

**Community Pharmacy North Yorkshire
ANNUAL DECLARATION OF INTERESTS
(for the period 01 April 2018 to 31 March 2019)**

| Declared interest or received hospitality | Please state |
|---|--|
| Share holdings or other interests in pharmaceutical companies or other private or public companies that may have real or potential conflicts of interest with the work programme of the Group | Tees Health Solutions (LPC Director) Community Pharmacy Humber (Member Director) Worthy Locums (Director) Whitworth Chemists Ltd (Director) |
| Receipt of departmental, staffing or personal sponsorship from the pharmaceutical industry or other private/public companies that may have real or potential conflicts of interest with the work programme of the Group | None |
| Commercial gains to be had by any individual or organisation from the work programme of the Group | None |
| Directorships, including non-executive Directorships held in private companies or PLCs (with the exception of those of dormant companies) | Whitworth Chemists Ltd (Director) Worthy Locums Ltd (Director) Community Pharmacy Humber (Director) Tees Health Solutions (LPC Director) |
| Ownership, or part ownership, of private or public companies, businesses or consultancies held which could result in commercial gains from the work programme of the Group | None |
| Majority or controlling share holdings in organisations likely to benefit from the work of the Group | None |
| Position of authority in a charity or voluntary body in the field of health and social care that could result in potential gain from the work programme | None |

Name: Jay Badenhorst

Employing organisation: Whitworth Chemists Ltd

Date: 24/3/2018

Signed: 

Committee Annual Declaration of Interests

Name: Tamzin Burn Please Print

| | |
|---|----------|
| Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership | n/a |
| Remunerated employment or offices | Boots UK |
| Remunerated Consultancy(s) | N/A |
| Remunerated work performed under contract | Boots UK |
| 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 | N/A |

| | |
|--|---------|
| Remunerated contributions to professional and scientific publications | n/a |
| 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. | n/a |
| Other sources of income or pecuniary support relevant to my membership of CPNY | n/a |
| Membership of other pharmaceutical bodies | GPharmC |

Signature RBurn.

Date 8/6/18

Committee Annual Declaration of Interests

Name: TRACEY CHAMBERS Please Print

| | |
|---|--|
| Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership | COPMANTHORPE PHARMACY LTD. (MRS TRACEY LAWRENCE). |
| Remunerated employment or offices | COPMANTHORPE PHARMACY LTD. |
| Remunerated Consultancy(s) | / |
| Remunerated work performed under contract | N/A. |
| 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 | N/A |

| | |
|--|------|
| Remunerated contributions to professional and scientific publications | N/A |
| 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. | N/A. |
| Other sources of income or pecuniary support relevant to my membership of CPNY | N/A |
| Membership of other pharmaceutical bodies | |

Signature T. Chambers

Date 6/6/18

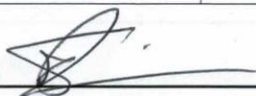
Committee Annual Declaration of Interests

Name: STAVIN DAVIES Please Print

| | |
|---|----------------------|
| Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership | |
| Remunerated employment or offices | Lloyds Pharmacy LTD |
| Remunerated Consultancy(s) | |
| Remunerated work performed under contract | Lloyds Pharmacy Ltd. |
| 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 | |

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| Remunerated contributions to professional and scientific publications | |
| 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. | |
| Other sources of income or pecuniary support relevant to my membership of CPNY | |
| Membership of other pharmaceutical bodies | |

Signature



Date

1/6/14

Committee Annual Declaration of Interests

Name: Ian Dean Please

| | |
|---|---|
| Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership | / |
| Remunerated employment or offices | Yorcave Ltd Stamford Bridge Pharmacy 25 The Square Stamford Bridge YO41H |
| Remunerated Consultancy(s) | / |
| Remunerated work performed under contract | / |
| 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 | / |

Remunerated contributions to professional and scientific publications

/

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.

