



DECLARATION OF INTERESTS

First Name	SIM
Surname	TAMMER
Authority/Institution/Agency	FINANZINSPEKTION
Current EIOPA Involvement (Voting Member, Permanent Representative, EEA EFTA Member, Non-Voting Member, Observer)	VOTING MEMBER

☒ I declare that I have read the Decision adopting a Policy on Independence and Decision Making Processes for avoiding Conflicts of Interest (Conflict of Interest Policy) for Non-Staff (EIOPA-BoS-22-388) 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 Decision in respect of my activities which fall within EIOPA's scope of action are those listed in the Annex.

☒ Whenever I have a Conflict of Interest, I will alert EIOPA.

Date: 1.03.2023	Signature:
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Please submit a signed copy of this form to EIOPA's Ethics Officer as requested

Annex to Declaration of Interests

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. 2014 - 2.	auditing activities oversight board	Member of the Board.
III. Employment or Consultancy	1. 2.		
IV. Intellectual Property Rights	1. 2.		
V. Other	1. 2		
VI. Interests of close family members	1. 2.		