

Annex II to EBA Decision EBA/DC/2020/308

Declaration of Interest

First name: Lene

Surname: Kjær

Competent Authority: Resolution Unit of Danish FSA **Member State:** DK

EU Institution: Choose:

Current EBA involvement: ResCo

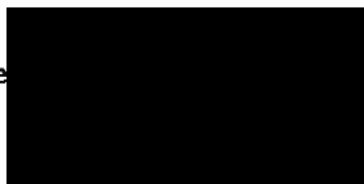
Position: Observer

- I declare that I have read the Decision on Conflict of Interest Policy (EBA DC 2020/308) and that this declaration is truthful and complete.

- I do hereby declare on my honour that, to the best of my knowledge, the only interests that create a Conflict of Interest as defined in Article 1(2)(c) of the Policy in respect of my activities which fall under the EBA's scope of action are those listed in the annex.

- Whenever I have a Conflict of Interest I will alert the EBA.

Signature

A large black rectangular box redacts the signature of the declarant.

Date 21/03/2022

Annex to the Declaration of Interests

Please provide as many details as possible (in the case of a body or employer, full name, location, private or public nature and your role)

Nature of conflict	Period (from /till)	Organisation	Subject matter/Reasons why my independence may be/may not be impaired
I. Economic Interest	From		
II. Membership	To		
III. Employment or Consultancy			
IV. Intellectual Property Rights			

V. Interests of close family members

VI. Institutional Conflict of Interest

VII. Article 50 TEU

VIII. Other

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