

### **Buckinghamshire Local Enterprise Partnership**

### **Register of Member's Interests**

As a Board Member of the Buckinghamshire Local Enterprise Partnership (BLEP), I declare that I have the following disclosable pecuniary and/or non-pecuniary interests. (Please state 'None' where appropriate, do not leave any boxes blank).

#### **NOTIFICATION OF CHANGE OF CIRCUMSTANCES**

Each Board Member shall review their individual register of interests before each board meeting and decision-making committee meeting, submitting any necessary revisions to the LEP and S151 Officer at the start of the meeting. Any recorded interests relevant to the meeting should also be declared at this point.

Even if a meeting has not taken place a Member must, within 28 clear working days of becoming aware of any change to the interests specified below, provide written notification to the LEP and S151 Officer, of that change.

\*SPOUSE/PARTNER – In the notice below spouse or partner means anyone who meets the definition in the Localism Act, i.e. "my spouse or civil partner, or a person with whom I am living as a spouse or a person with whom I am living as if we are civil partners, and I am aware that that person has the interest having carried out a reasonable level of investigation". Where your spouse or partner has recently been involved in any activity which would have been declarable, this should be mentioned, with the date the activity ended.

SECTION 1	ANY EMPLOYMENT, OFFICE, TRADE, PROFESSION OR VOCATION CARRIED ON FOR PROFIT OR GAIN	MYSELF - Clare Pelham	SPOUSE/ PARTNER
1.1	Name of:		
	o your employer(s)	Epilepsy Society	
	<ul> <li>any business carried on by you</li> <li>any other role in which you receive remuneration (this includes remunerated roles such as councillors).</li> </ul>		
1.2	Description of employment or	Life Sciences/Medical	
	business activity.	Research/Health & Social	
		Care	

1.3	The name of any firm in which you are a partner.	None	
1.4	The name of any company for which you are a remunerated director.	None	
SECTION 2	SPONSORSHIP	MYSELF	SPOUSE/ PARTNER
2.1	Any financial benefit obtained (other than from the LEP) which is paid as a result of carrying out duties as a Member.	None	
	This includes any payment or financial benefit from a Trade Union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992 (a).		
SECTION 3	CONTRACTS	MYSELF	SPOUSE/ PARTNER
3.1	Any contract for goods, works or services with the LEP which has not been fully discharged by any organisation named at 1.1.	None	
3.2	Any contract for goods, works or services entered into by any organisation named at 1.1 where either party is likely to have a commercial interest in the outcome of business being decided by the LEP.	None	
SECTION 4	LAND OR PROPERTY	MYSELF	SPOUSE/ PARTNER
4.1	Any interest you or any organisation listed at 1.1 may have in land or property which is likely to be affected by a decision made by the	My employer is located at the address below:  Epilepsy Society	
	LEP.	Chalfont Centre Chalfont St Peter	
	This would include, within the area of the LEP:	Bucks SL9 ORJ	
	<ul> <li>Any interest in any land in the LEP areas, including your place(s) of residency.</li> </ul>	My employer has made an application for planning permission in relation to their site at Chalfont St Peter that is	

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	Any tenancy where the landlord is thee LEP and the tenant is a body in which the relevant person has an interest.  O Any licence for a month or longer to occupy land owned by the LEP.	currently under consideration.	
	For property interests, please state the first part of the postcode and the Local Authority where the property resides. If you own/lease more than one property in a single postcode area, please state this.		
SECTION 5	SECURITIES	MYSELF	SPOUSE/PARTNER
			,
5.1	Any interest in securities of an organisation under 1.1 where:-  (a) that body (to my knowledge) has a place of business or land in the area of the LEP; and  (b) either:  (i) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body; or  (ii) if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which has an interest exceeds one hundredth of the total issued share capital of that class.		
SECTION 6	GIFTS AND HOSPITALITY	MYSELF	SPOUSE/PARTNER
6.1	Any gifts and/or hospitality received as a result of membership of the LEP (above the value of £50).	None	

# $\underline{\textbf{OTHER INTERESTS}} \textbf{ - Membership of Organisations}$

I am a	member of, or I am in a position of general control, a trustee of, or participate in the management of:
1.	Any body to which I have been appointed or nominated by the LEP:
Ayle	esbury Vale Enterprise Zone Board
2.	Any body exercising functions of a public nature (eg school governing body or another LEP):
Gove	tor of Ofqual (from 1 July 2022) rnor of Birmingham City University (from 1 July 2022) ber of MHRA Expert Working Group on Sodium Valproate
3.	Any body directed to charitable purposes:
	Chief Executive of a charity, the Epilepsy Society, whose purposes include raising awareness of osy and campaigning on behalf of people with epilepsy.
4.	Any body, one of whose principal purposes includes the influence of public opinion or policy (including any political party or trade union):
Pleas	e see Question 3.
5.	Any local authority (please state any interests you hold as LA leaders/cabinet members for LA land, resources and the LA's commercial interests):
None	
6.	Any other interest which I hold which might reasonably be likely to be perceived as affecting my conduct or influencing my actions in relation to my role.
None	

### **MEMBER'S DECLARATION AND SIGNATURE**

I confirm that having carried out reasonable investigation, the information given above is a true and accurate record of my relevant interests, given in good faith and to the best of my knowledge;

Date	19.02.24
Name (Capitals – in full)	CLARE ELIZABETH PELHAM
Signature	

## **RECEIPT BY LEP**

Date received by the LEP	
Signature of LEP Chief Executive	

### **RECEIPT BY S151/S73 OFFICER**

Date received by the S151/S73 Officer	
Signature of S151 Officer	