/

Other sources of income or pecuniary support relevant to my membership of CPNY

/

Membership of other pharmaceutical bodies

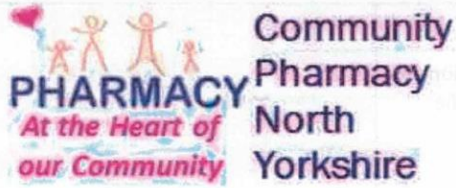
RPS

Signature



Date

12th July 2021



Committee Annual Declaration of Interests

Name: Tom Lattams Please Print

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|---|-----------------------------------|
| Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership | W14 |
| Remunerated employment or offices | W12 |
| Remunerated Consultancy(s) | W17 |
| Remunerated work performed under contract | W11 |
| 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 | Lincolnshire Co-operative CMTL |

PTO

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|--|--------|
| Remunerated contributions to professional and scientific publications | Nil |
| 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. | Nil |
| Other sources of income or pecuniary support relevant to my membership of CPNY | Nil |
| Membership of other pharmaceutical bodies | PPA 17 |

Signature E. W.

Date 6/6/18



Committee Annual Declaration of Interests

Name: RICHARD HARRISON Please Print

| | |
|---|---|
| Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership | HAXBY GROUP PHARMACY LIMITED FULFORD PHARMACY LIMITED XXXXXXXXXXXXXXXXXXXX |
| Remunerated employment or offices | / |
| Remunerated Consultancy(s) | / |
| Remunerated work performed under contract | / |
| 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 | HAXBY GROUP PHARMACY LIMITED FULFORD PHARMACY LIMITED |

PTO

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|--|---|
| Remunerated contributions to professional and scientific publications | / |
| 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. | / |
| Other sources of income or pecuniary support relevant to my membership of CPNY | / |
| Membership of other pharmaceutical bodies | / |

Signature 

Date 6/6/18



Community
Pharmacy
North
Yorkshire

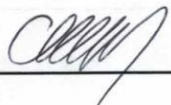
Committee Annual Declaration of Interests

Name: CHRIS KENDALL Please Print

| | |
|---|--------------|
| Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership | N/A |
| Remunerated employment or offices | Boots UK Ltd |
| Remunerated Consultancy(s) | N/A |
| Remunerated work performed under contract | Boots UK Ltd |
| 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 | N/A |

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|--|------|
| Remunerated contributions to professional and scientific publications | N/A |
| 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. | N/A |
| Other sources of income or pecuniary support relevant to my membership of CPNY | N/A |
| Membership of other pharmaceutical bodies | GPhC |

Signature 

Date 06/06/2018

Committee Annual Declaration of Interests

Name: Tommy Liny Please Print

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|---|----------------------|
| Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership | Chase N/A |
| Remunerated employment or offices | Day Lewis PLC |
| Remunerated Consultancy(s) | N/A |
| Remunerated work performed under contract | N/A |
| 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 | N/A |

| | |
|--|-----|
| Remunerated contributions to professional and scientific publications | N/A |
| 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. | N/A |
| Other sources of income or pecuniary support relevant to my membership of CPNY | N/A |
| Membership of other pharmaceutical bodies | N/A |

Signature Paul Smith

Date 6/6/2018



Committee Declaration of Interests

Name: JANE SIMPSON Please Print

| | |
|---|---|
| Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership | / |
| Remunerated employment or offices | WELL PHARMACY. |
| Remunerated Consultancy(s) | / |
| Remunerated work performed under contract | / |
| 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 | WELL PHARMACY WELL |

| | |
|--|--|
| Remunerated contributions to professional and scientific publications | |
| 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. | |
| Other sources of income or pecuniary support relevant to my membership of CPNY | |
| Membership of other pharmaceutical bodies | |

Signature JS

Date 6/6/18

Committee Annual Declaration of Interests

Name: CHARLES CHRISTIAN Please Print

| | |
|---|-----|
| Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership | N/A |
| Remunerated employment or offices | N/A |
| Remunerated Consultancy(s) | N/A |
| Remunerated work performed under contract | N/A |
| 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 | N/A |

| | |
|--|-------|
| Remunerated contributions to professional and scientific publications | N/A |
| 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. | N/A |
| Other sources of income or pecuniary support relevant to my membership of CPNY | N/A |
| Membership of other pharmaceutical bodies | Gphc. |

Signature 

Date 6/8/18