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| Name: | Date: |

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| 1. | Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership |  |
| 2. | Remunerated employment or offices |  |
| 3. | Remunerated Consultancy(s) |  |
| 4. | Remunerated work performed under contract |  |
| 5. | Names of companies or other bodies in which I have an interest, either on my own account, my spouse or infant children, for a beneficial interest in share holdings greater than the 10% of the share capital |  |
| 6. | Remunerated contributions to professional and scientific publications |  |
| 7. | Names of charities, not for profit and/or voluntary sector organisations in the field of health and social care or that contract for NHS services that I or my spouse have involvement with. |  |
| 8. | Other sources of income or pecuniary support relevant to my membership of LPC |  |
| 9. | Membership of other pharmaceutical bodies |  |