



## Assessment of the interests declared by the members of the Management Board pursuant to Article 37(1) of the Regulation (EC) No 178/2002 of the European Parliament and of the Council

The present note provides an assessment on whether the interests declared by Board members represent a potential conflict in accordance with EFSA's internal rules and the Board Code of Conduct. Based on this assessment, the Board should reach a conclusion and where appropriate recommend a follow-up.

If an identified conflict that is substantially affecting the work of the Board or EFSA's reputation is not resolved by the proposed assessment and a member of the Board is not fulfilling his/her obligations in relation to independence in such a manner that this is substantially affecting the work of the Board, the Board, acting on a two-thirds majority, may ask for his or her replacement<sup>1</sup>.

### Ana BATALHA – Management Board member representing Portugal

**DoI submission date:** 10 May 2024

**Assessment:** Between Dec. 2023 and May 2024, Dr Batalha provided technical assistance in the preparation of a grant proposal related to the Food System Control Assessment Tool in Cabo Verde (FAO-WHO tool). The activity carried out by Dr Batalha implied the performance of neither risk assessment, nor risk management functions in areas pertaining to the remit of EFSA and does not represent a conflict of interest. Dr Batalha confirmed the interests declared with her previous DoI dated 19 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Dr Batalha to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

### Carl BERTHOT – Management Board alternate member representing Belgium

**DoI submission date:** 14 May 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Mr Berthot confirmed the interests declared with his previous DoI dated 9 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

<sup>1</sup> Article 17 of the Rules of Procedure of the Management Board.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Mr Berthot to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Tejs BINDERUP – Management Board member representing Denmark**

**DoI submission date:** 31 May 2024

**Assessment:** Since July 2023, Mr Binderup is a member of the Advisory Committee of the Technical University of Denmark (DTU). As well, since March 2023, he is a member of the Advisory Board of the DTU National Food Institute. The Technical University of Denmark is a public institution pursuing the public interest, which is included in EFSA's list of organisations in application of Article 36 of the EU General Food Law. The position held by Mr Binderup in DTU's Advisory Committee and DTU's National Food Institute does not represent a conflict of interest.

Mr Binderup confirmed the interests declared with his previous DoI dated 15 June 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Mr Binderup to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Ingrid BORG – Management Board member representing Malta**

**DoI submission date:** 17 May 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Ms Borg confirmed the interests declared with her previous DoI dated 18 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Ms Borg to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Beáta CZEGLÉDI – Management Board alternate member representing Hungary**

**DoI submission date:** 15 May 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Dr Czeglédi confirmed the interests declared with her previous DoI dated 16 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Dr Czeglédi to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).



**Floriana CIMMARUSTI – Management Board member representing the Consumer Organisations****DoI submission date:** 18 April 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Ms Cimmarusti confirmed the interests declared with her previous DoI dated 12 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Ms Cimmarusti to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Maira DZELZKALĒJA-BURMISTRE – Management Board alternate member representing the Farmers Organisations****DoI submission date:** 10 May 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Ms Dzelzkalēja-Burmistre confirmed the interests declared with her previous DoI dated 27 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Ms Dzelzkalēja-Burmistre to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Jernej DROFENIK – Management Board member representing Slovenia****DoI submission date:** 16 May 2024

**Assessment:** Since March 2022, Dr Drofenik holds the position of Head of the Plant Protection Products Unit at the Ministry of Agriculture, Food and Forestry Administration for Food Safety. His job entails the performance of risk management activities in areas pertaining to the remit of EFSA, which he carries out in the public interest. In view of the mandate of the Management Board, that primarily looks at the regularity and legality of EFSA's processes without entering into the merit of any scientific activity carried out by the other bodies of EFSA, the risk management activities carried out by Dr Drofenik do not represent conflicts of interest.

Dr Drofenik confirmed the interests declared with his previous DoI dated 26 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Dr Drofenik to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Loïc EVAÏN – Management Board alternate member representing France****DoI submission date:** 16 May 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Dr Evain confirmed the

interests declared with his previous DoI dated 15 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Dr Evain to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Jindřich FIALKA – Management Board member representing the Czech Republic**

**DoI submission date:** 16 April 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Mr Fialka confirmed the interests declared with his previous DoI dated 9 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Mr Fialka to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Patrick HAU – Management Board member representing Luxembourg**

**DoI submission date:** 5 April 2024

**Assessment:** Since February 2024, Mr Hau holds the position of Member of the Board of Directors of the Luxembourgish Health National Laboratory, a public institution pursuing the public interest, which is included in EFSA's list of organisations in application of Article 36 of the EU General Food Law. The position held by Mr Hau in the Health National Laboratory's Board of Directors does not represent a conflict of interest.

Mr Hau confirmed the interests declared with his previous DoI dated 6 Nov. 2023, which the Management Board noted and cleared at the meeting held on 14 Dec. 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Mr Hau to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Herodotos HERODOTOU – Management Board alternate member representing Cyprus**

**DoI submission date:** 7 May 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Mr Herodotou confirmed the interests declared with his previous DoI dated 1 June 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Mr Herodotou to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Sebastian HIELM – Management Board alternate member representing Finland****DoI submission date:** 16 April 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Mr Hielm confirmed the interests declared with his previous DoI dated 10 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Mr Hielm to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Deividas KLIUČINSKAS – Management Board alternate member representing Lithuania****DoI submission date:** 7 May 2024

**Assessment:** Since February 2024, Mr Kliučinskas holds the position of Director of Food and Veterinary Policy Department at the State Food and Veterinary Service of Lithuania (VMVT). VMVT is a public institution pursuing the public interest, which is included in EFSA's list of organisations in application of Article 36 of the EU General Food Law. The position held by Mr Kliučinskas in VMVT does not represent a conflict of interest. Mr Kliučinskas confirmed the interests declared with his previous DoI dated 30 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Mr Kliučinskas to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Lidija KOZAČINSKI – Management Board alternate member representing Croatia****DoI submission date:** 17 May 2024

**Assessment:** Prof. Kozadžinski updated the DoI declaring her retirement as of March 2024. Prof. Kozadžinski confirmed the interests declared with her previous DoI dated 23 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Prof. Kozadžinski to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Hendrik KUUSK – Management Board member representing Estonia****DoI submission date:** 7 May 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Dr Kuusk confirmed the

interests declared with his previous DoI dated 17 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Dr Kuusk to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Dimitrios LADIKOS – Management Board alternate member representing the industry organisations**

**DoI submission date:** 17 May 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Dr Ladikos confirmed the interests declared with his previous DoI dated 17 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Dr Ladikos to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Karoline Lumholdt MATHISEN – Management Board alternate member representing the EFTA Surveillance Authority**

**DoI submission date:** 30 May 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Ms Mathisen confirmed the interests declared with her previous DoI dated 1 June 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Ms Mathisen to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Sanja MUSIĆ MILANOVIĆ – Management Board member appointed by the European Parliament**

**DoI submission date:** 24 April 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Prof. Musić Milanović confirmed the interests declared with her previous DoI dated 12 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Prof. Musić Milanović to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**George-John NICHAS – Management Board alternate member representing Greece****DoI submission date:** 15 May 2024

**Assessment:** Since January 2024, Prof. Nichas holds the position of Distinguished Professor at the Shandong Agricultural University - SDAU (China). SDAU is a public institution pursuing higher education purposes, where Prof. Nichas carries out academic activities. The position held by Prof. Nichas in the SDAU does not represent a conflict of interest. In addition, since January 2024, Prof. Nichas is engaged in the coordination of the research project "FoodGuard" funded by the EU Innovation Action programme. The research activity carried out by Prof. Nichas does not represent a conflict of interest. Prof. Nichas confirmed the interests declared with his previous DoI dated 26 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Prof. Nichas to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Henrik NIELSEN – Management Board alternate member representing Denmark****DoI submission date:** 15 April 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Mr Nielsen confirmed the interests declared with his previous DoI dated 10 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Mr Nielsen to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Szabolcs PÁSZTOR – Management Board member representing Hungary****DoI submission date:** 2 May 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Mr Pásztor confirmed the interests declared with his previous DoI dated 15 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Mr Pásztor to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Isabel PEÑA-REY – Management Board member representing Spain****DoI submission date:** 3 May 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Dr Peña-Rey confirmed

the interests declared with her previous DoI dated 18 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Dr Peña-Rey to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Josefine SINKOVITS – Management Board alternate member representing Austria**

**DoI submission date:** 7 May 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Ms Sinkovits confirmed the interests declared with her previous DoI dated 11 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Ms Sinkovits to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Annica SOHLSTRÖM – Management Board member representing Sweden**

**DoI submission date:** 19 April 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Dr Sohlström confirmed the interests declared with her previous DoI dated 15 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Dr Sohlström to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Darja SOKOLIĆ – Management Board member representing Croatia**

**DoI submission date:** 22 April 2024

**Assessment:** Since May 2023, Dr. Sokolić holds the position of national convenor at the United Nations Food System, an international public body hosted by the Food and Agriculture Organisation of the United Nations pursuing objectives of international public interest. The position held by Dr. Sokolić in the framework of the United Nations Food System does not represent a conflict of interest. In addition, Dr. Sokolić confirmed the interests declared with her previous DoI dated 12 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Dr. Sokolić to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).



