



## CODE OF CONDUCT AND REGISTER OF MEMBERS' FINANCIAL AND OTHER INTERESTS FORM

### FORM 1

You must declare that you have read and understood the combined authority's code of conduct. You must also declare your interests on this form. The interests are recorded in a register. The register of interests is maintained by the Monitoring Officer and will be published on the Combined Authority's website.

Name: DAVID KENNETH MCKENZIE MASON

Member of: CPCA SKILLS COMMITTEE (SUBSTITUTE)

(Please state which bodies you have been appointed to e.g. Combined Authority, the Audit and Governance Committee or the Overview and Scrutiny Committee or another body of the Combined Authority)

### CODE OF CONDUCT

I declare that I will duly and faithfully fulfil the duties of the above appointment according to the best of my judgement and ability.

I have read and understood the Combined Authority's code of conduct adopted by the Authority. I undertake that in performing the functions of those offices, I will observe the Combined Authority's code of conduct.

Name: DKM MASON

Signature: \_\_\_\_\_

Date: 7/1/2020

### MEMBERS INTERESTS

#### PART 1: DISCLOSABLE PECUNIARY INTERESTS

Please complete each section for you and your civil partner, spouse or partner you live with.

Please note: For the purposes of the register, an interest of your spouse or civil partner, which is listed in the national rules, is **your** disclosable pecuniary interest. The Combined Authority's website will not name your partner. It must show all disclosable pecuniary interests and those that relate to your spouse, civil partner as your interests.

| Q1 EMPLOYMENT OFFICE TRADE PROFESSION OR VOCATION                                                                                        |                                                               |
|------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| 1.1 Are you employed – whether full or part-time?<br>(This does not include a remunerated director – this is dealt with at Question 1.4) |                                                               |
| If NO, please state here and go to Q1.2 <u>NO</u>                                                                                        |                                                               |
| If YES, please state the name and address of your employer                                                                               |                                                               |
| Please complete this information for:                                                                                                    |                                                               |
| You                                                                                                                                      | <u>Full</u><br><del>AND FOR SPOUSE - ANN MCKENZIE MASON</del> |



|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| Your Civil Partner,<br>spouse or partner you<br>live with                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ANN EVELYN MASON<br>(NOT EMPLOYED) |
| 1.2 Are you self-employed or do you run, or are you a partner in a business?<br><br>If NO, please state here and go to Q1.3 <u>NO</u><br>If YES, please state the name and address(es) of your business(es)<br><br>Please complete this information for:                                                                                                                                                                                                                                                                                                                                      |                                    |
| You                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                    |
| Your Civil Partner,<br>spouse or partner you<br>live with                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                    |
| 1.3 Do you hold any office, profession or vocation carried on for profit or gain?<br>(Gain or profit is not defined in the Act but would include anything which results in a benefit having pecuniary value and any activity carried on for gain or profit regardless of whether gain or profit is actually achieved. You do not need to include your membership of Cambridgeshire and Peterborough Combined Authority)<br><br>If NO, please state here and go to Q1.4 <u>NO</u><br>If YES, please specify the office, profession or vocation<br><br>Does the information provided relate to: |                                    |
| You                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                    |
| Your Civil Partner,<br>spouse or partner you<br>live with                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                    |
| 1.4 Are you a remunerated director of a company? (This means that you receive payment, services, goods or other benefits from the company having a pecuniary value)<br><br>If NO, please state here and go to Q2 <u>NO</u><br>If YES, please state the name and address(es) of your company/companies<br><br>Does the information provided relate to:                                                                                                                                                                                                                                         |                                    |
| You                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                    |
| Your Civil Partner,<br>spouse or partner you<br>live with                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                    |



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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| <b>Q2 SPONSORSHIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                |
| <p>2.1 Has any person, or body, made a payment to you for any expenses incurred by you as a member?<br/>(This does not include any expenses paid to you by Cambridgeshire and Peterborough Combined Authority to fulfil your role as a member)</p> <p>If NO, please go to Q2.2<br/>If YES, please provide details:</p>                                                                                                                                                                          | <p>YES <input type="checkbox"/><br/>NO <input checked="" type="checkbox"/></p> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                |
| <p>2.2 Has any person, or body, made a payment to you for your election expenses?</p> <p>If NO, please go to Question 2.3<br/>If YES, please provide details</p>                                                                                                                                                                                                                                                                                                                                | <p>YES <input type="checkbox"/><br/>NO <input checked="" type="checkbox"/></p> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                |
| <p>2.3 Have you received any payment or financial benefit from a trade union?</p> <p>If NO, please go to Q3<br/>If YES, please provide details:</p>                                                                                                                                                                                                                                                                                                                                             | <p>YES <input type="checkbox"/><br/>NO <input checked="" type="checkbox"/></p> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                |
| <b>Q3 CONTRACTS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                |
| <p>3.1 Do you have any contracts with the Cambridgeshire and Peterborough Combined Authority for goods or services which has not been discharged?<br/>(A contract is normally written and includes any agreement or arrangement for the supply of goods or services for this Combined Authority)</p> <p>If NO or NOT KNOWN, please state here and go to Q3.2 <u>No</u><br/>If YES, please provide details of the goods or services provided</p> <p>Does the information provided relate to:</p> |                                                                                |
| You                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                |
| Your Civil Partner,<br>spouse or partner you<br>live with                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                |



