FORM - Register of Business & Other Interests for Directors and close family members



Name of Director _____ Simon Adams_____

Name of Organisation	Nature of Interest	Date from which involved	Paid or Unpaid	Notes
N/A				

Notes: Use the notes column to indicate:

- If the interest is for a close family member and their relationship to you.
- Any information you may feel relevant.

Sina felar. _____ Date ____28.2.24____

Signature ____