**Pille TAMMEMÄGI – Management Board alternate member representing Estonia****DoI submission date:** 6 May 2024**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Ms Tammemägi confirmed the interests declared with her previous DoI dated 19 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Ms Tammemägi to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).**Marie-Luise TREBES – Management Board member representing Germany****DoI submission date:** 14 May 2024**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Ms Trebes confirmed the interests declared with her previous DoI dated 17 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Ms Trebes to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).**Rudie VELLA – Management Board alternate member representing Malta****DoI submission date:** 7 May 2024**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Ing. Vella confirmed the interests declared with his previous DoI dated 8 June 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Ing. Vella to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).**Ana Isabel VILORIA ALEBESQUE – Management Board member representing The Netherlands****DoI submission date:** 17 May 2024**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Ms Viloría Alebesque confirmed the interests declared with her previous DoI dated 18 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Ms Viloría Alebesque to assess whether any conflicts may arise when

discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Marc WEYLAND – Management Board alternate member representing Luxembourg**

**DoI submission date:** 16 April 2024

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Mr Weyland confirmed the interests declared with his previous DoI dated 12 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Mr Weyland to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Stelios YIANNOPOULOS – Management Board member representing Cyprus**

**DoI submission date:** 6 May 2024

**Assessment:** Since February 2024, Dr Yiannopoulos holds the position of Head/Coordinator for the establishment of the Cyprus Food Safety Authority. The activity carried out by Dr Yiannopoulos in favour of the Cyprus Ministry of Health, a public institution pursuing the public interest, does not represent a conflict of interest. Dr Yiannopoulos confirmed the interests declared with his previous DoI dated 19 May 2023, which the Management Board noted and cleared at the meeting held on 22 June 2023.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Dr Yiannopoulos to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

Annexes:

DoI of Ana BATALHA dated 10 May 2024

DoI of Carl BERTHOT dated 14 May 2024

DoI of Tejs BINDERUP dated 31 May 2024

DoI of Ingrid BORG dated 17 May 2024

DoI of Floriana CIMMARUSTI dated 18 April 2024

DoI of Beáta CZEGLÉDI dated 15 May 2024

DoI of Maira DZELZKALĚJA-BURMISTRE dated 10 May 2024

DoI of Jernej DROFENIK dated 16 May 2024

DoI of Loïc EVAÏN dated 16 May 2024

DoI of Jindřich FIALKA dated 16 April 2024

DoI of Patrick HAU dated 5 April 2024

DoI of Herodotos HERODOTOU dated 7 May 2024

DoI of Sebastian HIELM dated 16 April 2024



DoI of Deividas KLIUČINSKAS dated 7 May 2024  
DoI of Lidija KOZAČINSKI dated 17 May 2024  
DoI of Hendrik KUUSK dated 7 May 2024  
DoI of Dimitrios LADIKOS dated 17 May 2024  
DoI of Karoline MATHISEN dated 30 May 2024  
DoI of Sanja MUSIĆ MILANOVIĆ dated 24 April 2024  
DoI of George-John NICHAS dated 16 May 2024  
DoI of Henrik NIELSEN dated 15 April 2024  
DoI of Szabolcs PÁSZTOR dated 2 May 2024  
DoI of Isabel PEÑA-REY dated 3 May 2024  
DoI of Josefine SINKOVITS dated 7 May 2024  
DoI of Annica SOHLSTRÖM dated 19 April 2024  
DoI of Darja SOKOLIĆ dated 22 April 2024  
DoI of Marie-Luise TREBES dated 14 May 2024  
DoI of Pille TAMMEMÄGI dated 6 May 2024  
DoI of Rudie VELLA dated 7 May 2024  
DoI of Ana Isabel VILORIA ALEBESQUE dated 17 May 2024  
DoI of Marc WEYLAND dated 16 April 2024  
DoI of Stelios YIANNOPOULOS dated 6 May 2024



## ANNUAL DECLARATION OF INTERESTS (ADoI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Dr
<b>Name</b>	Ana
<b>Family name</b>	BATALHA
<b>Profession</b>	Senior Official (DVM, MsPH)
<b>EFSA involvement(s)</b>	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.**
- Please fill in all fields, as appropriate.**
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.**

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.
- 4.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	May 2018 – to date	Council of the EU ad hoc group food law Working Party on Foodstuffs	Portuguese delegate. Chair of the Council Working Party during the Portuguese Presidency of the EU (01.01 – 30.06.2021).	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	September 2019 – to date	Council Working Party on Public Health at Senior Level	Portuguese delegate (alternate)	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

	December 2020 – to date	Council Expert Working Group on Global Health	Portuguese member. Chair of the working group during the Portuguese Presidency of the EU (01.01 – 30.06.2021).	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2017-2021	Vétérinaires Sans Frontières - Portugal	Vice-President. The Direction is responsible for the strategy, action plan and reporting activities of the association and its representation under VSF International.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	August 2018 – August 2020	Vétérinaires Sans Frontières - International	Member of the Board. The board is responsible for implementing the strategy defined by the GA and supervising the work of the headquarters' office.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.



2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	Nov. 2016 – to date	Ministry of Foreign Affairs (Portugal) – Directorate General for EU Affairs	Senior officer – Inter-ministerial coordination in EU policy and legislation related to Health and Food Safety: Public Health, Global Health, medicines, One Health; Sanitary and Phytosanitary (SPS) issues, food safety, GMOs, animal and public health, pesticides (Working scope of DG SANTE) National delegate in several Council (of the EU) Working parties: Public Health at Senior level, Global Health and Food Safety legislation.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether

you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	February 2008 - to date	World Organisation for Animal Health (OIE/WOAH PVS Pathway)	Certified assessor: Evaluation of the Performance of Veterinary Services (PVS and Gap analysis tools) and, following the gap analysis, the preparation of programs strengthening the conformity of veterinary services with the OIE international quality standards.	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	September 2017 – to date	World Health Organisation (WHO) WHO-JEE One Health Strategic Plan	External evaluator: WHO – Joint external evaluations to assess country capacities to prevent, detect and rapid respond to public health risks in line with the International Health Regulation (IHR) Technical assistance in the development of a One Health National Strategic Plan	<input checked="" type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	December 2023 – May 2024	ERIS-STDF  WTO Project Grant proposal	Technical assistance to support the competent authority in the preparation of the project grant proposal on the basis of the Food System Control Assessment Tool evaluation in Cabo Verde (FAO-WHO tool).	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input checked="" type="checkbox"/> >5% but <25% <input type="checkbox"/> >25

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please

provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the EFSA Decision on Competing Interest Management implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 10/05/2024

Signature: *(either physical or electronic signature)* \_\_\_\_\_

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

**Note regarding the processing of personal data:**

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant Standard Operating Procedure.



Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

## ANNUAL DECLARATION OF INTERESTS (ADoI)

Title (Prof, Dr, Mr, Ms, Mrs)	Mr
Name	Carl
Family name	BERTHOT
Profession	General Advisor, Head of Service, Food, Feed and Other Consumer Products Service
EFSA involvement(s)	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate

to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.

- Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADol.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

- Please specify the relevant period of time each activity took place in month/year.
- Please indicate name, legal nature and location of the entity.
- Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
- Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADol.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	01/05/2010 – to date	Federal Public Service Public Health, Safety of the Food Chain and Environment	Take part in national and international meetings to discuss the creation or modification of national, European and international standards (Council of Europe, European Union, WHO-FAO (Codex Alimentarius), World Trade Organization). I am also the official representative of Belgium to the Codex Alimentarius (FAO-WHO) and a member of the delegation to the World Trade Organization.  Managing the department in terms of both personnel and budget, ensuring smooth running, respecting the deadlines for responding to the department's various stakeholders, ensuring the well-being of the staff, taking new initiatives and making new contacts, and being the point of contact with the cabinet and the Minister for the issues managed by the department.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether

you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

- Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

- Please specify the relevant period of time each activity took place in month/year.
- Please indicate name, legal nature and location of the organization.
- Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
- Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.



## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25%

					☐ >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 14/05/2024          Signature:

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

#### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

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The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Mr
Name	Tejs
Family name	Binderup
Profession	Deputy Director General
EFSA involvement(s)	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name and location of the organization on which the investment has been made.

3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate

to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADol.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	July 2023	Technical University of Denmark, Anker Enggelunds Vej 101, 2800 Kongens Lyngby <a href="https://www.dtu.dk/english/">https://www.dtu.dk/english/</a>	Member of Advisory Committee  Technical University of Denmark is an Article 36 Organisation designated by MS which may assist EFSA with its mission according to Regulation EC 178/2002 and EC 2230/2004  The committee discusses DTU's performance within education, research and innovation, and advise the university leadership in specific matters.  The committee does not have any say on the concrete research projects at DTU.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

March 2023	Technical University of Denmark, The National Food Institute Henrik Dams Allé Building 202 2800 Kongens Lyngby <a href="https://www.food.dtu.dk/english">https://www.food.dtu.dk/english</a>	Member of Advisory Committee  The advisory board of the DTU National Food Institute is responsible for advising the institute director on the Institute's activities within research, education, scientific advice, business collaboration and innovation.  The committee does not have any say on the concrete research projects at DTU.
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

**IV. EMPLOYMENT**

IV. Employment	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
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03/2023 – to date	Danish Veterinary and Food Administration	Management.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
				<input type="checkbox"/> YES <input type="checkbox"/> NO
			NO INTEREST	

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>

<b>VIII. Other membership or affiliation</b>	<b>Period <sup>1</sup> From/To (Month/Year)</b>	<b>Organisation <sup>2</sup></b>	<b>Subject matter <sup>3</sup></b>	<b>Impact on annual earnings <sup>4</sup></b>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

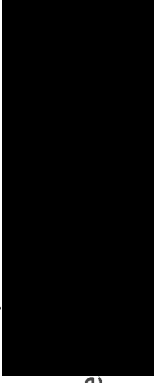
OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 31/5-2024

Signature



If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.



# ANNUAL DECLARATION OF INTERESTS (ADoI)

Title (Prof, Dr, Mr, Ms, Mrs)	Ms.
Name	Ingrid
Family name	Borg
Profession	Director Regulatory Affairs
EFSA involvement(s)	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	June 2018 – to date	European Chemicals Agency	Management Board member. ECHA deals with risk assessment of chemicals. As a MB member I follow issues related to the management of the Agency.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	July 2003 – June 2022	Food Safety Commission	To monitor, coordinate and keep under review all practices, operations and activities relating to food - including PPPs. This is a Government Body and	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

			established by law. I was a member and I represented the entity I work at (MCCAA).	
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADol.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	April 2005 – June 2022	European Food Safety Authority	Advisory Forum member. To address European risk assessment and risk communication issues with respect to food.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	November 2010 – June 2022	European Food Safety Authority	Food Consumption Data Expert Group member. EFSA scientific network related to food consumption patterns and data collection.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	March 2008 – June 2022	European Food Safety Authority	Focal Point member.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.



- Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
- Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADol.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	July 2015 – to date	Malta Competition and Consumer Affairs Authority	Director Regulatory Affairs. Established by Act 510. Competent Authority for food risk assessment, chemicals, PPPs and biocides. The Authority is Malta's contact point with EFSA.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

- Please specify the relevant period of time each activity took place in month/year.
- Please indicate name, legal nature and location of the organization.
- Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
- Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
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4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADol exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?

			NO INTEREST	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

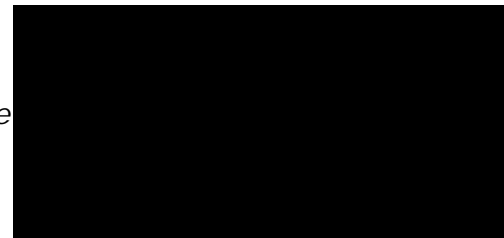
OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 17/05/2024

Signature: *(either physical or electronic signature)*



If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

Note regarding the processing of personal data:

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The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

## ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Ms
Name	Floriana
Family name	CIMMARUSTI
Profession	Secretary General, SAFE – Safe Food Advocacy Europe
EFSA involvement(s)	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned Individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy", or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
		November 2016 – to date	SAFE - Safe Food Advocacy Europe	Issues relating to the management of SAFE, Board member.

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity



- with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	November 2016 – to date	SAFE - Safe Food Advocacy Europe	Secretary General	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADaI.

