

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

## Section 171B—Local Government Act 2009

This form is to be used:

- for initial lodgement of your register of interests, or
- 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:	Vonda Malone
Local government:	Torres Shire Council
Position:	Mayor

#### B. Particulars of related person

Full name:	Bernard Malone
Relationship to councillor:	Husband

#### Signature and date of statement

Date of statement:	20/05/20
Signature of councillor:	

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

Signature: [Signature] Date: 20 / 5 / 20

Version no: October 2018



## 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 proprietary company in which the shareholding is held, a holding company? 2(c) (if yes complete 2.2)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Western Cape Community Co-Existence Agreement	<input type="checkbox"/>		<input checked="" 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: *[Signature]* Date: 20/ 5/ 20

Signature: J. Doe Date: 20/5/20



**3. Positions held as an officer of corporations**

Add	Remove	Name of corporation 3(a)	Nature of corporation's activities 3(c)	Nature of office held 3(b)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Community Enterprise Queensland/IBIS	Retail	Chairperson/Director
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Torres Health Indigenous Corporation	Primary Health Care Services	Chairperson/Director
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Torres and Cape Indigenous Councils Alliance (TCICA)	Local Government	Chairperson/Member
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Northern Aboriginal and Torres Strait Islander Health Alliance (NATSIHA)	Primary Health Care Services	Deputy Chairperson/Director
<input checked="" type="checkbox"/>	<input type="checkbox"/>	National Indigenous Australians Agency – Ministerial Forum on Northern Australia – Indigenous Reference Group (IRG)	Economic Development	Member
<input checked="" type="checkbox"/>	<input type="checkbox"/>	National Indigenous Australians Agency – Senior Advisory Group (Voice)	Constitutional Recognition	Member
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Telstra Regional Advisory Committee	Telecommunications	Member

**4. Beneficial interests in trusts or nominee corporations**

Add	Remove	Name (or description) of trust or corporation's name 4(a)	Nature of activities of trust/corporation 4(b)	Nature of interest 4(c)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Western Cape Community Trust	Support traditional owner initiatives in the Western Cape region	Shareholder Class A
<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: M. A. L. O. E.Date: 20 / 5 / 20

**5. Self-managed superannuation fund – N/A**

Add	Remove	Name or description of the fund 5(2)(a)	The nature of the activities of the fund 5(2)(b)	The investments or other interests in property held, of which the relevant person is aware, by the fund 5(2)(c)
<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: *[Signature]* Date: 20/5/20

**6. Trustee of family or business trusts - N/A**

Add	Remove	Name (or description) of trust 6(a)	Nature of activities of trust 6(b)	Name of each beneficiary or class of beneficiary 6(c)
<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"/>			

**7. Interests in partnerships and joint ventures – N/A**

Add	Remove	Name (or description) of partnership/joint venture 7(a)	Nature of activities of partnership/joint venture 7(b)	Nature of interest 7(c)
<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"/>			

**8. Interests in land**

Add	Remove	Suburb or locality of land 8(a)	Approximate size of land 8(b)	Purpose for which land is used/intended to be used 8(c)	Nature of interest 8(d)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Muralug Beach, Prince of Wales Island	607m2	Residential	Owner
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Long Beach, Prince of Wales Island	1.11HA	Residential	Joint Owner
<input checked="" type="checkbox"/>	<input type="checkbox"/>	11 Blackall Street, Thursday Island	600m2	Commercial/ Residential	Owner
<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>				

Signature: *[Signature]*Date: 20/ 5/ 20

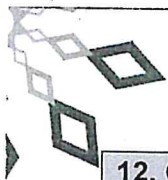


9. Liabilities more than \$10,000 (excluding department store and credit card accounts)			
Add	Remove	Nature of liability 9(1)(a)	Name of creditor 9(1)(b)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Home Loan	National Australia Bank
<input type="checkbox"/>	<input type="checkbox"/>		
<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"/>		

10. Debentures and similar investments				
Add	Remove	Name of corporation the investment is in 10(b)	Nature of corporation's business 10(c)	Nature of investment 10(a)
<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"/>			

11. Savings and investment accounts held with financial institutions			
Add	Remove	Name of institution 11(b)	Nature of account 11(a)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	National Australia Bank	NAB Classic Bank
<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: *[Signature]* Date: 20/5/20



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

Add	Remove	Name of donor 12(1)(a)	Description of the gift/s 12(1)(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"/>		
<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"/>		

**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"/>		

Signature: *[Signature]* Date: 20 / 5 / 20



**15. Other assets over \$5,000**

Add	Remove	Details of other asset/s 15
<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	Vonda Malone and Associates
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Torres Health Indigenous Corporation
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Community Enterprise Queensland
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Indigenous Reference Group
<input checked="" 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"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	

Signature: MaloneDate: 20/5/20