

**Community Pharmacy Staffordshire**  
**&**  
**Stoke-on-Trent LPC**

**Annual Declaration of Interest (Dol)**

To ensure that each member complies with the requirement of the Code of Declaration of Interest, the following actions are required.

**Register of interest**

The declarations should be completed annually at the April meeting or the next available after April if a meeting is not held in April. New members should complete the declaration at their first meeting and again at the April Meeting. Any changes should be added to the register as soon as possible – it is the responsibility of each member to update their Dol. In addition, at each meeting there will be an agenda item requesting the Dol statement for that agenda. This item will usually follow the apologies for absence.

Although it is the responsibility of each member to up-date their own Dol information, however, the Chief Operating Officer will be responsible for all operational aspects of the guideline.

Please complete each section as fully as possible. You are also advised to declare any interests which relate to your spouse and children. The register will be held by the Chief Officer to the committee. You should notify the chair of the committee in writing of any variations to the original entry as soon as possible. In all circumstances, the responsibility to notify such interest lies with each individual member.

**FULL NAME**

HEMLATA MORTARIA

**MAIN EMPLOYMENT** - Please give the name and address of your main employer.

GRAHAM'S PHARMACY

99 FORD GREEN RD

SMALLTHORNE, STOKE-ON-TRENT, ST

**SELF EMPLOYMENT** - Please give the name and address of any other employer work. If you work on a self-employment basis this should also be indicated.

N/A.

**DIRECTORSHIP** - Please give the name and address of any company of which you been, an Executive or Non-Executive Director in the last 5 years.

MEDICINES for LIFE LTD  
T/A GRAHAM'S PHARMACY  
99 FORD GREEN RD, SMALLTHORNE  
STOKE-ON-TRENT

**SIGNIFICANT FINANCIAL INTERESTS** - Please give the name and address of any organisation not shown in 3 (above) in which you have (or have had in the last 5 years) investment of any share capital. Interests which may cause conflict can include own major shareholder in a company associated with pharmaceuticals or marketing.

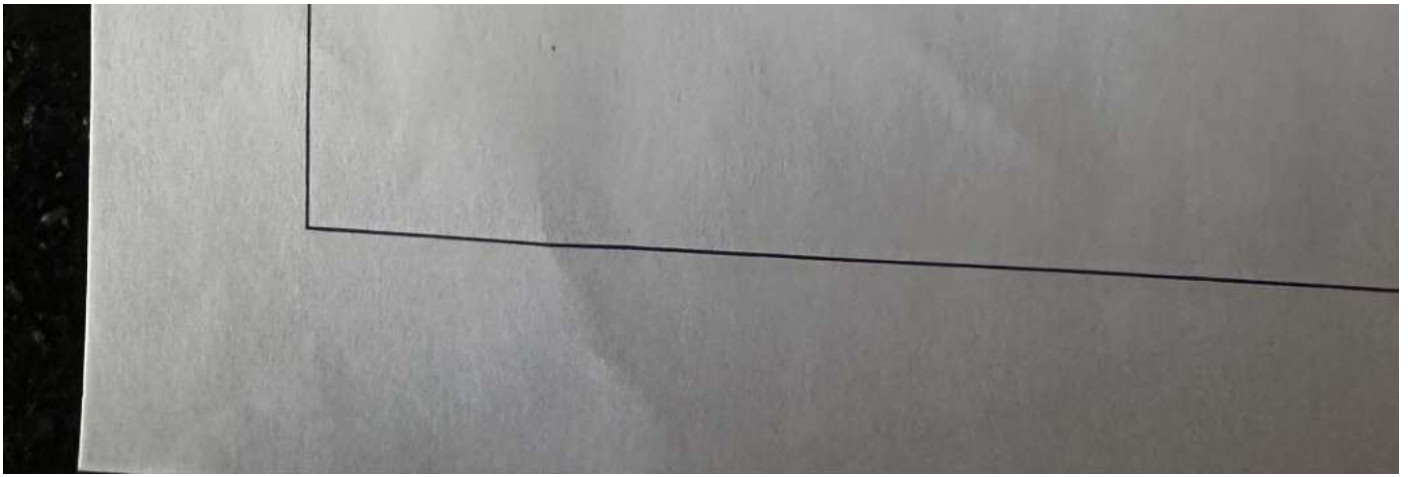
INFINITY LETS LTD

**MEMBERSHIP OF PUBLIC BODIES** - Please give the name of any local authority of which you are a member

N/A

**BENEFITS IN KIND RECEIVED FROM PHARMACEUTICAL COMPANIES IN THE LAST 5 YEARS** - exclude 1. Articles of low intrinsic value 2. Modest hospitality such as lunches in the course of work provided that they are not on a scale unlikely to be seen as an inducement

N/A



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