			<input type="checkbox"/> >25%
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## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	
	June 2022 – May 2025	SAFE (partner)	No. 101060806, R3PACK, HORIZON-CL6- 2021-CIRCBIO-01-03	Does the funding received from the private sector during the two years preceding the submission of the ADaI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
	October 2021 – April 2026	SAFE (partner)	H2020-LC-GD-2020-Proposal number 101037796-SISTER	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

	October 2022 – August 2026	SAFE (partner)	No.101060607 CIRCALGAE, HORIZON-CL6- 2021-CIRCBIO-01-09	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	January 2022 – December 2025	SAFE (partner)	H2020-LC-GD-2020Grant no: 101036388 - ZeroW	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
				NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.



## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADdI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADOI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 18/04/2024      Signature: (either physical or electronic signature) \_\_\_\_\_ Floriana Cimmarusti

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.



### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DOIs) in accordance with Regulation (EU) 2018/1725. DOI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DOIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADOi at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DOI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADOIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADOIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADOIs per category of data subjects is 10 years from the date of submission of the relevant ADOi.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADOi processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Dr
Name	Beáta
Family name	HETÉNYINÉ CZEGLÉDI
Profession	Veterinarian
EFSA involvement(s)	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.



## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> > 0% but < 5% <input type="checkbox"/> > 5% but < 25% <input type="checkbox"/> > 25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity

with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.



## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	01/08/2016 – to date	National Food Chain Safety Office	<p>Full time.</p> <ul style="list-style-type: none"> <li>- Participation in the preparation, evaluation and review of the short-term/ medium-term institutional strategy of National Food Chain Safety Office, the Food Chain Safety Strategy and the other associated strategies, programs, plans;</li> <li>- Preparation of decision-making documents, monitoring of highlighted projects, organisation of consultation related to these projects;</li> <li>- Involvement in preparation of report and analysis of strategies;</li> <li>- Preparation of the sectorial legislation, guidance related to food safety;</li> <li>- Control of approved food producing establishment, in particular intending to export.</li> </ul>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for

past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	04/2022 – 06/2022	University of Veterinary Medicine	Giving lectures (Official food control: legal regulation, organisation, types and tasks / Official food control: basis of the risk-based official controls)	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	09/2022 – 01/2023	EU funded twinning project (Bosnia and Herzegovina)	Drafting of legal act on requirements and conditions to be met by small/local FBOs (flexibility rules as per EU Reg. 582/2004 and 853/2004)	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input checked="" type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
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3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
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3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_



I hereby declare that I have read the EFSA Decision on Competing Interest Management implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 15/05/2024

Signature: (either physical or electronic signature)

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

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Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

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Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.



## ANNUAL DECLARATION OF INTERESTS (ADoI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Ms
<b>Name</b>	Maira
<b>Family name</b>	DZELZKALEJA - BURMISTRE
<b>Profession</b>	Farmer
<b>EFSA involvement(s)</b>	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.**
- Please fill in all fields, as appropriate.**
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.**

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	September 2013 - 2017	COPA	Vice-President, Copa (the Committee of Professional Agricultural Organisations) COPA objectives – Represent European farmers in a combined effort with its members in order to promote the best interests of the sector among EU	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

			institutions and other relevant stakeholders.	
	15 March 2009 – to date	NGO Farmers Parliament, 961707318657-19	Vice-President. Farmers Parliament negotiates with the government and authorities about Agriculture Policy	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	29 January 2007 – to date	Agitis Ltd	Board member. Family-owned country tourism, restaurant and event venue.	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other

than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

#### IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	1 January 2020 – to date	NGO Farmers Parliament, 961707318657-19	Part-time. Strategic planning and management of everyday process in the organisation and office, work as expert in projects. Expertise and policy dialogues on agriculture, taxation, technologies, agro-environment in Latvia and EU.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	2 January 2018 – to date	Family farm Vilcini-1	Part-time. Consultant, responsible for investments and projects development.	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	3 March 2021 – 15 July 2021	European Commission Expert CT – EX2021D407392-101	Support the JRC in drafting the internal reflection paper that will inform the legislative framework on sustainable food system.	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_

the following reasons \_\_\_\_\_ and for

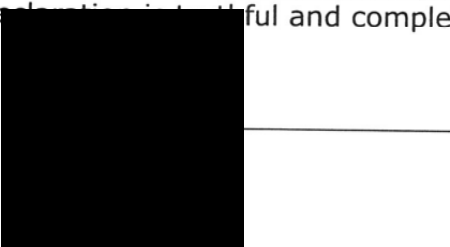
\_\_\_\_\_



I hereby declare that I have read the EFSA Decision on Competing Interest Management implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 10/05/2024

Signature:



If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant Standard Operating Procedure.

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

## ANNUAL DECLARATION OF INTERESTS (ADoI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Dr.
<b>Name</b>	Jernej
<b>Family name</b>	DROFENIK
<b>Profession</b>	Chemist
<b>EFSA involvement(s)</b>	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.**
- Please fill in all fields, as appropriate.**
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.**

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	November 2019 – to date	Agency of the Republic of Slovenia for Medicine and Medical Devices (ARSZMP),	Member of the Management Board	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

		Ljubljana, Slovenia		
	October 2019 – to date	Slovenian Institute of Hop Research and Brewing (IHPS), Žalec, Slovenia	Member of the Management Board	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity

carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

#### IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	July 2015 – March 2020	Ministry of Agriculture, Food and Forestry Administration for Food Safety. Veterinary and Plant Protection, Ljubljana, Slovenia	Deputy Director General	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	March 2020 – March 2021	Ministry of Agriculture, Food and Forestry Administration for Food Safety. Veterinary and Plant Protection, Ljubljana, Slovenia	Acting Director General	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	March 2021 – to date	Ministry of Agriculture, Food and Forestry Administration for Food Safety. Veterinary and	Deputy Director General	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

		Plant Protection, Ljubljana, Slovenia		
	March 2022 – to date	Ministry of Agriculture, Food and Forestry Administration for Food Safety. Veterinary and Plant Protection, Ljubljana, Slovenia	Head of the plant protection products unit	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### **VI. RESEARCH FUNDING**

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

### **VII. INTELLECTUAL PROPERTY RIGHTS**



VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks,

responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 16/05/2024

Signature: \_\_\_\_\_

**Pripombe dodal [A1]:** Please sign either electronically or with hand-writing

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

#### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Dr. Vet.
Name	Loïc
Family name	EVAÏN
Profession	Inspector general of veterinary public health / Ministry for Agriculture and Food Sovereignty Member of the CGAAER (High Council for food, agriculture and rural areas)
EFSA involvement(s)	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	05/2015 – 06/2021	General Directorate for food (French Ministry for Agriculture and Food)	Deputy Director-General, Chief Veterinary Officer (CVO), Delegate of France to the OIE. The General Directorate for food is competent in most of the remit of EFSA (food safety, animal health and welfare, plant health, GMOs, etc.)	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.



3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.



## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	21/06/2021 - to date	French Ministry of Agriculture and of the Food Sovereignty (CGAAER)	General Inspector of veterinary public health. Member of the section 7 (prospective, society, international) and section 3 (food, animal and plant health, public health).	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	05/2015 – 06/2021	General Directorate for food (French Ministry for Agriculture and Food)	Deputy Director-General, Chief Veterinary Officer (CVO), Delegate of France to the OIE. The General Directorate for food is competent in most of the remit of EFSA (food safety, animal health and welfare, plant health, GMOs, etc.)	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?



		NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

### VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: **16/05/2024** Signature: (either physical or electronic signature) \_\_\_\_\_ Loic Evain \_\_\_\_\_

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.



### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

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Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

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The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADOI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Mr
<b>Name</b>	Jindrich
<b>Family name</b>	FIALKA
<b>Profession</b>	Director General – Section of Food Production
<b>EFSA involvement(s)</b>	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.



## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	16/03/2020 - to date	Central Crisis Staff	Member of Central Crisis Staff.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2005 – to date	Codex Alimentarius	Head of National Codex Alimentarius Committee.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25%



				<input type="checkbox"/> > 25%
2005 – to date	Czech Board Quality	Chairman of Section on Quality of Foodstuffs and agri-products.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> > 0% but < 5% <input type="checkbox"/> > 5% but < 25% <input type="checkbox"/> > 25%	
2005 – to date	National Food Quality Evaluation	Chairman of National Food Quality Evaluation Commission.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> > 0% but < 5% <input type="checkbox"/> > 5% but < 25% <input type="checkbox"/> > 25%	
2005 – to date	National Food Safety Coordination Group	Chairman of National Food Safety Coordination Group.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> > 0% but < 5% <input type="checkbox"/> > 5% but < 25% <input type="checkbox"/> > 25%	

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADol.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

<b>III. Member of a scientific advisory entity</b>	<b>Period <sup>1</sup> From/To (Month/Year)</b>	<b>Organisation <sup>2</sup></b>	<b>Subject matter <sup>3</sup></b>	<b>Impact on annual earnings <sup>4</sup></b>
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NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	1/07/2000 – to date	Ministry of Agriculture of the Czech Republic	Director General – Section of Food production.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory

committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	2005 – to date	National Council for Sustainable Development	Member of National Council for Sustainable Development.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2005 – to date	World Food Summit 2021	National Convenor for World Food Summit 2021.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>



		NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	30/08/2019 – to date	Budweiser Budvar National Corporation	Member of the Supervisory Board.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input checked="" type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_



I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.



Date: 16/04/2024      Signature

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Mr.
Name	Patrick
Family name	Hau
Profession	Deputy Director
EFSA involvement(s)	Management Board - member

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

## I. FINANCIAL INVESTMENTS

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	02/2024-present	LNS – Laboratoire National de santé	Member of the Board of Directors	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	01/11/2022 – to date	ALVA – Administration Luxembourgeoise Vétérinaire et Alimentaire	ALVA Deputy Director. Tasks: - Management of the Department for food safety of ALVA - Support and replacement of the Director General in his tasks - Risk management decision under article 14 of the law of the 28 July 2018 <a href="https://www.legilux.public.lu/eli/etat/leg/loi/2018/07/28/a675/jo">https://www.legilux.public.lu/eli/etat/leg/loi/2018/07/28/a675/jo</a>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	01/03/2019 – 31/10/2022	ComAlim, Commissariat du gouvernement à la qualité, la fraude et la sécurité alimentaire, LUXEMBOURG, Strassen	Coordination of official control in Luxembourg Contact point for European commission and EFSA.  Official responsibility to carry out risk management: Yes, I can validate or take management action/decisions.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	01/04/2009 – 01/03/2019	Division de la sécurité alimentaire	Official food control and food safety head of service. Management of the control activities of the service.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

		Official responsibility to carry out risk management: yes, I can validate or take management action/decisions.
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.



