

Mallee Track Health and Community Service
Gifts, Benefits and Hospitality Register 2019-20

Date	Estimated or Actual value	Offered by (name of individual/organisation)	Reason they gave for making the offer:	Are they an MTHCS associate? (Y/N)	If accepted would: a) a conflict of interest exist; (Y/N) or b) bring the offer or, MTHCS or public sector into disrepute? (Y/N) Decline if YES to either	There is a legitimate business benefit to MTHCS, public sector or State for accepting the offer, i.e. a) it was offered during the individual's official duties; and b) it relates to the individual's official responsibilities; and c) it has a benefit to MTHCS, public sector or State If NO offer must be declined If YES detail the business benefit (per the minimum accountabilities).	Decision re the offer: a) Declined or Accepted (state which) b) ownership (e.g. state whether individual retained; was transferred to MTHCS ownership; returned to offer or etc.)	Who approved acceptance of offer (name & position)	Completed by (name & position)
Nil for period									