



DECLARED CONFLICT OF INTEREST REGISTER

I HEREBY CERTIFY I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO DECLARE THE NATURE OF ALL BUSINESS OR PERSONAL INTERESTS, WHETHER DIRECT OR INDIRECT, OF MYSELF, MY PARTNER AND/OR MEMBERS OF MY IMMEDIATE FAMILY THAT COULD UNFAIRLY BENEFIT FROM MY RELATIONSHIP AND CONNECTION WITH THE TRUST.

I UNDERSTAND THAT IT IS A CRIMINAL OFFENCE TO

- WITHHOLD INFORMATION RELATING TO CONFLICTS OF INTEREST
- PROVIDE FALSIFIED INFORMATION
- FAIL TO NOTIFY THE BOARD OF DIRECTORS OF ANY CHANGES WHICH MIGHT INVALIDATE THIS DECLARATION.

I AGREE TO INFORM THE BOARD OF DIRECTORS OF ANY CHANGES TO AFOREMENTIONED INTERESTS, OR NEW CONFLICTS OF INTEREST, AT THE EARLIEST OPPORTUNITY.

✓ I CONFIRM I DO NOT HAVE ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST TO DECLARE: ✓

Name:

PAMELA THOMPSON

Role:

DIRECTOR

Signature:

P. Thompson.

Date:

15.9.23.



Details of the declared conflict of interest	Nature of business or organisation	Brief description of the conflict of interest declared	Is the declared conflict of interest an actual conflict or a potential conflict of interest?	Date of appointment or acquisition	Date of cessation of interest
NONE	N/A	N/A	N/A	N/A	N/A

Identified conflict of interest	Agreed process for managing the identified conflict of interest	Person completing on behalf of the Board of Directors		
		Name	Role	Date

NONE