4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	01/11/2022 – to date	Codex Alimentarius	National Contact Point in Luxembourg Codex Alimentarius	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	26/06/2018 – 12/10/2018	Council of the European Union	Participation as an expert in the refit of Regulation 178/2022 "Transparency Regulation".	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	01/01/2017 - to date	European Commission	Participation as a national expert in the Commission group "EU-crisis coordinators".	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	01/01/2012 – 01/03/2019	European Commission	Participation as a national expert in the Commission group "Natural mineral waters".	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

01/01/2000 – 01/11/2022	European Commission	Participation as a national expert in the Commission group "Rapid Alert System and Administrative Collaboration System".	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
01/01/2018 – 01/11/2022	European Commission	Participation as a national expert in the Commission group "Food Fraud Network".	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
01/01/2002 - to date	European Commission	Participation as a national expert in the Commission group "General Food Law (178/2002)".	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
01/04/2009 - to date	European Commission	Participation as a national expert in the Commission Standing Committee on the Food Chain (PAFF), section on Toxicology and Novel Foods.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
01/04/2009 - to date	European Commission	Participation as a national expert in the Commission Standing Committee on the Food Chain (PAFF), section on General Food Law.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
01/01/2017 - to date	Head of Food safety Agencies (HoA)	Member of the informal EU working on behalf of Luxembourg.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
01/01/2010 – 01/03/2019	Syndicat des eaux du barrage d'Eschsur-Sûre (SEBES)	Delegate to the Management Board on behalf of Ministry of health Luxembourg.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: \_\_\_05/04/2024\_\_\_\_\_

Signature:



Digitally signed  
by Patrick Hau  
Date: 2024.04.05  
17:30:25 +02'00'

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.



### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

## ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Mr
Name	Herodotos
Family name	HERODOTOU
Profession	Head of the Health Services of the Medical and Public Health Services of the Ministry of Health Cyprus
EFSA involvement(s)	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned Individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy", or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	1/03/2020 – to date	Health Services of the Medical and Public Health Services of the Ministry of Health	The Public Health Services of the Ministry of Health are responsible for controls on: food Hygiene, food of non-animal origin throughout the food chain, GMOs and pesticide residues in foodstuffs, imports of food of plant origin, and certain foods of animal origin (honey and ice-cream), and food contact materials. They also act	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%



			as the national contact point for the Rapid Alert System for Food and Feed information system 'IRASFF'. In that respect as the Head of the Department I participate in the internal decision-making process and carry out risk management activities.	
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADol.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADOt.

#### IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	1/03/2020 - to date	Health Services of the Medical and Public Health Services of the Ministry of Health	The Public Health Services of the Ministry of Health are responsible for controls on: food Hygiene, food of non-animal origin throughout the food chain, GMOs and pesticide residues in foodstuffs, imports of food of plant origin, and certain foods of animal origin (honey and ice-cream), and food contact materials. They also act as the national contact point for the Rapid Alert System for Food and Feed information system 'IRASFF'.  In that respect as the Head of the Department I participate in the internal decision-making process and carry out risk management activities.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADOt.



## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSAs remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADOL.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADOL exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?

			NO INTEREST	<input type="checkbox"/> YES	<input type="checkbox"/> NO
--	--	--	-------------	------------------------------	-----------------------------

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSAs' entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

### VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventions, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSAs' remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSAs and/or of the EFSAs relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.



**VIII. OTHER MEMBERSHIP OR AFFILIATION**

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned societies, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADaI.

**IX. OTHER RELEVANT INTEREST**

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADdI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

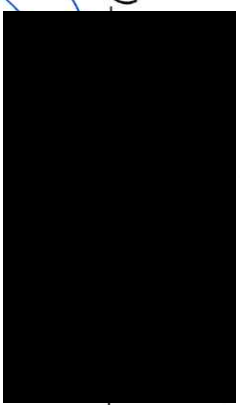
OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the EFSA Decision on Competing Interest Management implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 07/05/2024

Signature: (either physical or electronic signature)



If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

**Note regarding the processing of personal data:**

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant Standard Operating Procedure.

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.



## ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Dr.
Name	Sebastian
Family name	HIELM
Profession	Food safety director
EFSA involvement(s)	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.



## I. FINANCIAL INVESTMENTS

I. Financial Investments	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSAs remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy", or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSAs remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate

- to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	10/2017 – to date	National Nutrition Council	In 2017-2020, I chaired the National Nutrition Council (continuing as Vice-Chair 2020-2023), a horizontal body of 20 nutrition scientists and experts. The Council takes an active part in the formation of our notational nutrition policy, mainly by issuing dietary guidelines for the general population as well as for more specific groups.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.



## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	08/2016 – to date	Ministry of Agriculture and Forestry, Finland	I work full time as Food Safety Director, heading the Finnish Government's Food Safety Unit, with a staff of 16. I am responsible for elaborating national food and feed safety policies, through the elaboration of EU and national legislation. Duties also include steering of the Finnish Food Authority, which sees to the practical implementation of the food and feed safety legislation, including nutrition policies.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employing entity or provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.





## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
				NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADol exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?



		NO INTEREST	<input type="checkbox"/> YES	<input type="checkbox"/> NO
--	--	-------------	------------------------------	-----------------------------

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventions, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADO1.



## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADot.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	08/2016 – to date	Codex Alimentarius Commission	Chairman of the Finnish delegation to the Codex Alimentarius Commission. Chairmanship of the Finnish delegation to the Codex Alimentarius Committee on Food Hygiene.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



			Member elected on geographical basis in the Codex Executive Committee (since 2022).	
	08/2016 – to date	Nordic Council of Ministers	Head of the Finnish delegation on food issues (Äk-Livs) to the Nordic Council of Ministers.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADOI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the EFSA Decision on Competing Interest Management implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 16/04/2024      Signature: \_\_\_\_\_ (Sebastian Hielm)

# ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Mr
Name	Devidas
Family name	KLIUČINSKAS
Profession	Director of Food and Veterinary Policy Department at State Food and Veterinary Service of Lithuania
EFSA involvement(s)	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.



## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	15/02/2024 – to date	State Food and Veterinary Service of Lithuania (VMVT)	Director of Food and Veterinary Policy Department. Government.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate

to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.



## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	15/02/2024 – to date	State Food and Veterinary Service of Lithuania (VMVT)	Director of Food and Veterinary Policy Department. Government	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	01/08/2021 – 14/02/2024	State Food and Veterinary Service of Lithuania (VMVT)	Deputy Director. Government.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	01/11/2017 – 31/07/2021	Ministry of Agriculture of the Republic of Lithuania	Agriculture counsellor at the Embassy of Lithuania to Japan, Indonesia, Malaysia, Philippines, Singapore, New Zealand and Australia.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADaI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_



I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 07/05/2024      Signature: (either physical or electronic signature)

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

#### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Prof.
Name	Lidija
Family name	KOZAČINSKI
Profession	Former professor at the Faculty of Veterinary Medicine of the University of Zagreb
EFSA involvement(s)	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.



## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
				NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate

- to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADaI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	2014-2019	Croatian Food Agency	<p>Chair of the Scientific Committee for Biological Risks.</p> <p>The Panel on biological hazards deals with biological hazards in relation to food safety and food-borne diseases. The panel covers food-borne zoonoses, transmissible spongiform encephalopathies (BSE/TSE), food microbiology and food hygiene as well as other matching domains. The Panel also proposes, designs and evaluates scientific studies and evaluates scientific studies necessary for risk assessment and public health risks from food and feed as well as work on the preparation of scientific opinions related to biological hazards in food. Chair of the Committee coordinates the aforementioned activities.</p>	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



	2014-2019	Croatian Food Agency	<p>Member of the Scientific Council. The Scientific Council is responsible for the overall coordination required to ensure the consistency of the adopting procedure of scientific opinions, particularly regarding working procedures and harmonisation of methodology. It is also responsible for providing an opinion on interdisciplinary issues that are under the jurisdiction of various scientific bodies and on issues which do not belong to the competence of any scientific body. The Scientific Committee is comprised of Chairs of the Scientific Panels and four independent scientific experts who are not members of any of the Panels.</p>	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADO1.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
		2010 – October 2023	University of Zagreb (Croatia)	Professor at the Faculty of Veterinary Medicine of the University of Zagreb. Teaching and researching food hygiene and technology, food safety, veterinary public health.

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>



			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSAs remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
	2018-2019	University of Zagreb	Application of molecular pathogen detection in food safety control, University grant.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	2019-2020	University of Zagreb	Development of traditionally fermented hen meat sausage, University grant. The main goal of the research is to develop hen meat fermented sausages with functional	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

			properties, ie a healthier and more nutritionally acceptable product compared to standard red-meat fermented sausages. From a microbiological point of view, the composition of the natural microflora that would participate in the fermentation of hen's meat is unknown, as well as its influence on the sensory properties and undesirable microflora.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	2018 – February 2023	HRZZ Research projects (IP 2016-06-3685) – Croatian Science Foundation	Innovative functional lamb products. The goal of this project is to evaluate the influence of white button mushrooms feed supplementation on lambs meat quality which would then be suitable as a material for the production of functional products based on innovative solutions in technological procedures.	

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADOL.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

		NO INTEREST		<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
VIII. Other membership or affiliation	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	2017 – March 2024	Agency for Science and Higher Education	Member of the Patent Board for the field of biomedicine and health – Scientific Field Committee for Veterinary Sciences. Scientific field committees carry out a part of the procedure for scientific positions and make the final decision on the appointments. The appointment to scientific grade is the basis for the appointment to scientific-teaching grade. Mandate for members is four years.	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2017 – to date	Croatian Veterinary Chamber	Member of Croatian Veterinary Chamber.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

	2017 – to date	Croatian Dairy Association	Member of the Association (members exercise the right to all forms of scientific and professional training, receipt of the newsletters, access to the annual conference)	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2017 – to date	World Poultry Science Association	Member of the Association (receipt of the newsletter, access to the annual conference)	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2018 – to date	Croatian Microbiology Society (CMS)	<p>President of the section on food microbiology. Member of the Executive Board. The CMS brings together microbiologists and experts in related fields with the aim of improving all branches of microbiology. The Food Microbiology Section brings together food microbiologists in industry, public health institutes, veterinary institutes and stations. The mandate of the Section President is four years, but they can be elected for another term. The President convenes the meetings of the Section, coordinates the work of the members, and participates in the work of the Executive Board of the company. The Executive Board of CMS is the executive and administrative body.</p>	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2004 – to date	Croatian Academy of Medical Sciences (CAMS)	<p>Full member of CAMS (participate in the professional and scientific work of the Academy, member of the Collegium of Veterinary Medical Sciences). The Academy is a Scientific Association established for the purpose of promoting medical sciences and advancement of public health. The Collegium of Veterinary Medical Sciences manifests its work in connecting and exchanging scientific experiences with other branches of medicine, emphasising the need for multidisciplinary cooperation to improve the quality of animal</p>	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



			health, and thus human health and the environment.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	01/2004 – to date	Journal Meso: Prvi hrvatski časopis o mesu (Meat, Fish Croatian Journal on Meat)	Professional editor of the journal Meso	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2016 – to date	Microbiology Research Journal International	Member of editorial team (Academic Editors)	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2016 – to date	South Asian Journal of Research in Microbiology	Member of editorial team (Academic Editors)	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2022 – to date	Journal Mljekarstvo (Journal for dairy production and processing improvement)	Member of Advisory Board journal Mljekarstvo	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	03/2015 – to date	Croatian Accreditation Agency	Expert in the field of accreditation of testing laboratories and inspection bodies for the field of T 11 microbiological testing	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
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  4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.
- I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA


OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.



