

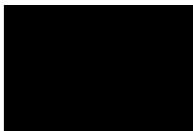


Annex II

Declaration of Interests (DoI)

First Name	<i>Peter</i>
Surname	<i>Dr. Lutz</i>
Authority/ MS	<i>BaFin – Federal Financial Supervisory Authority / Germany</i>
Current EBA involvement	<i>Alternate of Voting Member of the Board of Supervisors and of Member of the Management Board</i>

- I declare that I have read the Decision of the Management Board on Conflict of Interest Policy (EBA DC 2014 103) 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.

Date: January 14 th , 2019	Signature: 
--	---

Please send a signed copy of this form to the EBA's Ethics Officer ethics@eba.europa.eu

In all cases, 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 impaired
I. Economic Interest	1. 2.	./.	
II. Membership	1. 2.	./.	
III. Employment or Consultancy	1. 2.	./.	
IV. Intellectual Property Rights	1. 2.	./.	
V. Other	1. 2.	./.	
VI. Interests of close family members	1. 2.	./.	