Pension Fund Conflict of Interest Form



I, Cllr Helen Butler am:	(Tick as Appropriate)
a senior officer involved in the management	
Pension Committee Member	
Investment Subcommittee Member	
Local Pension Board Member	~
of Leicestershire Pension Fund and I set out below my interests, which I am required to declare unde Conflict of Interest Policy. I have put 'none' wher any heading.	r Leicestershire Pension Fund
Responsibilities or other interests that could result and continue overleaf if necessary):	t in a conflict of interest (please lis
A) Relating to me	
None	
B) Relating to your spouse's or civil partne	er

None

C) Disclosure of Gifts and Hospitality -You should reveal the name of any person from whom you have received a gift or hospitality with an estimated value of at least £50 which you have received within the last 12 months.

Date of receipt of	Name of Donor	Reason and Nature of
Gift/Hospitality		Gift/Hospitality

Undertaking

I declare that I understand my responsibilities under the Leicestershire Pension Fund Conflict of Interest Policy. I undertake to notify the Monitoring Officer of any changes in the information set out above.

Signed: Helen Butler Date: 25/11/2025

Name (CAPITAL LETTERS): HELEN BUTLER