descendants and ascendants who are financially dependent on the concerned individual. When a concerned individual has contracted a registered partnership or the basis of the legislation of the relevant legal system; "the direct

Close Family Member" means: 1. a spouse; 2. a person engaged in the marital relationship with the concerned individual; 3. a partner with

members' currently have or have had in the past five years.

Please declare any interest overlapping with EFSA's complete set of responsibilities that you or your close family

Any modification made to the structure and content of the present template will make the document invalid.

<table>
<thead>
<tr>
<th>EFSA Involvement(s)</th>
<th>Management Board</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Veterinarian</td>
</tr>
<tr>
<td></td>
<td>Profession</td>
</tr>
<tr>
<td></td>
<td>Family name</td>
</tr>
<tr>
<td></td>
<td>CIVITAX-NAME</td>
</tr>
<tr>
<td></td>
<td>Name</td>
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<td>Last</td>
</tr>
<tr>
<td></td>
<td>MRS. (PROF. DR, MR, MS)</td>
</tr>
</tbody>
</table>

ANNUAL DECLARATION OF INTERESTS (ADOI)
organizational activities in which the investment is made.

of deciding the fund's strategy for complete control as this corresponds to ordinary shares. I can sell or buy as we will."

Involving investment including whether you have influence over it. A "no control" is a fund managed by a professional company with no possibility

including its stocks, equities or bonds, or one of its subsidiaries or of a company in which it has a holding. Please provide a description of the

Investments

<table>
<thead>
<tr>
<th>Subject Matter</th>
<th>Organization</th>
<th>Period (Month/Year)</th>
<th>Investments</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

I. FINANCIAL INVESTMENTS
<table>
<thead>
<tr>
<th>Role</th>
<th>Managerial Role</th>
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</thead>
<tbody>
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</table>

<table>
<thead>
<tr>
<th>Subject Matter</th>
<th>Organization</th>
<th>Period From/To (Month/Year)</th>
<th>II. Managerial Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual earnings*</td>
<td>Impact on</td>
<td>National Sanitary Authority</td>
<td>Veterinary and food safety</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Governmental Authority</td>
</tr>
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</tr>
</tbody>
</table>

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

2. Please indicate any participation, paid or unpaid, in internal decision-making processes (such as board membership, directorships, etc.) of an entity with an interest falling within EFSA's remit. Please describe your risks and responsibilities, the remit of the organization and how its activities relate to the remit of EFSA. Please indicate also whether the organization carries out risk management activities and how.

3. Please indicate any participation, paid or unpaid, in the internal decision-making processes of an entity with an interest falling within EFSA's remit. Please describe your risks and responsibilities, the remit of the organization and how its activities relate to the remit of EFSA. Please indicate also whether the organization carries out risk management activities and how.

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 management matters.

Firstly, I have no association or activity that is covered hereby.

Please check (□) next to the value (x <5% but >2.5% □) % <2.5% □):

[Signature]

Date: August 03, 2014

[Name]

*NSVFA Vice President, my main duties are:
- Coordination of the activities related to the critical health and welfare activities;
- Coordination of the animal health and welfare activities;
- Coordination of the implementation of legal framework on animal health and welfare;
- Coordination of the organization of the European commission and third countries and commission of the European institutions.
- Fulfilling business commitments in the absence of the President, when delegated.
- Ensuring business continuity when the President is on leave and other responsibilities.
- Chairing the management board.

NSVFA President: [Name]

Romania: [Code]

Sector: [Sector]

Position: [Position]

Address: [Address]

[Signature]

Date: August 03, 2014

[Name]
1. Please specify the relevant period of time each activity took place in months/year.

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

3. Please include 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 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 was selected (e.g. through EFSA’s scientific groups, other than those organised by EFSA).

4. Please indicate the impact of the activity on your annual earnings.

For past interactions older than one year prior to the submission of this addendum, this indication needs to be given also.

