

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

| | Surname: | Forenames in full: | | |
|---|---|---|---|-----------------------------|
| | De Lisle | | David de Garis | |
| | hereby certify that, to the best of my omplete particulars, as at the date of the Member of the States of Deliberation, pursuant to Rule 46. understand that I am required to declar o-habiting partner or infant children. further understand that this form is a pursuant to Rule 46. | his declaration, of all oursuant to Rules 29 a r as a person who is a re interests or benefit: | matters which I am required to declare nd 36 of the Rules of Procedure of the Sonon-States member of a States' Comr | e, as a States mittee |
| | Signature: David De Lisle | hin | Date: 10 June 2020 | |
| | his form must be returned to Her Ma not later than the 31st May | jesty's Greffier | | |
| | For use by H. M. Greffier: | | | |
| L | Date return received: | | | |

PART1 Employment

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

| Name and address of each Employer | Brief description of the business/work | |
|-----------------------------------|--|--|
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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 |
|---|--|
| Le Marchant Property Ltd with spouse Le Douit Farm, Les Reveaux, St Pierre du Bois | Retail shop |
| Les Marettes Holdings Ltd Les Roussillons, Rue Rocheuse, St Pierre du Bois | Agricultural and residential property |

PART3 Partnerships

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

| Brief description of the business/work | |
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PART 4 Offices Held

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

| Brief description of the business/work | |
|--|--|
| Parish business | |
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PART 5 Self-Employment and any other Consultancy, Profession, Trade, Vocation or other work not declared in

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

| 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 |
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| | |

PART 6 Real Property situated in the Bailiwick

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

| ther owned, | Purpose for which |
|-----------------|----------------------|
| nted or held in | Property is held |
| | |
| ith spouse | Principal residence |
| ith spouse | Property for letting |
| thspouse | Retail shop |
| h spouse | Retail shop |
| ed | Property let |
| ed . | Property let |
| | |
| | |

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

| Name and address of each Company | | |
|--|--|--|
| | | |
| Les Marettes Holdings Ltd, Les Roussillions, Rue Rocheuse, St Pierre du Bois | | |
| Les Marettes Holdings Lea, Les Rosssinons, Noe Rochesse, Ser leire de Bois | | |
| Le Marchant Property Ltd, Le Douit Farm, Les Reveaux, St Pierre du Bois (with spouse) | | |
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| 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. | | |
| uncerty of maneetry, in the bandwick. | | |
| Agricultural and residential property | | |
| Agricoltoral and residential property | | |
| Retail shop | | |
| retuil shop | | |
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PART 8 Trusts (excluding Professional Trusteeships)

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

| Name and address of each Trust | State whether as beneficiary or trustee |
|--------------------------------|---|
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| Enter 'none' in box if there | none |
|------------------------------|------|
| is no interest to declare | |

| Name and address of each organisation from which a payment was received in the period from 1 st May 2018 to 30 th April 2019 § | 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.

ART 10

Other Gifts, Benefits and Hospitality Received

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

Declare all gifts and material benefits received by you, a close family member or associate in the period from 1st May 2018 to 30th April 2019 § which are of a value greater than 1% of basic allowance payable to States Members

Nature of gift or benefit:

By whom received:

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.

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

| 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. |
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Part 12 Employment by the States of cloth Family Member

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

| 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. |
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| |

CONTINUATION SHEETS

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

| Are any continuation sheets attached? | /NO |
|---------------------------------------|----------------------------------|
| | If yes, specify number of sheets |