

Declaration of Interests

Please declare any interests which apply to you or, for pharmacy/NHS related interests only, to a member of your close family or anyone else with whom you have a close personal connection².

Category	Please give details of any interest that applies to you	Please give details of any pharmacy or NHS-related interests of either a family member or another close personal connection
Remunerated directorships of companies (public or private) and businesses owned personally or in partnership	STC Training Ltd	
Remunerated employment	2008-2009	
Remunerated consultancies, with list of clients in preceding 12 months	2008-2009	
Remunerated contributions to professional or scientific journals or websites etc	2008-2009	
Any other remunerated work not covered above	2008-2009	
Names of companies or other bodies in which I/my connected person have a shareholding interest greater than 10% of the share capital (either on my own or another's behalf)	2017	
Names of charities or other not for profit or voluntary organisations that I am involved with	RESTAINTMENT TRUST	Registered charity
Memberships of professional bodies		

Name: *1437 S. DODD*

Signed: *[Signature]*

Date: *15.2.25*

¹ Such as spouse/partner, child, parent (or any other close family member)

² Such as business partner