<table>
<thead>
<tr>
<th>Impact on annual earnings</th>
<th>Subject matter?</th>
<th>Organisation?</th>
<th>Advisory Entity (Month/Year)</th>
<th>II. Member of a scientific advisory entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>5% - 25% but &lt; 5%</td>
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<td>%</td>
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<tr>
<td>5% - 25% but &lt; 5%</td>
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<td>0%</td>
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<td>%&lt;25%</td>
<td>%</td>
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<tr>
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<td>%</td>
<td>%</td>
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<td>%</td>
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</tbody>
</table>
### IV. Employment

<table>
<thead>
<tr>
<th>Impact on Annual Earnings</th>
<th>Subject Matter</th>
<th>Organization</th>
</tr>
</thead>
</table>

**Why main duties of NSVFA are:**
- Veterinary and Food Safety
- Environmental Protection
- Animal Protection
- Urban Management
- Water Management
- Public Health
- Development and Animal Health
- Coordination of the Legal Framework
- Coordination of the Branch of the Ministry
- Coordination of the Activities Related to the Central Authority in the Veterinary and Food Safety Field

**Function of the NSVFA:**

1. **Bucharest, Romania**
   - Postal Code: 013701
   - Corp D, Sector 1
   - Palace of the Sovereign

2. **Government Body**
   - The NSVFA has a specialized body for the central authority in the veterinary and food safety field.

3. **National Sanitary Veterinary Authority**
   - The NSVFA is organized and functions up to date.

August 2014 - (Month/Year)
<table>
<thead>
<tr>
<th>Activities/decisions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participation in management, board, or executive committee decisions</td>
</tr>
<tr>
<td>Decision-making for NSVFA affairs</td>
</tr>
<tr>
<td>Ensuring the implementation of NSVFA resolutions and decisions</td>
</tr>
<tr>
<td>Other responsibilities specified in the NSVFA's statute or by the relevant authority</td>
</tr>
</tbody>
</table>

Experiences when delegated:
- Ensuring the implementation of NSVFA resolutions and decisions |
- Decision-making for NSVFA affairs |
- Participation in management, board, or executive committee decisions |
- Other responsibilities specified in the NSVFA's statute or by the relevant authority |

Please indicate any form of regular occupation of business/part-time or full-time, paid or unpaid, including self-employment, and any consultancy work.

1. Please specify the relevant period of time each activity took place in months/year.
2. Please indicate name, legal name and location of the organization/activities performed in the context of employment and provided to individual business operators or other parties, parties and indicate their role/position.
3. Please describe the impact of the employing entity or organization, your previous role, tasks, responsibilities and the nature of area of impact.
4. Please indicate whether the employing entity or organization carries out risk management activities, irrespective of the relevant risk management levels/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
5. Please indicate whether NSVFA carries out risk management activities or not.
V. OCCASIONAL CONSULTANCY

<table>
<thead>
<tr>
<th>V. Occasional consultancy</th>
<th>Period¹ From/To (Month/Year)</th>
<th>Organisation²</th>
<th>Subject matter³</th>
<th>Impact on annual earnings⁴</th>
</tr>
</thead>
<tbody>
<tr>
<td>NA</td>
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<td>□ 0%</td>
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<td>□ &gt;25%</td>
</tr>
</tbody>
</table>

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.
4. Please indicate if any research funding is received by your employing organisation.

3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity.

2. Please indicate the legal nature and location of the organisation providing the research funding.

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

<table>
<thead>
<tr>
<th>NO</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO</td>
<td>YES</td>
</tr>
</tbody>
</table>

Where concerned, under concern is managed by you for the area total research budget that is of the ADR exceeds 25% of the years preceding the submission of the private sector during the two the funding received from

Subject matter: 

Organisation: 

Funding

Period: from/to

Month/year

VI. RESEARCH FUNDING
### VII. INTELLECTUAL PROPERTY RIGHTS

<table>
<thead>
<tr>
<th>Property Rights</th>
<th>(Month/Year) Period From/To</th>
<th>Organisation?</th>
<th>Subject matter?</th>
<th>Impact on annual earnings?</th>
<th>%&lt;25%</th>
<th>%25% but &lt;50%</th>
<th>%50% but &lt;75%</th>
<th>%75% but &lt;90%</th>
<th>%90% but &lt;100%</th>
<th>%100%</th>
<th>NA</th>
</tr>
</thead>
</table>

1. Please specify the relevant period of time each activity took place. In monthly/year.

2. Please indicate the nature, legal status and location of the organisation.

3. Please indicate the subject matter of the intellectual property activities (e.g. patents, trademarks, inventions, etc.) from which you have benefited.

