

*STATEMENT TYPE*

***lAST NAME OF THE DECLARANT***

***First name of the declarant***

***In capacity of : …***

*Date of appointment or date of entry into office:*

*Statement given on:*

**Personal information:**

**Birth year:**

**Address:**

**Information declared on the public housing office *(if applicable)***

**Number of units:**

**Information declared on the company *(if applicable)***

**Annual turnover of the year preceding entry into office:**

**Name of the group the company belongs to:**

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| **1° Business activities, resulting in compensation or incentives, that were being performed as of the election or nomination date or during the past five years** |

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| **Description** | **Compensation or incentive received** |
| Employer:  *from XXXX to XXXX*  *Description*  Comments: | *Amount of the compensation per year* |

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| **2° Consulting activities being performed as of the election or nomination date and during the past five years** |

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| **Description** | **Compensation or incentive received** |
| Employer:  *from XXXX to XXXX*  *Description*  Comments: | *Amount of the compensation per year* |

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| **3° Holdings in the management bodies of public or private organizations or of a company, as of the election or nomination date or during the past five years** |

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| **Description** | **Compensation or incentive received** |
| Employer:  *from XXXX to XXXX*  *Description*  Comments: | *Amount of the compensation per year* |

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| **4° Direct financial holdings in the capital of a company as of the election or nomination date** |

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| **Description** |
| Company:  Number of shares held:  Proportion of the capital held (%):  This holding gives me directly or indirectly the control of a consulting activity:  Assessment of the financial holding (€):  Received remuneration or reward:  Comments: |

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| **5° Business activities performed as of the election or nomination date by the spouse, civil partner or common-law partner** |

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| **Name** | **Business activity** |
| *Name of the spouse* | Employer:  *Description*  Comments: |

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| **6° Volunteer positions that are likely to generate a conflict of interest** |

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| **Identity of the structure or legal person** | **Description of activities and responsibilities** |
| *Name of the structure* | *Description of actitivities*  Comments: |

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| **7° Duties and elected offices being performed as of the election or nomination date** |

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| **Description** | **Compensation, allowances and incentives received** |
| *Description*  *from XXXX to XXXX*  Comments: | *Amount of the compensation per year* |

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| **8° Parliamentary staff members** |

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| **Name** | **Description of other professional activities performed** |
| *First name and last name* | Employer :  *Description*  Comments: |

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| **Comments** |

*I the undersigned, certify on my honour that the information provided in this statement is accurate*

*Given at, on*

*Signature:* *Last name and first name of the declarant*