

Hampshire & Isle of Wight LPC

SUPPORTING LOCAL COMMUNITY PHARMACY

DECLARATION OF INTERESTS

Name: MICHAEL McWHIRTER

1.	Directorship of company(s) (public or private) and businesses owned personally or in partnership	N/A
2.	Employment or Office	DAY LEWIS PIC
3.	Consultancy(s)	N/A
4.	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 share holdings greater than the 10% of the share capital)	N/A
6.	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	RPS PDA
9.	Names of companies or other bodies in which I have an interest and have not declared above but would be relevant to my membership of the LPC	N/A.

NB: Potential conflict of interest should be flagged to The Chair in confidence

Signed: _____

Date: 16/8/16

 22/4/18.