



# Declaration of interests for the Innovative Health Initiative Joint Undertaking Governing Board Members

**Name:** Magda Chlebus

**E-mail:** magda.chlebus@efpia.eu

**Position:** Executive Director, Science Policy & Regulatory Affairs

- Chairperson of the Governing Board  
 Representative/lead delegate/alternate of the Commission  
 Representative/lead delegate/ alternate of EFPIA  
 Other (please specify)

do hereby declare on my honour that, to the best of my knowledge, the only direct or indirect interests I have in the [pharmaceutical, medical technology, biotechnology, digital health, vaccines, etc] sector[s] [are][is] those listed below:

## 1 Past activities:

*[posts held over the last 5 years in foundations or similar bodies, educational institutions, companies or other organisations (the nature of the post and the name of those bodies should also be indicated); other membership/affiliation or professional activities held over the last 3 years, including services, liberal professions, consulting activities, and relevant public statements.]*

## 2. Current activities:

*[posts held in foundations or similar bodies, educational institutions, companies or other organisations (the nature of the post and the name of those bodies should also be indicated); other membership/affiliations or professional activities, including services, liberal profession, consulting activities, and relevant public statements.]*

CTF Europe (Children's Tumor Foundation) Board member (non-remunerated)

## 3. Current Financial Interests

*[Above a certain minimum threshold [xxx], any direct financial interests, (managerial stakes in companies, including ownerships of patents or any other relevant intellectual property rights), or assets (shares and/or securities held in companies) or grants or other funding which might create a conflict of interests in the performance of their duties, with an indication of their number and value, as well as the name of the company/provider of the grant/funding.]*

No Interest Declared

## 4. Any other relevant interests.

No Interest Declared

## 5. Family Member Interest

*[Spouse's/partner's/dependent family members' current activity and financial interests that might entail a risk of conflict of interest.]*

No Interest Declared

I confirm the information declared on this form is accurate to the best of my knowledge and I consent to my information being stored electronically by the Innovative Health Initiative Joint Undertaking.

Done at Brussels, 13 December 2021

Magda Chlebus



# Declaration of confidentiality and conflict of interest for attendees of the Innovative Health Initiative Joint Undertaking Governing Board

**Name: Magda Chlebus**

**E-mail: magda.chlebus@efpia.eu**

**Position: Executive Director, Science Policy & Regulatory Affairs**

Chairperson of the Governing Board

Representative/lead delegate/alternate of the Commission

Representative/lead delegate/ alternate of EFPIA

Other (please specify)


I hereby undertake to act in the performance of my duties in the general interest of the Innovative Health Initiative Joint Undertaking.

At each meeting of the Governing Board or before any decision is taken by written procedure, I shall declare any interest which might be considered to influence or bias my judgment and therefore be prejudicial to the way an item on the agenda is handled.

I undertake to ensure the confidentiality of sensitive information whose disclosure could damage the interests or the reputation of the Innovative Health Initiative JU, the Members of the Innovative Health Initiative JU or of the participants in the activities of the Innovative Health Initiative JU.

I shall not disclose sensitive information learnt during the activities of the Innovative Health Initiative JU even after my duties have ended.

Done at Brussels, 13 December 2021

  
Magda Chlebus