

RUE DE L'INDUSTRIE 24, BE- 1040 BRUSSELS T + 32 2 649 51 64 eaccme.uems.eu - accreditation@uems.eu

Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: RAFT Phoned

AFFILIATION: EMORY University

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

12/15/23

Date:



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: ROY ANDERSON

IMPERIAL COLLEGE, LONDON. AFFILIATION:

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DISCLOSURE

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Type of affiliation / financial interest

Name of commercial compar

Leiden Labratanes, mocloral entitiedy

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

65K, Pfizer, Astra Zenaca. fy): Chairmon of Onde Global Health Ltd, Consultancy Company. 12/12/2023. Date:

Signature:



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: NICK ANDREWS AFFILIATION: UKHSA

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DISCLOSURE

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□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

NJANJRWS

Date:

20/10/23



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

AFFILIATION: The INCLEN Trust International New Dechi - INDIA

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Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Name of commercial company

Date:



EUROPEAN ACCREDITATION COUNCIL FOR CME (EACCME®)

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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

Edwin J. Asturias, MD

NAME:

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DISCLOSURE

I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: September 13, 2023

UEMS_{aisbl} – Union Européenne des Médecins Spécialistes VAT n° BE 0469.067.848 RPM Bruxelles-Brussels EU Transparency Register ID 219038730914-92

Name of commercial company

Pfizer

Moderna, Merck, Invio



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: SABRING BACCI AFFILIATION: ECOC

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Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: Sow usbeen'

Date: 10/02/2024



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Dr. Madhara Ram Balakrishnan AFFILIATION: WHO

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

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Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: (

Date:

12/12/ 2023.



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: ANANDA S. BANDYOPADHYAY AFFILIATION: Bill and Melinda Gates Foundation

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Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: Harwy op ~ 4-

Date:

09/13/23



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Norman W. Baylor

AFFILIATION: Biologics Consulting

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DISCLOSURE

□ I have no potential conflict of interest to report

🛛 I have the following potential conflict(s) of interest to report

I provide regulatory advice to the regulated industry, NGOs and academia.

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

: 7 WBang

Date:

20 December 2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Arthur Berger Jr AFFILIATION: GlazoSmiMKline; Hillevax

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DISCLOSURE

I have no potential conflict of interest to report

☑ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder: Glaxo SmiThKline; Hillevax

Spouse/partner:

Other support (please specify): 13 Dec 2023 Date: Signature: UEMSaisbl – Union Européenne des Médecins Spécialistes



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Conflict of Interest Disclosure Form

NAME: ...Marc Brisson.....

AFFILIATION:Laval University.....

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Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 2024-01-30



EUROPEAN ACCREDITATION COUNCIL ON CME (EACCME®)

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Conflict of Interest Disclosure Form

NAME: PRISTINA CASSETTI AFFILIATION: NIH /NIAID

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DISCLOSURE

I have no potential conflict of interest to report

Type of affiliation / financial interest	Name of commercial company
Receipt of grants/research supports:	
Receipt of honoraria or consultation fees:	
Participation in a company sponsored speaker's bureau:	
Stock shareholder:	
Spouse/partner:	
Other support (please specify):	

Signature:

Cioselt

Date: JANUARY 2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: MARCO CAVALERI

AFFILIATION:

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DISCLOSURE

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□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 17/11/2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

CHRISTOPHER CHIU NAME:

AFFILIATION:

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DISCLOSURE

□ I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest Name of commercial company

Receipt of grants/research supports: Merck MSD investigator-led grant; MRC/GSK co-funding

Receipt of honoraria or consultation fees: Merck Vaccinology Course; Sumitomo scientific advisory committee

Participation in a company sponsored speaker's bureau: Sanofi Infectious Respiratory Disease forum speaker

Stock shareholder:

Spouse/partner:

Other support (please specify):

CC Signature:

Date: 30-OCT-2023



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Conflict of Interest Disclosure Form

NAME: John Clemens

AFFILIATION:

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Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Joh Clem

1/25/24 Date:

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Merck, Matsway

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EUROPEAN UNION OF MEDICAL SPECIALISTS (UEMS) EUROPEAN ACCREDITATION COUNCIL ON CME (EACCME®) RUE DEL'INDUSTRIE 24, BE - 1040 Brussels T +32 2 649 51 64 eaccme.uems.eu - accreditation@uems.eu

Conflict of Interest Disclosure Form

(to be completed by Scientific/Organizing Committee Members)

NAME: jakob cramer

AFFILIATION: CEPI, Coalition for Epidemic Preparedness Innovations

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

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I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder: Fresening SE, BNT, Moherna, Siemens Healthimers (very small ammuts card) within a portfolio (among Other support (please specify): other mon-pharmacenfical fitles)

Signature:

John Lam

Date:

18/ Su / 2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

Alejandro Cravioto

NAME:

AFFILIATION: Facultad de Medicina, Universidad Nacional Autonoma de Mexico

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Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Signature:

Other support (please specify):

acravos,

Date: October 20th, 2023

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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Prof Nigel Cirtis AFFILIATION: The University of Melbanne