- 3.2 Does any body, in which you hold a beneficial interest, have any contracts with the Cambridgeshire and Peterborough Combined Authority for goods or services which has not been discharged?  
(A contract is normally written and includes any agreement or arrangement for the supply of goods or services for this Combined Authority)

If NO or NOT KNOWN, please state here and go to Q4. NO  
If YES, please provide details of the goods or services provided

Does the information provided relate to:

|                                                           |  |
|-----------------------------------------------------------|--|
| You                                                       |  |
| Your Civil Partner,<br>spouse or partner you<br>live with |  |

#### **Q4 LAND LICENCES AND CORPORATE TENANCIES**

- 4.1 Do you hold any beneficial interest in land within the Cambridgeshire and Peterborough Combined Authority's area? (A beneficial interest is one in which you have some proprietary interest in land or buildings, or parts of land or buildings. You should include your home under this heading as owner, lessee or tenant and any land in which you are joint owner, lessee or tenant. You should also include any property from which you receive rent, or of which you are a mortgagee).

If NO, please state here and go to Q4.2 NO  
If YES, please give the address or a brief description of the land:

Does the information provided relate to:

|                                                           |  |
|-----------------------------------------------------------|--|
| You                                                       |  |
| Your Civil Partner,<br>spouse or partner you<br>live with |  |

- 4.2 Do you have a licence to occupy land for a month or longer within the Cambridgeshire and Peterborough Combined Authority area? (A licence is a contract granting you the right to occupy land or buildings on a non-exclusive basis. Please include any licence which you have jointly with others)

If NO, please state here and go to Q4.3 NO  
If YES, please give details of the licence (the address or a brief description of the land)

Does the information provided relate to:

|                                                           |  |
|-----------------------------------------------------------|--|
| You                                                       |  |
| Your Civil Partner,<br>spouse or partner you<br>live with |  |



- 4.3 Do you have a beneficial interest in any body which is the tenant of land where the Cambridgeshire and Peterborough Combined Authority is the landlord? (Please provide details of any land or buildings where Cambridgeshire and Peterborough Combined Authority is the landlord and the tenant is a body on which you have some proprietary interest for your own benefit e.g. your business. You should give the address or a brief description to identify the tenancy and the body which is the tenant)

If NO, please state here and go to Q5 NO

If YES, please provide the address(es) or other descriptions(s) of any land interest:

Does the information provided relate to:

|                                                           |  |
|-----------------------------------------------------------|--|
| You                                                       |  |
| Your Civil Partner,<br>spouse or partner you<br>live with |  |

**Q5 SECURITIES**

- 5.1 Do you have a beneficial interest in a class of securities of a body that:  
(a) has a place of business in the Cambridgeshire and Peterborough Combined Authority's area and  
(b) that exceeds the nominal value of £25,000 or 1/100 of the total issued shared capital of that body?

(If you own shares or other form of equity in a company or other body which has a place of business within the Cambridgeshire and Peterborough Combined Authority area, you will need to consider whether the interest is to be included. Identify the nominal value; this is the amount of shares indicated on the certificate; not the market value. If this exceeds £25,000, you need to register the name of the company or body. If this is less than £25,000 but your holding is more than 1% of the total issued share capital, you need to register the name of the company or body)

If NO, please state here and go to the signatory part of this form. NO

If YES, please provide details:

Does the information provided relate to:

|                                                           |  |
|-----------------------------------------------------------|--|
| You                                                       |  |
| Your Civil Partner,<br>spouse or partner you<br>live with |  |



PART 2

**NON-PECUNIARY (OTHER INTERESTS)**

Use this section to declare which are not Disclosable Pecuniary Interests, but which might be affected by Combined Authority business.

You should declare at meetings any interests of a partner or family member which might be affected by business under discussion.

Non-Statutory Disclosable Interests (note – these are not Disclosable pecuniary interests) – please provide details of any other interest you wish to declare but which are not disclosable pecuniary interests. Examples are set out in the guidance note attached to the end of this document.

|                                                     |  |
|-----------------------------------------------------|--|
| You                                                 |  |
| Your Civil Partner, spouse or partner you live with |  |

Name: DKM MASON

Signature: 

Date: 7/1/2020

Please return this form to the Monitoring Officer, Cambridgeshire and Peterborough Combined Authority, Incubator 2, The Boulevard, Alconbury Weald Enterprise Campus, Alconbury Weald, Huntingdon, Cambs PE28 4XA or by email to Sue Hall [susan.hall@cambridgeshirepeterborough-ca.gov.uk](mailto:susan.hall@cambridgeshirepeterborough-ca.gov.uk)

Signature of Monitoring Officer: \_\_\_\_\_ Date: \_\_\_\_\_