

Schedule 2




DECLARATION OF INTERESTS
MADE PURSUANT TO RULES 29 AND 36 OF THE RULES OF PROCEDURE
OF THE STATES OF DELIBERATION AND THEIR COMMITTEES

Surname: HARWOOD	Forenames in full: PETER ANDREW
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I hereby certify that, to the best of my knowledge and belief, this Declaration of Interests gives full and complete particulars, as at the date of this declaration, of all matters which I am required to declare, as a Member of the States of Deliberation, pursuant to Rules 29 and 36 of the Rules of Procedure of the States of Deliberation and their Committees or as a person who is a non-States member of a States' Committee pursuant to Rule 46.

I understand that I am required to declare interests or benefits of which I am aware received by my spouse, co-habiting partner or infant children.

I further understand that this form is a public document and will be published on the States' website.

Signature: 	Date: 12/10/2017
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**This form must be returned to Her Majesty's Greffier
not later than the 31st May 20**.**

For use by H. M. Greffier:

Date return received:

PART 1
Employment

Enter 'none' in box if there
is no interest to declare

NIL

Name and address of each Employer	Brief description of the business/work

PART 2
Directorships

Enter 'none' in box if there
is no interest to declare

Name and address of each Company	Brief description of the business/work
LIST ATTACHED	

PART 3
Partnerships

Enter 'none' in box if there
is no interest to declare

NONE

Name and address of each Partnership	Brief description of the business/work

PART 4
Offices Held

Enter 'none' in box if there
is no interest to declare

Name and address of each Office held	Brief description of the business/work
HELP AGGURNSEY CHURCH (CHARITY)	TRUSTEE
PAROCHIAL APPEALS TRIBUNAL	CHAIR

PART 5
Self-Employment and any other Consultancy, Profession, Trade, Vocation or other work not declared in
Parts 1-4

Enter 'none' in box if there
is no interest to declare

NONE.

Brief description of the business/work	Name and address of any person or entity from whom you receive payment or benefit which forms a significant portion of either your income from this work or your total income

PART 6
Real Property situated in the Bailiwick

Enter 'none' in box if there
is no interest to declare

Address of each Property	State whether owned, leased, rented or held in trust	Purpose for which Property is held
LA MAISON DU CARROSSE. KINGS ROAD ST PETER PORT.	OWNED	PRINCIPAL RESIDENT.

PART 7
Company Shareholdings

Enter 'none' in box if there
is no interest to declare

Name and address of each Company
SOMMELIER WINE COMPANY LIMITED
TURNWOOD INVESTMENTS LIMITED
BAILIWICK INVESTMENTS LIMITED
THE CHANNEL ISLAND PROPERTY FUND LIMITED
In respect of companies listed above where the holding is over 10% of the issued share capital, give a brief description of their business/work and state what real property, if any, they hold (either directly or indirectly) in the Bailiwick.
SOMMELIER WINE COMPANY LIMITED - Independent Wine Merchant
TURNWOOD INVESTMENTS LIMITED - Private Family Investment Holding Company

PART 8
Trusts (excluding Professional Trusteeships)

Enter 'none' in box if there
is no interest to declare

Name and address of each Trust	State whether as beneficiary or trustee
HELP A GUERNSEY CHILD (Charitable Trust)	Trustee
R.A.R. EVANS RETIREMENT ANNUITY TRUST	Trustee

PART 9

Payments received for Public Speaking

Enter 'none' in box if there
is no interest to declare

N/L

Name and address of each organisation from which a payment was received in the period from 1 st May 20** to 30 th April 20** §	Brief description of the function at which the speech was made

§ This section does not apply to Members who were not in office during the relevant period.

PART 10

Other Gifts, Benefits and Hospitality Received

Enter 'none' in box if there
is no interest to declare

N/L

Declare all gifts and material benefits received by you, a close family member or associate in the period from 1 st May 20** to 30 th April 20** § which are of a value greater than 1% of basic allowance payable to States Members	
Nature of gift or benefit:	
By whom received:	
Name of donor or benefactor:	
Value of gift or benefit:	
If gift was money or a tangible item state date that money or item was transferred or delivered to the States	

§ This section does not apply to Members who were not in office during the relevant period.

PART 11
Any Other Interests

Enter 'none' in box if there
is no interest to declare

N/A

Declare here any other interest or benefit received which, whilst not required to be registered under Parts 1-10 might reasonably be perceived by other persons to influence actions as an elected Member of the States.

Part 12
Employment by the States of close Family Members

Enter 'none' in box if there
is no interest to declare

N/A

Declare here the name, familial relationship, job title and usual place of work of any of the following who is an employee of the States, that is to say parent, spouse, cohabiting partner, child, grandchild or sibling.

CONTINUATION SHEETS

If there was insufficient space provided in any Part of this form please add a continuation sheet.

Are any continuation sheets attached?

YES / NO

If yes, specify number of sheets ONE .

PETER ANDREW HARWOOD

CURRENT DIRECTORSHIPS AS AT 1st January 2017.

ABTA INSURANCE PCC LIMITED (Guernsey Captive Insurance Company – ABTA membership)
BAILIWICK OF GUERNSEY VICTIM SUPPORT AND WITNESS SERVICE LBG (Guernsey registered charity)
INTERNATIONAL MOVERS MUTUAL INSURANCE COMPANY LIMITED (Guernsey Captive Insurance Company – British Association of Removers membership).
JLP INSURANCE LIMITED (Guernsey Captive Insurance Company – John Lewis Group)
SCOUT INSURANCE (GUERNSEY) LIMITED (Guernsey Captive Insurance Company – The Scout Association).
SENATOR INSURANCE LIMITED (Guernsey Captive Insurance Company – Eversheds LLP)
SOMMELIER WINE COMPANY LIMITED (Guernsey Independent Wine Merchant)
THE BURNHILL INSURANCE COMPANY LIMITED (Guernsey Captive Insurance Company – The De La Rue Group plc)
TURNWOOD INVESTMENTS LIMITED (Harwood family Investment Company).