## Declaration of Interests relating to the management of Lincolnshire Pension Fund administered by Lincolnshire County Council

I,	[insert full name], am:
Tick	as appropriate
<ul> <li>an officer involved in the management</li> <li>Pension Board Member</li> <li>Pensions Committee Member</li> </ul>	
	elow under the appropriate headings my interests, shire Pension Fund Conflicts of Interest Policy. I sts under any heading.
Responsibilities or other interests that cou continue overleaf if necessary):	uld result in a conflict of interest (please list and
A) Relating to me	
B) Relating to family members or close collect	agues

## **Declaration of Other Appointments:**

Declaration of Other Appointments.
In addition to the declaration overleaf, I list below any appointments that I hold that may be considered as potentially related:
<b>Undertaking:</b> I declare that I understand my responsibilities under the Lincolnshire Pension Fund Conflicts of Interest Policy. I undertake to notify the Pensions Fund Manager of any changes in the information set out above.
SignedDate
Name (CAPITAL LETTERS)