

Form 2—Register of interests of a councillor and their related persons

Section 171B—Local Government Act 2009

This form is to be used:

- a. for initial lodgement of your register of interests
- b. to amend your existing register of interests.

For a councillor – complete section A.

For a councillor’s related person – complete sections A and B.

Relevant sections in the *Local Government Regulation 2012* have been indicated in italics.

1. Particulars

A. Particulars of councillor

Full name:	Michael Drey Wickerson
Local government:	Rockhampton Regional Council
Position:	

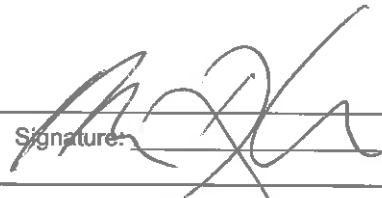
B. Particulars of related person

Full name:	
Relationship to councillor:	

Signature and date of statement

Date of statement:	29/06/2016
Signature of councillor:	

Notes are available at the end of this document to assist you with completing your register of interests.

Signature:		Date:	29/6/16
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2. Financial and non-financial particulars

2.1 Shareholdings or controlling interests in corporations

Add	Remove	1. Name of corporation 2(a)	2. Controlling Interest?	3. Shareholdings of the corporation in other corporations 2(b)	4. Is the shareholding held in a propriety company? 2(c) (if yes complete 2.2)
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

Signature: _____ Date: ____/____/____

12. Gifts over \$500 or all gifts totalling more than \$500

Add	Remove	Name of donor 12(1)(a)	Description of the gift/s 12(1)(b)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Michael McMillan	LG Election Campaign Contribution - \$625
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Robert Pleash	LG Election Campaign Contribution - \$625
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Catherine George	LG Election Campaign Contribution - \$625
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Stephen Schwarten	LG Election Campaign Contribution - \$625
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Brett Wass	LG Election Campaign Contribution - \$625
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Tory Acton	LG Election Campaign Contribution - \$625
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Drew Wickerson	LG Election Campaign Contribution - \$625
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Amanda Marshall	LG Election Campaign Contribution - \$625
<input type="checkbox"/>	<input type="checkbox"/>		

13. Sponsored hospitality benefits

Add	Remove	Source of the contribution for travel or accommodation received 13(a)	Purpose of the benefit received 13(b)
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		

14. Memberships of political parties, bodies, associations and trade or professional organisations

Add	Remove	Name of organisation 14	Address of organisation 14
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		

Signature:  Date: 29/6/16

15. Other assets over \$5,000

Add	Remove	Details of other asset/s 15
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	

16. Other sources of income more than \$500 a year

Add	Remove	Source of income 16
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	

17. Other financial or non-financial interests known to the relevant person that raise, appear to raise or could potentially raise, a conflict between the interest and your duty as a councillor

Add	Remove	Other interests 17
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
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<input type="checkbox"/>	<input type="checkbox"/>	

Signature: _____ Date: ___ / ___ / ___

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1. Particulars

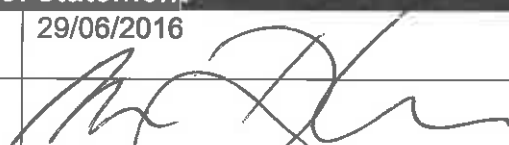
A. Particulars of councillor

Full name:	Michael Drew Wickerson
Local government:	Rockhampton Regional Council
Position:	Councillor

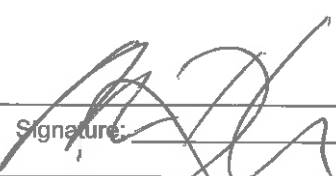
B. Particulars of related person

Full name:	
Relationship to councillor:	

Signature and date of statement

Date of statement:	29/06/2016
Signature of councillor:	

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<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

Signature: _____ Date: ____/____/____

12. Gifts over \$500 or all gifts totalling more than \$500

Add	Remove	Name of donor 12(1)(a)	Description of the gift/s 12(1)(b)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Memphalene Investments	LG Election Campaign Contribution - \$1875
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Ray White Rockhampton	LG Election Campaign Contribution - \$625
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Ian Weigh Motors	LG Election Campaign Contribution - \$500
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
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<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
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<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		

Signature:  Date: 29/8/16

15. Other assets over \$5,000

Add	Remove	Details of other asset/s 15
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	

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Add	Remove	Source of income 16
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<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
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<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	

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<input type="checkbox"/>	<input type="checkbox"/>	
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<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	

Signature: _____ Date: ___ / ___ / ___