**CODE OF CONDUCT – DECLARATION OF INTERESTS**

**Name:** Graziele Amado

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| --- | --- | --- |
| 1. | Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership | **N/A** |
| 2. | Remunerated employment or offices | **Rowlands Pharmacy** |
| 3. | Remunerated Consultancy(s) | **N/A** |
| 4. | Remunerated work performed under contract | **N/A** |
| 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 shareholdings greater than the10% of the share capital | **N/A** |
| 6. | Remunerated contributions to professional and scientific publications | **N/A** |
| 7. | Other sources of income or pecuniary support relevant to my membership of the LPC | **N/A** |
| 8. | Membership of other pharmaceutical bodies | **GPhC Pharmacy Technician Registration** |

Signed:  Date: 28/06/2023