

## CODE OF CONDUCT – DECLARATION OF INTERESTS

**Name:** ABAYOMI OLUSANYA

1.	Remunerated Directorship of company(s) (public or private) and businesses owned personally or in partnership	Hamoni Healthcare Ltd Blessings UK Ltd
2.	Remunerated employment or offices	Hamoni Healthcare Ltd Prescriber with Mentis Clinic
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 share holdings greater than the 10% of the share capital	
6.	Remunerated contributions to professional and scientific publications	N/A
7.	Names of charities, not for profit and/or voluntary sector organisations in the field of health and social care or that contract for NHS services that I or my spouse have involvement with.	N/A
8.	Other sources of income or pecuniary support relevant to my membership of Community Pharmacy Humber	N/A
9.	Membership of other pharmaceutical bodies	National Pharmacy Association (NPA)

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