



# ANNUAL DECLARATION OF INTEREST (Annex II EBA DC 104)

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You are required to sign this form in order to confirm that you have read and taken note of Article 11a of the Staff Regulations as applied by the Conditions of Employment of Other Servants, the EBA's Staff Ethics Rules (EBA DC 064), the EBA's Policy on Independence and Decision Making Processes for avoiding Conflicts of Interest (Conflict of Interest Policy) for Staff and Other Contractual Parties (EBA DC 104).

Signing this declaration should prompt you to consider whether you may have a possible conflict of interest that could affect the performance of your duties at the EBA. The act of signing the declaration should also remind you that when you do have a conflict of interest you should inform the Appointing Authority accordingly.

Article 11a of the Staff Regulations states the following:

- "1. An official shall not, in the performance of his duties and save as hereinafter provided, deal with a matter in which, directly or indirectly, he has any personal interest such as to impair his independence, and, in particular, family and financial interests.*
- 2. Any official to whom it falls, in the performance of his duties, to deal with a matter referred to above shall immediately inform the Appointing Authority. The Appointing Authority shall take any appropriate measure, and may in particular relieve the official from responsibility in this matter.*
- 3. An official may neither keep nor acquire, directly or indirectly, in undertakings which are subject to the authority of the institution to which he belongs or which have dealings with that institution, any interest of such kind or magnitude as might impair his independence in the performance of his duties."*

**I hereby declare that I have read Article 11a of the Staff Regulations, the EBA's Staff Ethics Rules (EBA DC 064) and the EBA's Policy on Independence and Decision Making Processes for Avoiding Conflicts of Interest (Conflicts of Interest Policy) for Staff and Other Contractual Parties (EBA DC 104) and am aware of my obligations. I attach a list of my current interests (annex 1) and, where applicable, sources of conflict of interest (annex 2). Whenever I have a conflict of interest I will alert the Appointing Authority.**

Name: Isabelle Vaillant	Date: 15/01/2015	Signature: Signed
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*Please send a signed copy of this form to the EBA's Ethics Officer, and fill in a new form at the start of each year.*

**Annex 1. List of financial assets according to Article 4 and point (1.3) (a) of Article 1<sup>1</sup>:**

<b>Name/ISIN</b>	<b>Date of acquisition</b>	<b>Number of shares or nominal value</b>

Name: Isabelle Vaillant	Date: 15/01/2015	Signature: Signed
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<sup>1</sup> Units in collective investment undertakings, as long as they are not allowed to invest more than 20% of the funds in shares of credit institutions, investment firms, financial conglomerates, or their group companies, do not require a declaration



**Annex 2. Source(s) of conflict of interest, actual (past or present) or potential (attach as many as relevant):**

**Type of conflict (as per Article 1)**

- Membership of a body with an interest in the subject matter
- Employment
- Consultancy
- Intellectual property
- Other memberships
- Other

**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):**

1. ....

**Period concerned:**

Past, from: ..... to: .....

Present, since.....to: .....

**State the nature of and procedure involved in the matter on which you are called on to decide - or deal with - in the performance of your duties and in the outcome - or handling - of which you may have a personal interest such as to impair your independence:**

.....

**State the reasons why your independence may be impaired:**

.....

2. ....

**Period concerned:**

Past, from: ..... to: .....

Present, since.....to: .....

**State the nature of and procedure involved in the matter on which you are called on to decide - or deal with - in the performance of your duties and in the outcome - or handling - of which you may have a personal interest such as to impair your independence:**

.....

**State the reasons why your independence may be impaired:**

.....

Name: Isabelle Vaillant	Date: 15/01/2015	Signature: Signed
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SEND THE COMPLETED FORM TO THE ETHICS OFFICER