Date: \_\_\_\_\_ May 17 2024 \_\_\_\_\_

Signature: \_\_\_\_\_ 

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

**Note regarding the processing of personal data:**

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Concerned individuals have the right to access, rectify, erase and object to the processing of their ADOI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DOI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

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The legal basis for ADOI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADoI)

Title (Prof, Dr, Mr, Ms, Mrs)	Dr.
Name	Hendrik
Family name	KUUSK
Profession	Deputy Secretary General
EFSA involvement(s)	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.



## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.

3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.



## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	07.2023 – do date	Ministry of Regional Affairs and Agriculture Republic of Estonia	Deputy Secretary General for food Safety	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	05/2020 – 06/2023	Ministry of Rural Affairs - Republic of Estonia	Deputy Secretary General for Food Safety	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	09/2019 – 05/2020	Ministry of Rural Affairs - Republic of Estonia	Head of the Food Safety Department	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	01/2012 – 04/2019	National Food Agency of Georgia	Comprehensive Institutional Capacity Building Development Programme, with financial aid of European Commission for the development of Food Safety, Veterinary and Plant Protection fields in Georgia.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	01/2012 – 08/2019	Self employed	Food safety, veterinary organizational development, animal health	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?



		NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> > 0% but < 5% <input type="checkbox"/> > 5% but < 25% <input type="checkbox"/> > 25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	01/1992 – to date	Estonian Veterinary Association	Member of the Estonian Veterinary Association	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

### IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	05/2020 – to date	AS Vireen	Vireen Ltd (Animal Waste Management) Member of the Board	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



	05/2020 – 05/2023	Eesti Põllumajandusloomade Jõudluskontrolli AS	Estonian Livestock Performance Recording Ltd Chairman of the Board	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) and that the above declaration is truthful and complete.

Date: 07/05/2024

Signature: (either physical or electronic signature)

If you need more sheets to declare your interests, do not hesitate to use blank ones or attach them to this form.



### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

## ANNUAL DECLARATION OF INTERESTS (ADoI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Dr.
<b>Name</b>	Dimitrios
<b>Family name</b>	LADIKOS
<b>Profession</b>	Chemist, Plant Director and Member of the Board of YIOTIS S.A. Nourishing Products Industry
<b>EFSA involvement(s)</b>	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.**
- Please fill in all fields, as appropriate.**
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.**

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

### Ψηφιακή Βεβαίωση Εγγράφου



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## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	June 2008 – to date	YIOTIS S.A., 128-130 Kifissou Avenue, PC 12131, Athens, Greece	Plant Director supervising plant production operations, quality, purchasing and new product development, Member of the board  - Development of new products and new production lines & supervision of quality assurance	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

### Ψηφιακή Βεβαίωση Εγγράφου



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			<ul style="list-style-type: none"> <li>- Technical representation for the company</li> <li>- Supervision of chemical, microbiological, instrumental and product development laboratories,</li> <li>- Supervision of all company's investment plans and research projects.</li> <li>- Coordination of all actions concerning product development and market testing up to point of entry into the market</li> </ul> <p>Member of senior management staff, with authority to sign for the company</p>	
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	October 1990 – to date	FOODDRINKEUROPE	Delegate for Greek Federation Food Industries in C.I.A.A./Brussels	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

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	October 1990 – to date	Federation of Hellenic Food Industries (SEVT)	Member of SEVT’s Scientific Committee Safety, Regulatory, Quality, Nutritional & Environmental issues	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA’s remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

#### IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	June 2008 – to date	YIOTIS S.A., 128-130 Kifissou Avenue, PC 12131, Athens, Greece	Plant Director supervising plant production operations, quality, purchasing and new product development, Member of the board <ul style="list-style-type: none"> <li>• Development of new products and new production lines &amp; supervision of quality assurance</li> <li>• Technical representation for the company</li> </ul>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

#### Ψηφιακή Βεβαίωση Εγγράφου



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			<ul style="list-style-type: none"> <li>• Supervision of chemical, microbiological, instrumental and product development laboratories,</li> <li>• Supervision of all company's investment plans and research projects.</li> <li>• Coordination of all actions concerning product development and market testing up to point of entry into the market</li> <li>• Member of senior management staff, with authority to sign for the company</li> </ul>	
	April 2017 – to date	GRECOTASK Idiotiki Kefalaiochiki Etaireia	Owner of a Consulting firm for quality assurance systems and software development for YIOTIS S.A.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

### Ψηφιακή Βεβαίωση Εγγράφου



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V. Occasional consultancy	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO



1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

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## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	April 2012 – to date	Hellenic Technology Platform "Food for Life"	Chairman of the Leadership Team of the Hellenic Technology Platform "Food for Life" The main role is to bring together the main stakeholders of the food sector namely; food and related industries, academia and research community with the aim of working together to define the Hellenic research priorities in the food chain.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	February 2011 – to date	European Technology Platform "Food for Life"	Member of the Leadership Team of the European Technology Platform "Food for Life" The main priority is to promote an improved welfare and wellbeing in the EU through research and innovation in the food area, by ensuring integrity, independence and transparency among the different stakeholders.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

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## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_



I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 17/5/2024      Signature: *(either physical or electronic signature)* \_\_\_\_\_ Dr D LADIKOS \_\_\_\_\_

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

10

## Ψηφιακή Βεβαίωση Εγγράφου

Μπορείτε να ελέγξετε την ισχύ του εγγράφου  
σκανάροντας το QR code ή εισάγοντας τον κωδικό  
στο [docs.gov.gr/validate](https://docs.gov.gr/validate)



Κωδικός εγγράφου: GyX139JUegRC7ZWcRC6Wnw

: 10/10

Υπογραφή:  
ΔΗΜΗΤΡΙΟΣ ΛΑΔΙΚΟΣ  
Πατρώνυμο: ΓΕΩΡΓΙΟΣ  
ΑΦΜ: 021108126  
Ημ. Υπογραφής: 19/05/2024 13:03:18

# ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Ms
Name	Karoline Lumholdt
Family name	Mathisen
Profession	Legal officer, Internal Market Affairs Directorate, EFTA Surveillance Authority
EFSA involvement(s)	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.



## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
	2008 – To date	Various savings funds, Global	Combination of funds covering many sectors. No control as it is a combination of funds managed by a professional company with no possibility of deciding the funds' strategy.
	[spouse] 09/2022 – To date	Partnership, Kvale law firm, Oslo, Norway	Commercial law firm. Clients are small and large businesses, government authorities and organisations, including in food/food related sectors. Partner with 2.381% share in the firm.

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	10/2022 – To date	EFTA Surveillance Authority, Brussels, Belgium	Legal officer, full time. Monitoring of EFTA States (Iceland, Norway) compliance with EEA Agreement, in particular food safety, animal health, veterinary matters, etc.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	01/2017 – 10/2022	EFTA Secretariat, Brussels, Belgium	Legal officer, full time. Providing legal secretarial services to EEA EFTA States (Iceland, Liechtenstein, Norway) concerning EEA Agreement.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	[spouse] 09/2022 – To date	Kvale law firm, Oslo, Norway	Lawyer/partner, providing legal advice to clients, including business and industry organisations on food/food-related sectors.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?





### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.



2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the EFSA Decision on Competing Interest Management implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 30/05/2024

Signature: (either physical or electronic signature) \_\_\_\_\_

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

### Note regarding the processing of personal data:

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Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.



# ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Prof.
Name	Sanja
Family name	Musić Milanović
Profession	Professor Sanja Musić Milanović, MD, MPH, PhD, epidemiologist University of Zagreb, School of Medicine, School of Public Health dr. Andrija Štampar, Department for Medical Statistics, Epidemiology and Medical Informatics Croatian Institute of Public Health, Head of Health Promotion Division Head of Reference Center of the Ministry of Health for Health Promotion
EFSA involvement(s)	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy", or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
				NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate



- to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADdI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	12/2020 - to date	WHO/ Europe	Member of Regional Director's Advisory Council on Innovation for Non-communicable diseases	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADdI.

### IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>

	Since 2011	School of Public Health dr. Andrija Štampar, School of Medicine, University of Zagreb	Associate Professor at the Department of Medical Statistics, Epidemiology and Medical Informatics	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	Since 2004	Croatian Institute of Public Health	Head of the Health Promotion Division	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
		17/12/2021 (one time consultancy)	Novo Nordisk Hrvatska d.o.o.	Member of Novo Nordisk advisory board, consultant on prevention of obesity.

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.



