose of official registration, in the full knowledge that it will be available for public examination.

Dated the 16th day of November, 20 20.

 Witness 



 Signature of Declarant
 Date Received: Nov 16 2020

VILLAGE OF GLASLYN
PUBLIC DISCLOSURE ANNUAL STATEMENT
FORM 2

NAME: KYLE WELLS

ADDRESS: BOX 34 GLASLYN SK SOM OYO

This annual declaration is made pursuant to subsection 142(3) of *The Municipalities Act*.

I hereby declare that no material change has occurred since my last Public Disclosure Statement was filed.

OR

The following are changes to my last Public Disclosure Statement:


	NAME
	ADDRESS
	DISCLOSURE OF EMPLOYER
	DISCLOSURE OF CORPORATE INTERESTS
	DISCLOSURE OF PARTNERSHIPS
	DISCLOSURE OF BUSINESS ARRANGEMENTS
	DISCLOSURE OF PROPERTY HOLDINGS
	DISCLOSURE OF CONTRACTS AND AGREEMENTS

DETAILS OF CHANGES:

DECLARATION

I, Kyle Wells, of the Municipality of the Village of Glaslyn, in the province of Saskatchewan, do hereby declare that to the best of my knowledge, information and belief, the statements and allegations contained and made in this form are true and complete, and I make this declaration for the purpose of official registration, in the full knowledge that it will be available for public examination.

Dated the 16 day of November, 20 20.

Witness 


Signature of Declarant

Date Received: Nov 16, 2020