

**CODE OF CONDUCT – DECLARATION OF INTERESTS**

**DORSET LOCAL PHARMACEUTICAL COMMITTEE**

Name: \_\_\_\_\_ Gabriella Nagy \_\_\_\_\_

1.	Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership	na
2.	Remunerated employment or offices	Well pharmacies (Bestway Medhub)
3.	Remunerated Consultancy(s)	na
4.	Remunerated work performed under contract	na
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	na
6.	Remunerated contributions to professional and scientific publications	na
7.	Membership of other pharmaceutical bodies	na

I agree to update this document at any time there is a change in my interests

Signed: \_\_\_\_\_ *Gabriella Nagy* \_\_\_\_\_

Date: \_\_\_\_\_ 14/05/2026 \_\_\_\_\_