3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSAs remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADOI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADOI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
	2015 - to date	WHO/Europe & Ministry of Health of the Republic of Croatia	Childhood Obesity Surveillance Initiative, Croatia	
2016 - 2023	European Social Fund & Ministry of Health of the Republic of Croatia	Healthy Living (funding of the National Health Promotion programme Health Living)	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSAs entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADOL.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	04/2014 - to date	WHO Europe	National Technical focal Point of WHO for Nutrition	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



	07/2014 - to date	WHO Europe	National Technical focal Point of WHO for Promoting Health throughout the life-course	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	10/2015 - to date	European Commission & WHO Europe	National Focal Point EU Physical Activity Focal Points Network, and the Expert Group "Health Enhancing Physical Activity"	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	09/2017 - to date	Croatian Academy of Arts and Sciences	Member of the Scientific Council for Anthropological Research	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	03/2022 - 03/2022	Ministry of Health of the Republic of Croatia	Head of the Working Group for the Creation of the Action Plan for Obesity Prevention	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
-----------------------------	--	---------------------------	-----------------------------	--

		NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
--	--	-------------	---

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

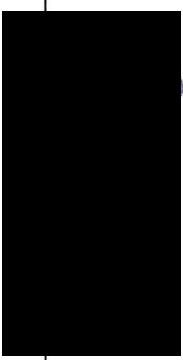
OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 24/04/2024

Signature: (either physical or electronic signature)





If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

**Note regarding the processing of personal data:**

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADOi at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADOIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADOIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADOIs per category of data subjects is 10 years from the date of submission of the relevant ADOi.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADOi processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADoI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Prof.
<b>Name</b>	George-John
<b>Family name</b>	NICHAS
<b>Profession</b>	Professor Emeritus
<b>EFSA involvement(s)</b>	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.**
- Please fill in all fields, as appropriate.**
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.**

---

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	11/2017 – 9/2019	Agricultural University of Athens	Dear of School of Biotechnology, Foods & Development; Administration of the school; representation of the School in the General Assembly of the University.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	09/2019 – 04/2020	Agricultural University of Athens	Dean of School of Food Science & Human Nutrition; Administration of the School; representation of the School in the General Assembly of the University.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

	04/2020 – to date	Hellenic Authority for Higher Education	Member of the Evaluation and Accreditation Council which mission is to ensure high quality in higher education. <a href="https://www.ethaae.gr/en/about-hahe/evaluation-and-certification-council">https://www.ethaae.gr/en/about-hahe/evaluation-and-certification-council</a>	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	03/2021 – to date	Hellenic Foundation for research & innovation	Member of Foundation’s scientific Council. <a href="https://www.elidek.gr/en/governing-bodies/scientific-council/">https://www.elidek.gr/en/governing-bodies/scientific-council/</a> The role of the council is <ul style="list-style-type: none"> <li>- Ensuring the success of Foundation objectives according to the national research and innovation policy.</li> <li>- Accepting donations and all kinds of funding.</li> <li>- Setting up evaluation committees and appeal committees in order to review proposals and select final beneficiaries.</li> <li>- Selecting the Director and Deputy Directors.</li> <li>- Approving the Foundation budget, upon Director Recommendation.</li> <li>- Proposing collaborations and partnerships with public and private sector organisations, both domestic and foreign, to the GA.</li> <li>- Proposing Internal Rule of Operation amendments to the Minister.</li> <li>- Approving the commission of Foundation services and offices in other cities within Greek Territory, upon Director Recommendation.</li> </ul>	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA’s remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.



4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	11/2015 – to date	European Technology Platform Food for Life	Chairman of a working group related to food safety. I do provide advices regarding future research topics in the field of food safety. The organisation does not deal with RA, I am not doing any validation, management and not take decisions or actions and do not serve as member of a regulatory committee advising on RM matters.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA’s remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	10/1994 – 31/08/2022	Agricultural University of Athens	Full Time Teaching, doing Research and being Research project director.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	01/09/2022 – to date	Agricultural University of Athens	Professor Emeritus at Agricultural University of Athens	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	01/01/2024 to date	ShangDong Agricultural University, China	Distinguished Professor	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	09/2022 – to date	Agritrack, Athens Greece	Information and Communication Technology, Internet of things, Machine learning, cloud computing. This consultancy is not related with risk analysis i.e., risk assessment, risk communication, risk management	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?

	2017 - 2019	EU, Commission, GA No. 732541	PhasmaFOOD; EU exclusively funding Project, dealing with sensors that can be used in food sector. PhasmaFOOD is an EU-funded H2020 <a href="https://phasmafood.eu/">https://phasmafood.eu/</a>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	2018-2021	EU, Commission, GA No. 774109	IMPAqT; EU exclusively funding Project, dealing with sensors that can be used in aquaculture as well as in the fish (as food) across the food chain; <a href="https://impaqtproject.eu/">https://impaqtproject.eu/</a>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	2018 – to date	EU, Commission, GA No. 774293	SWEET; EU exclusively funding Project; alternative to sugars - The 5 year multidisciplinary project engages stakeholders from across the food chain – consumers, patients, health professionals, scientists, policy makers, and regulators – to address the role of sweeteners in weight control, and potentially move viable products to market. Stakeholders, including consumers, patients, health professionals, scientists, policy makers, and regulators will engage in the project.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	11/2020 – to date	EU, Commission, GA No. 861915	DiTECT; EU exclusively funding Project, dealing with sensors that can be used across the food chain; Bringing together research, industrial and food authority partners representing the agro-food industry in the EU and China, DiTECT aspires to establish the	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO



			foundation for future food safety monitoring platforms, through the development of a standards-based, modular, Big Data-enabled platform, capable of accurately predicting food safety parameters of a given food product based on data collected in real-time via cost-efficient sensors, at crop, grain storage, livestock and finally in the food supply, incorporating blockchain processes.	
	06/2018 – 01/2022	EU – NATIONAL FUNDS	QAPP; QAPP is a three-year research project, aimed at creating scientific knowledge, understanding of processes and providing solutions to the challenges faced by the food industry in ensuring the quality and safety of products. The vision of the QAPP project is to develop an Intelligent Framework for Quality and Safety Management of poultry-based products, supported by an integrated Information and Communication Technologies (ICT) platform that incorporates methods, data and decision support tools for those active in this market.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	01/01/2024	EU	FoodGuard; EU Innovation Action Project, Coordination	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).

4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	04/2014 – to date	Hellenic (Greek) Agricultural Academy for agriculture, food & environment	Member of the National Academy of Agriculture	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	Since 2000	Editorial Board Journal of Food Protection	Editorial Board	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	Since 2005	Editorial Board Journal of Applied Microbiology	Editorial Board	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	Since 2005	Editorial Board Letters in Applied Microbiology	Editorial Board	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	Since 2012	Editorial Board Frontiers in Food Microbiology	Editorial Board	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	Since 2012	Editorial Board in Food Bioscience	Editorial Board	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

	Since 2012	Editorial Board in Frontiers in Microbial physiology and Metabolism	Editorial Board	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	Since 2013	Editorial Board in American Journal of Current Microbiology	Editorial Board	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	Since 2013	Editorial Board PLoS ONE	Editorial Board	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	Since 2016	Editorial Board International Journal of food Microbiology	Editorial Board	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	Since 2019	Editorial Board in food Microbiology	Editorial Board	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
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4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
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I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

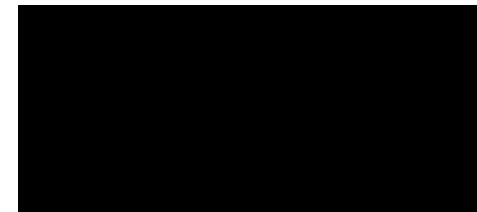
OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 16/05/2024

Signature: *(either physical or electronic signature)*



If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

#### Note regarding the processing of personal data:

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The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Mr
Name	Henrik
Family name	NIELSEN
Profession	Head of Division at the Danish Veterinary and Food Administration
EFSA involvement(s)	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered



- to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>

	08/2011 - to date	Danish Veterinary and Food Administration	Responsible for public administration within chemistry and quality including risk management based on EFSA-assessments.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADof.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
				<input type="checkbox"/> YES <input type="checkbox"/> NO
NO INTEREST				

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>

<b>VIII. Other membership or affiliation</b>		<b>NO INTEREST</b>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
--	--	--------------------	---

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			<b>NO INTEREST</b>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: XX/XX/2024      Signature: (either physical or electronic signature)

15/04/2024

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

#### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Mr
Name	Szabolcs
Family name	PASZTOR
Profession	Veterinarian
EFSA involvement(s)	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name and location of the organization on which the investment has been made.

3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	11/2022 – to date	Ministry of Agriculture	Chief Veterinary Officer. Managing the operative and strategic tasks falling within the remit of the Hungarian competent food chain safety authority, including overseeing the functioning of the National Food Chain Safety Office	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%



			(NFCSO), international trade relations and EU affairs.	
09/2018 – 11/2022	Ministry of Agriculture	Head of the Office of the Chief Veterinary Officer. Managing the operative and strategic tasks falling within the remit of the Chief Veterinary Officer, including overseeing the functioning of the National Food Chain Safety Office (NFCSO), international trade relations and EU affairs.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%	

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups. Peer review meetings, Networks, etc.). Please provide a

description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	11/2022 – to date	Ministry of Agriculture	Chief Veterinary Officer. Managing the operative and strategic tasks falling within the remit of the Hungarian competent food chain safety authority, including overseeing the functioning of the National Food Chain Safety Office (NFCSO), international trade relations and EU affairs.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	09/2018 – 11/2022	Ministry of Agriculture	Head of the Office of the Chief Veterinary Officer. Managing the operative and strategic tasks falling within the remit of the Chief Veterinary Officer, including overseeing the functioning of the National Food Chain Safety Office (NFCSO), international trade relations and EU affairs.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	08/2018 – 07/2021	Permanent Representation of Hungary, Brussels	Veterinary and Foodstuffs Attaché. Representing Hungary within the EU decision making procedure in the fields of animal health and food safety.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> > 5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> > 0% but < 5% <input type="checkbox"/> > 5% but < 25% <input type="checkbox"/> > 25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADofI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

 Pásztor Szabolcs

Digitalisan aláírta: Pásztor Szabolcs  
Dátum: 2024.05.02 16:04:10 +02'00'

Date: 02/05/2024      Signature: *(either physical or electronic signature)* \_\_\_\_\_

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

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The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADOI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Dr.
<b>Name</b>	Isabel
<b>Family name</b>	PEÑA-REY
<b>Profession</b>	Medical Doctor
<b>EFSA involvement(s)</b>	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.



## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
02/2021 - to date		Spanish Agency for Food Safety and Nutrition. AESAN OA.	The Spanish Agency for Food Safety and Nutrition is the competent organization and the national contact point for Europe in matters related to food safety and	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

		Ministry of Social Rights, Consumer Affairs and 2030 Agenda. Madrid. Spain	nutrition. AESAN is responsible for risk assessment, risk management and risk communication associated to the food chain and nutrition at national level. The Agency act as secretariat of an Independent Scientific Committee, which carries out food and nutrition risk assessment activities. As Executive Director my role is to coordinate all the activities carried out by the agency under the direction of the AESAN President.	
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> > 5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a

description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	02/2021 - to date	Spanish Agency for Food Safety and Nutrition. AESAN OA. Ministry of Social Rights, Consumer Affairs and 2030 Agenda. Madrid. Spain	The Spanish Agency for Food Safety and Nutrition is the competent organization and the national contact point for Europe in matters related to food safety and nutrition. AESAN is responsible for risk assessment, risk management and risk communication associated to the food chain and nutrition at national level. The Agency act as secretariat of an Independent Scientific Committee, which carries out food and nutrition risk assessment activities. As Executive Director my role is to coordinate all the activities carried out by the agency under the direction of the AESAN President.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	11/2020 – 02/2021	Technical advisor on Public Health directorate at the	I came back to my previous position at the Ministry of Health where I was working before, I was appointed as Seconded National Expert at DG SANTE,	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

		Minister of Health in Spain.	dealing with Health Strategies for the National Health System.	
	05/2018 – 11/2020	Health Authority, Galician Region.	Head of Unit of the screening program at regional level. The Population Screening Programs Service manages 5 types of screening at the central level: Breast Cancer Screening, Colorectal Cancer Screening, Cervical Cancer, Screening for Metabolic Diseases and Screening for congenital hearing loss. The central service coordinates the work between Primary Care, Hospital Care and the Territorial Health Delegations. The Galician Program is a member of the National Network Cancer Screening Programs, participating in the development of indicators based on European guidelines.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADofI.