4. Please indicate the impact of the activity on your annual earnings. By selecting one of the values provided, this information has to be given also for relevant scientific group.

5. Please indicate whether the intellectual property rights released to the extent of ETS, and/or of the ETS group, are still valid or if they have expired and provided a description of the topic covered by the granted right (e.g. SHO, BUT, etc.)

6. Your role (e.g. patent holder, contributor, etc.) and how the intellectual property rights release impacts the grant of the right (e.g. SHO, BUT, etc.)

7. Please indicate the intellectual property rights released to the extent of ETS, and/or of the ETS group, into which you have been granted right, irrespective of whether they grant a material gain, and their fall directly or indirectly, within ETS's remit. Please indicate if the grid is invalid.

8. Please indicate the relevant period of time each activity took place. In monthly/year.

9. Please indicate the subject matter of the intellectual property activities (e.g. patents, trademarks, inventions, etc.) from which you have benefited.

10. Please indicate the impact of the activity on your annual earnings. By selecting one of the values provided, this information has to be given also for relevant scientific group.

11. Please specify the relevant period of time each activity took place. In monthly/year.

12. Please indicate the nature, legal status and location of the organisation.

13. Please indicate whether the intellectual property rights released to the extent of ETS, and/or of the ETS group, are still valid or if they have expired and provided a description of the topic covered by the granted right (e.g. SHO, BUT, etc.)

14. Your role (e.g. patent holder, contributor, etc.) and how the intellectual property rights release impacts the grant of the right (e.g. SHO, BUT, etc.)

15. Please indicate whether the intellectual property rights released to the extent of ETS, and/or of the ETS group, into which you have been granted right, irrespective of whether they grant a material gain, and their fall directly or indirectly, within ETS's remit. Please indicate if the grid is invalid.
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 organisation.

3. Please indicate any membership or affiliation with entities within an interest falling within EFSAs remit not falling under the categories defined above.

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 the activity relates to the remit of EFSAs and/or of the EFSAs relevant statutory group.

<p>| | | | |</p>
<table>
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<tr>
<td>&gt; 25%</td>
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</tbody>
</table>

**Impact on annual earnings**

**Subject matter**

**Organization**

**Other relevant interest**

**From/to period**

**Month/year**

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

**3. Please indicate any interests not falling under the other eight categories above (such as physics, girls' awards and hospitality) and relevant for the purposes of the EYFS decision on Continuing Interest Management. Please provide a description of the interests, such as the subject matter of the activity (such as physics, girls' awards and hospitality) and relevant for the purposes of the EYFS decision on Continuing Interest Management.**

**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 AEO.**

**5. 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 AEO.**
The Executive Director of EFSA is the data controller with respect to the handling of Data.

Independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

EFSA processes all declarations of Interests (Dios) in accordance with Regulation (EU) 2018/1725. Data processing is necessary in order to safeguard the interest of EFSA's Policy on Implementing EFSA's Decision on Co-Management Interests Management.

Note Regarding the Processing of Personal data:

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.

I hereby declare that I have read the EFSA Decision on Co-Management Interests Management Implementing EFSA's Policy on Co-Management Interests Management.

Signature: _____________________________
Date: 01/08/2017

Independence and that the above declaration is truthful and complete.

I hereby declare that I have read the EFSA Decision on Co-Management Interests Management Implementing EFSA's Policy on Co-Management Interests Management.

I think there is a conflict of Interest with respect to the following activity(ies) at EFSA.

☐ I think there is a conflict of Interest with respect to the following activity(ies) at EFSA.

☐ I do not have a conflict of Interest with respect to my activity(ies) at EFSA.

I confirm that:

[Signature]

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

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer (see paragraph below for contact details).

The conservation period for Adult may be extended, in accordance with Article 8(5)(d) of Regulation (EC) No 178/2002, for a further period of 15 years following termination of data processing.

Concerned individuals have the right to access, rectify, erase and object to the processing of their Adult at any time. Nevertheless, for certain categories of information containing of interests of EFSA, concerns individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interests of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interests of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interests of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interests of EFSA.

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