

DECLARATION OF CONFLICT OF INTEREST FOR THE INNOVATIVE HEALTH INITIATIVE JOINT UNDERTAKING GOVERNING BOARD MEMBERS

Name: Maria Pilar AGUAR FERNANDEZ

E-mail: [REDACTED]

Position:

- ☒ Chairperson of the Governing Board
- ☐ Representative/lead delegate/alternate of the Commission
- ☐ Representative/lead delegate/ alternate of [...]
- ☐ 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:

Head of Unit Health Innovations DG Research and Innovation. European Commission.

Member of the IMI2 Board.

2. Current activities:

Director Health and Food Audits and Analysis, DG SANTE, European Commission

3. Current Financial Interests

No Interest Declared

4. Any other relevant interests.

No Interest Declared

5. Family Member 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.

Furthermore, 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.

Done at Dublin 22/08/2025

Name and Signature

Maria Pilar AGUAR FERNANDEZ

[REDACTED SIGNATURE]