## V. OCCASIONAL CONSULTANCY



V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
<p>1. Please specify the relevant period of time each activity took place in month/year.</p> <p>2. Please indicate name, legal nature and location of the organization.</p> <p>3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.</p> <p>4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.</p>				
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> > 0% but < 5% <input type="checkbox"/> > 5% but < 25% <input type="checkbox"/> > 25%

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?

		NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventions, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the

activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADofI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

PEÑA-REY  
LORENZO ISABEL - 34989972A  
Firmado digitalmente por  
PEÑA-REY LORENZO ISABEL -  
34989972A  
Fecha: 2024.05.03 15:32:41  
+02'00'

Date: 3/05/2024      Signature: (either physical or electronic signature) \_\_\_\_\_

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

**Note regarding the processing of personal data:**

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.



The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

## ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Ms
Name	Josephine
Family name	SINKOVITS
Profession	Federal office for Food Safety Vice Director Head of Department for Law, Authorisation, Certification and Communication
EFSA Involvement(s)	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial Investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSAs remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy", or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.

3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADot.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
NO INTEREST				<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADot.



## IV. EMPLOYMENT

IV- Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	01/2016 – to date	Federal Office for Food Safety	Vice Director – Head of Department for Law, Authorisation, Certification and Communication	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## V. OCCASIONAL CONSULTANCY

V- Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25%

				<input type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSAs remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

### VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADol exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSAs entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	2021-2026	Advisory Board for organic production (stashed at the	Member. Duties include: advising the Federal Minister of Health, issuing opinions on draft regulations, developing proposed guidelines.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

	Austrian Federal Ministry of Health)		
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

**IX. OTHER RELEVANT INTEREST**

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.



I confirm that:

I think I do not have a conflict of interest with respect to my activity(ies) at EFSA

OR

I think I have a conflict of interest with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the EFSA Decision on Competing Interest Management implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 07.05.2024 Signature: (either physical or electronic signature) \_\_\_\_\_

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

Note regarding the processing of personal data:

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The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant Standard Operating Procedure.

Kommentiert [BGL1]: Please insert date  
Kommentiert [BGL2]: Please sign

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

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The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Dr
Name	Annica
Family name	SOHLSTRÖM
Profession	Director General
EFSA involvement(s)	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
		December 2015 – to date	Swedish Food Agency	Director General
	January 2021 - to date	MISTRA Food Futures, research programme	Chair of the Board	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25%



1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADol.

			<input type="checkbox"/> >25%
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### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADol.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	December 2015 – to date	Swedish Food Agency	Director General	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADotI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

			<input type="checkbox"/> >25%
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## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADol exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventions, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5%



1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned societies, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADdI.

>5% but <25%  
 >25%

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADdI.

I confirm that:

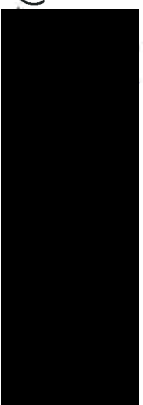
I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 19/04/2024      Signature: (either physical or electronic signature)



If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

**Note regarding the processing of personal data:**

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect

the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADOIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADOIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADOIs per category of data subjects is 10 years from the date of submission of the relevant ADOi.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADOi processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Dr.
Name	Darja
Family name	SOKOLIĆ
Profession	Executive Director – Croatian Agency for Agriculture and Food
EFSA involvement(s)	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.



## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	01/02/2021 to date	Croatian Agency for Agriculture and Food (HAPIH)	Executive Director.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate

to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

V. Employment	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	01/02/2021 - to date	Croatian Agency for Agriculture and Food (HAPIH)	Executive Director	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	01/01/2019 - 31/01/2021	Croatian Agency for Agriculture and Food (HAPIH)	Executive Director's advisor on Food Safety	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
				<input type="checkbox"/> YES <input type="checkbox"/> NO NO INTEREST



1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	01/06/2010 - to date	WHO International Food Safety Authorities Network (INFOSAN)	Focal Point Croatia	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	09/05/2023 -- to date	United Nations Food Systems	National Convenor	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
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		NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 22/04/2024

Signature: (either physical or electronic signature)



If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

### Note regarding the processing of personal data:

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The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

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The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.



## ANNUAL DECLARATION OF INTERESTS (ADoI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Ms
<b>Name</b>	Marie-Luise
<b>Family name</b>	TREBES
<b>Profession</b>	Chemist, food chemist.
<b>EFSA involvement(s)</b>	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	10/07/2018 - to date	Bundesministerium für Ernährung und Landwirtschaft / Federal Ministry of Food and Agriculture	Head of Division for Food Control and Crisis Management	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%



	07/04/2016 - to 09/06/2018	Bundesministerium für Ernährung und Landwirtschaft / Federal Ministry of Food and Agriculture	Head of Division for Special Foodstuffs, Food Supplements, Food Additives.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	10/07/2018 – to date	Bundesministerium für Ernährung und Landwirtschaft / Federal Ministry of Food and Agriculture	Head of Division for Food Control and Crisis Management.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	07/04/2016 – 09/07/2018	Bundesministerium für Ernährung und Landwirtschaft / Federal Ministry of Food and Agriculture	Head of Division for Special Foodstuffs, Food Supplements, Food Additives.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?

			NO INTEREST	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	15/03/2013 – to date	Wissenschaftliche Gesellschaft für Lebensmittelrecht (WGfL)	Organisation of conferences and studies about the development in German and European food law.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

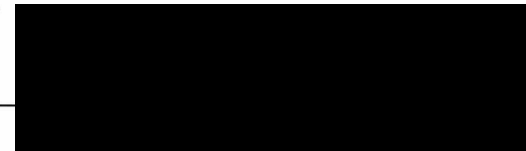
OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 14/05/2024

Signature: (either physical or electronic signature) \_\_\_\_\_



If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.



## Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

Certain ADOIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADOIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADOIs per category of data subjects is 10 years from the date of submission of the relevant AD0I.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for AD0I processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 06/05/2024                      Signature: (either physical or electronic signature) \_\_\_\_\_



If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADotI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADotI.



## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventions, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADotI.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO
				Does the funding received from the private sector during the two years preceding the submission of the ADOI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.



## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	01/07/2020 – to date	Ministry of Rural Affairs* – Estonia  *Due to the reorganization, the name of the ministry changed from January 1, 2024, to the Ministry of Regional Affairs and Agriculture	Head of the Food Safety Department. Food Safety Department is responsible for developing legislation related to animal breeding, animal health and welfare, feed and food hygiene, food additives and contaminants and labelling, food contact materials and articles, novel food and genetically modified organisms, and other food groups or participants in the development of this legislation in the European Union decision-making process. Additionally, we are responsible for the communication related to the international food standards programme Codex Alimentarius in Estonia and we coordinate cooperation with the European Food Safety Authority (EFSA), the European Commission, and the food competent authorities of the Member States of the European Union.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	11/01/2018 – 30/06/2020	Ministry of Rural Affairs - Estonia	Deputy Head of the Food Safety Department. Area of responsibility was related with veterinary issues as e.g. animal health, animal welfare.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%



3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADol.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups. Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADol.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSAs remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy", or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.

## ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Ms
Name	Pille
Family name	TAMMEMÄGI
Profession	Head of the Food Safety Department, Estonian Ministry of Regional Affairs and Agriculture
EFSA involvement(s)	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned Individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.



# ANNUAL DECLARATION OF INTERESTS (ADOI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Ing.
<b>Name</b>	Rudie
<b>Family name</b>	VELLA
<b>Profession</b>	Engineer
<b>EFSA involvement(s)</b>	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.



## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	December 2022 – to date	Malta Competition and Consumer Affairs Authority	Director General (Technical Regulations) heading the Technical Regulations Division (TRD) established under Part VI of the Malta Competition and Consumer Affairs Act (Cap. 510 of the Laws of Malta). The TRD is the competent authority for food risk assessment,	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

	January 2021 – December 2022	Malta Competition and Consumer Affairs Authority	<p>chemicals, PPPs and biocides. The Authority is Malta's contact point with EFSA.</p> <p>Director (Market Surveillance) responsible for the official control on pesticides in and on food and their residues, food quality schemes and other non-food product sectors.</p> <p>The Directorate I headed performed risk management activities to plan its surveillance and control activities, the corrective actions economic operators are required to take and measures imposed on them.</p> <p>I was empowered to validate and/or take management actions/decisions in respect to the above.</p> <p>I was not a member of a regulatory committee advising on risk management matters.</p>	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	May 2017 – January 2021	Malta Competition and Consumer Affairs Authority	<p>Senior Manager (Quality) responsible for the leadership of the quality management system of the Malta Competition and Consumer Affairs Authority (MCCAA) which has the Technical Regulations Division (TRD) as one of its entities. The latter is responsible for pesticides in and on food and their residues, food quality schemes, food risk management functions and other non-food product sectors.</p> <p>As a Senior Manager (Quality), I was responsible to manage organisational risks related to quality affairs of the MCCAA. Risk management activities</p>	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



<b>III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY</b>			performed by the entities, including the TRD, were not under my remit. My empowerment to validate and/or take management actions/decisions were only related to quality affairs. I was not a member of a regulatory committee advising on risk management matters.
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADofI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Advisory Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the

subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	December 2022 – to date	Malta Competition and Consumer Affairs Authority	Director General (Technical Regulations) heading the Technical Regulations Division (TRD) established under Part VI of the Malta Competition and Consumer Affairs Act (Cap. 510 of the Laws of Malta). The TRD is the competent authority for food risk assessment, chemicals, PPPs and biocides. The Authority is Malta's contact point with EFSA.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	January 2021 – December 2022	Malta Competition and Consumer Affairs Authority	Regular occupation, full-time, paid. Director (Market Surveillance) responsible for the official control on pesticides in and on food and their residues, food quality schemes and other non-food product sectors. The Directorate I headed performed risk management activities to plan its surveillance and control activities, the corrective actions economic operators are required to take and measures imposed on them.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



	May 2017 – January 2021	Malta Competition and Consumer Affairs Authority	<p>I was empowered to validate and/or take management actions/decisions. I was not a member of a regulatory committee advising on risk management matters.</p> <p>Regular occupation, full-time, paid. Senior Manager (Quality) responsible for the leadership of the quality management system of the Malta Competition and Consumer Affairs Authority (MCCAA) which has the Technical Regulations Division (TRD) as one of its entities. The latter is responsible for pesticides in and on food and their residues, food quality schemes, food risk management functions and other non-food product sectors.</p> <p>As a Senior Manager (Quality), I was responsible to manage organisational risks related to quality affairs of the MCCAA. Risk management activities performed by the entities, including the TRD, were not under my remit.</p> <p>My empowerment to validate and/or take management actions/decisions were only related to quality affairs.</p> <p>I was not a member of a regulatory committee advising on risk management matters.</p>	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment or organisation and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

committee advising on risk management matters.

- Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> > 0% but < 5% <input type="checkbox"/> > 5% but < 25% <input type="checkbox"/> > 25%

- Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization.

3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.

- Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
				<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25%

VIII. Other membership or affiliation			<input type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.



Date: 07/05/2024

Signature: (either physical or electronic signature)

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

#### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.



## ANNUAL DECLARATION OF INTERESTS (ADoI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Ms
<b>Name</b>	Ana Isabel
<b>Family name</b>	VILORIA ALEBESQUE
<b>Profession</b>	Team Coordinator Food Safety/ Senior Policy officer (Civil Servant) at the Ministry of Public Health, Welfare and Sport, The Netherlands
<b>EFSA involvement(s)</b>	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.**
- Please fill in all fields, as appropriate.**
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.**

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.



2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.



## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	2017 – to date	Ministry of Public Health, Welfare and Sport – The Netherlands	<p>Work performed as part of my job at the Ministry:</p> <ul style="list-style-type: none"> <li>-Dutch representative for different meetings at European and international level (Codex Alimentarius, Standing Committee on Plants, Animals, Food and Feed (PAFF) in the field of microbiological safety, hygiene, contaminants and novel foods):               <ul style="list-style-type: none"> <li>o <u>Codex Alimentarius</u>: Dutch head of delegation Codex Committee Food Hygiene – from 2021 – and Dutch alternate head of delegation Codex Alimentarius Commission – from 2017.</li> <li>o Dutch head of delegation Codex Committee Contaminants in Food (2015-2019)</li> </ul> </li> <li>- <u>EU meetings</u> <ul style="list-style-type: none"> <li>o 2017-2021 PAFF Novel Food and Toxicological safety; CAFAB (Competent Authority Food Assessment Body, Novel Foods)</li> </ul> </li> </ul>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

			<p>expert working groups on contaminants in food</p> <ul style="list-style-type: none"><li>○ 2021-now: PAFF Biosafe; In these different meetings I represent the Dutch government, fulfilling a role as risk manager. The risk management decisions at EU level are based on EFSA risk assessments. Codex Alimentarius has its own risk assessment bodies like JEMRA and JECFA for example.</li><li>○ Chair Dutch Data Platform. This is a national platform (at expert level) from the Dutch government of different data providers to EFSA (within the Dutch government) that aims to streamline the structure to provide data to EFSA, to improve data quality. At this moment the DP covers only chemical data. My role as chair of this PD is strictly procedural.</li><li>○ Chair advisory committee WOT (Statutory Research Tasks) Policy, part contaminants in food (from 2022). Wageningen University &amp; Research (WUR) supports the government in the implementation of laws and regulations that are needed for safe food and healthy animals, and to guarantee a sustainable environment. This is set out in an agreement called the</li></ul>	
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			'WOT statute'. The WOT policy food safety has different parts, one of them is contaminants in food. My role as chair of the advisory committee is strictly procedural.	
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you



are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.

- Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

- Please specify the relevant period of time each activity took place in month/year.
- Please indicate name, legal nature and location of the organization providing the research funding.
- Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
- Please include also research funding received by your employing organisation.



## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) and EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 17/05/2024

Signature: *(either physical or electronic signature)* \_\_\_\_\_

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).



Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

## ANNUAL DECLARATION OF INTERESTS (ADOI)

Title (Prof, Dr, Mr, Ms, Mrs)	Mr
Name	Marc
Family name	WEYLAND
Profession	Director of the Administration des Services Techniques de L'Agriculture (ASTA) in Luxembourg
EFSA involvement(s)	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSAs remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity



with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	1997 - to date	Ministry of Health	Comité interministériel relative au contrôle de l'utilisation et de la dissémination des organismes génétiquement modifiés.	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2017 - to date	Ministry of Agriculture, Viticulture and Rural Development	Commission pour la promotion, l'innovation, de la recherche et du développement du secteur agricole.	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the entity.

3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups. Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.



## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	01/04/2017 – to date	Administration des Services Techniques de l'Agriculture (ASTA) – Ministry of Agriculture, Viticulture and Rural Development	Director	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EISA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	1995 - to date	Community Plant Variety Office	Luxembourg Member of the Administrative Council	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 16/04/2024      Signature: *(either physical or electronic signature)*

Le Directeur  
des Services  
Agriculture

Commented [A1]: Please sign either electronically or with hand-writing

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please [Marie Weyland](#) of them and attach them to this form.

**Note regarding the processing of personal data:**

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADOi at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADOIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADOIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADOIs per category of data subjects is 10 years from the date of submission of the relevant ADOi.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADOi processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

## ANNUAL DECLARATION OF INTERESTS (ADoI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Dr.
<b>Name</b>	Stelios
<b>Family name</b>	YIANNOPOULOS
<b>Profession</b>	Former Director of the State General Laboratory of the Ministry of Health (Cyprus). Member of the Governing Board of the Cyprus Chemists' Registration Council.
<b>EFSA involvement(s)</b>	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.



## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	15/09/2018 – 30/09/2022	State General Laboratory (SGL), Public, Nicosia (Cyprus)	Director of State General Laboratory	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	08/07/2020 – 30/09/2022	Cyprus Food Council, Public, Nicosia (Cyprus)	President of Cyprus Food Council	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25%



				<input type="checkbox"/> >25%
	01/06/2017 – 30/09/2022	Cyprus Food Safety Council (FSC), Public, Nicosia (Cyprus)	Member of the Food Safety Council	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	16/11/2018 – to date	Cyprus Chemists' Registration Council, Public, Nicosia (Cyprus)	<ul style="list-style-type: none"> <li>• President of the Governing Board of the Cyprus Chemists' Registration Council (16/11/2018 – 14/12/2022)</li> <li>• Member of the Governing Board of the Cyprus Chemists' Registration Council (28/04/2023 – 27/04/2025)</li> </ul>	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	07/02/2024 – to date	Ministry of Health Cyprus	• Head/Coordinator for the establishment of the Cyprus Food Safety Authority	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	01/06/2017 – 30/09/2022	Cyprus Food Safety Council (FSC), Public, Nicosia (Cyprus)	Member of Cyprus Food Safety Council (FSC). The FSC was established on 9 April 2003 by Ministerial Decision (No 57682 of 9/04/2003), which was modified with No. 60959 on 19/10/2004. The aim of FSC is the organisation, scientific study and coordination of various services and institutions that deal with food safety, as well as the communication and cooperation with the European Food Safety Authority (EFSA).	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	01/03/2014 – 30/09/2022	Cyprus National Committee on Environment and Children's Health, Public, Nicosia (Cyprus)	Member of the Cyprus National Committee on Environment and Children's Health. The Cyprus National Committee on Environment and Children's Health was recommended in 2004 with decision of the Ministry Council. Our mission is the protection of Foetus and children from environmental dangers, which can threaten their health, as well as the promotion of a healthy and safe environment with the minimal possible exposure in unhygienic	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



			environmental factors, so they can be ensured of their bodily, intellectual and mental growth and also the conditions of a healthy future life.	
	16/11/2018 – 30/09/2022	Cyprus Food Council, Public, Nicosia (Cyprus)	President of Cyprus Food Council (FC). The FC was established in 1996 according to the Cyprus Food Control and Sale Law. The aim of the FC is to provide advice on Food – related issues to the Minister of Health, either <i>ex officio</i> or after relevant request by the Minister of Health.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	15/09/2018 – 30/09/2022	State General Laboratory (SGL), Public, Nicosia (Cyprus)	Director of State General Laboratory	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	01/06/2017 – 30/09/2022	Cyprus Food Safety Council (FSC), Public, Nicosia (Cyprus)	Member of the Food Safety Council	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	08/07/2020 – 30/09/2022	Cyprus Food Council, Public, Nicosia (Cyprus)	President of Cyprus Food Council	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	16/11/2018 – to date	Cyprus Chemists' Registration Council, Public, Nicosia (Cyprus)	<ul style="list-style-type: none"> <li>• President of the Governing Board of the Cyprus Chemists' Registration Council (16/11/2018 – 14/12/2022).</li> <li>• Member of the Governing Board of the Cyprus Chemists' Registration Council (28/04/2023 – 27/04/2025).</li> </ul> <p>The Chemists' Registration Council was established in 1988 according to the Cyprus Chemist Registration Law (CCRL). The aim of CCRL is to evaluate qualifications and diplomas in Chemistry, to secure a professional chemist's licence, as well as the investigation of disciplinary offences.</p>	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%



	07/02/2024 – to date	Ministry of Health Cyprus	<ul style="list-style-type: none"> <li>• Head/Coordinator for the establishment of the Cyprus Food Safety Authority</li> </ul>	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.



## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
	01/01/2019 – 30/09/2022	European Food Safety Authority (EFSA), Parma (Italy)	1) Topic of the research activity Multi-Annual Focal Point Grant Agreement 2019-2022.  2) Nature of the associated outputs Annual Focal Point Report.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	01/11/2020 – 30/09/2022	Horizon 2020	1) Topic of the research activity DITECT – Digital TEChnologies as an enabler for a conTinuuous transformation of food safety.  2) Nature of the associated output Scientific report, publication.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	05/2021 – 09/2022	European Commission, Brussels	1) Topic of the research activity "IsoDataBase"- Enhancing the existing isotopic databases of Cypriot local & traditional food/drink, by developing a Block Chain platform, to ensure their identity. UNDER THE RECOVERY AND RESILIENCE PLAN, financially supported by the EU.  2) Nature of the associated output	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

			Databases connected with block chain platform, publications.	
	02/2019 – 07/2022	Research and Innovation Foundation (RIF), Nicosia (Cyprus)	1) Topic of the research activity "Black Gold" – Carobs, the Black Gold of Cyprus: Science meets Industry.  2) Nature of the associated output Publications, databases.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the



intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.

- Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

### VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

- Please specify the relevant period of time each activity took place in month/year.
- Please indicate name, legal nature and location of the organization.
- Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding, and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
- Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

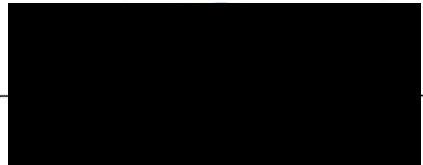
OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 06/05/2024

Signature: \_\_\_\_\_



If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).



Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.