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DISCLOSURE

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Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 7 Nov 2023



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Conflict of Interest Disclosure Form

NAME: Ron Dagan

AFFILIATION: Ben-Gurion University

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I have the following potential conflict(s) of interest to report

no conflict of interest

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder: none

Spouse/partner:

Other support (please specify):

Ron Dagan

Signature:

1 Ac (623 Date:

UEMS_{aisbl} – Union Européenne des Medecins Spécialistes VAT n° BE 0469.067,848 RPM Bruxelles-Brussels EU Transparency Register ID 219038730914-92

Name of commercial company

Pfizer, MSD; Grants, Consultations Fees and Speaker's Bureau

Medimmune/AstraZeneca: Grant

Sanofi Pasteur; Speaker's Brueau



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Conflict of Interest Disclosure Form

NAME: Marie Convilina DANOVAILS

AFFILIATION: NHU

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DISCLOSURE

, I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: / Lou Oo

Date: 21 Dec 2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME:DIANA. Alessandro......

AFFILIATION: UNIGE

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DISCLOSURE

□ I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Vacupdate for paediatrician and family doctors Vaccinology course for pharmacists- IFAK DATA

Name of commercial company

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Aie

Date: Genève, le 5 novembre 2023



EUROPEAN ACCREDITATION COUNCIL ON CME (EACCME®)

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Conflict of Interest Disclosure Form

(To be completed by scientific/organizing committee members)

NAME : Arnaud Didierlaurent.....

AFFILIATION: ...University of Geneva.....

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DISCLOSURE

□ I have no potential conflict of interest to report

X I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest	Name of commercial company
Receipt of grants/research supports:	Moderna, Roche, GSK
Receipt of honoraria or consultation fees:	Sanofi, Roche, Speransa, ACM Biologicals, Botanical Solutions
Participation in a company sponsored speaker's bureau:	Roche, Merck, GSK, Sanofi
Stock shareholder:	
Spouse/partner:	Work at GSK

Other support (please specify):

Signature:

Date: 02/10/2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Betty DODET AFFILIATION: Do det Brio Science

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

B. Ded Signature:

Merch/MSD

Date: 02-11-2023

Name of commercial company



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: EVE DUBE AFFILIATION: LAVAL UNIVERSITY

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DISCLOSURE

XI have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature

Date: OCTOBER, 23, 2023

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Conflict of Interest Disclosure Form

NAME DUMDLARD Laure

AFFILIATION: WHO

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

8 Jan 2024 Date:

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EUROPEAN ACCREDITATION COUNCIL FOR CME (EACCME®)

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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME:Anna Durbin

AFFILIATION: Johns Hopkins Bloomberg School of Public Health

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

□ I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: Ana P. Sube

Date: 14 SEP 2023

UEMS_{aisbl} – Union Européenne des Médecins Spécialistes VAT n° BE 0469.067.848 RPM Bruxelles-Brussels EU Transparency Register ID 219038730914-92

Name of commercial company

Merck & Co. I lectured at their vaccine course



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Conflict of Interest Disclosure Form

NAME Christiane EBERHARDT AFFILIATION: University Hospitals Geneva

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DISCLOSURE

I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports: 115 Pfizer, trouvfer of unturally - aquited Receipt of honoraria or consultation fees: maternal out - RSV and Sodies

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

6.2.2024 Date:



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

Janet A Englund, MD NAME:

AFFILIATION: Univ. Washington/Seattle Children's Hospital

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

□ I have no potential conflict of interest to report

anet nglund

 \mathbf{Q} I have the following potential conflict(s) of interest to report

	Type of affiliation / financial interest	Name of commercial company
	Receipt of grants/research supports:	AstraZeneca, GSK, Merck, Moderna, Pfizer
	Receipt of honoraria or consultation fees:	Abbvie, AstraZeneca, Meissa Vx, Ark Biopharma, Moderna, Sanofi Pasteur, Pfizer, GlaxoSmithKline
	Participation in a company sponsored speaker's bureau:	NO
	Stock shareholder:	NO
	Spouse/partner:	NO
	Other support (please specify):	NO
Sigı	nature: Canat Enclund.	Date: 20 Oct 2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME EMILY ERBELDING

AFFILIATION: NIAID/NIH

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DISCLOSURE

XI have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: Ulldufm

Date: 13 September 2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME:Adam Finn.....

AFFILIATION: ...University of Bristol, UK.....

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DISCLOSURE

I have no potential conflict of interest to report

X I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest	Name of commercial company
Receipt of grants/research supports:	Pfizer, GSK, Sanofi,
Receipt of honoraria or consultation fees:	RQ Bio, Hillevax, Imophoron,
	VB Vaccines, Bionet-Asia, GSK
Participation in a company sponsored speaker's burea	u:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 14 SEP 23



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Conflict of Interest Disclosure Form

NAME VERONICA GAMBILLARA FONCK AFFILIATION: PUREOS PARTVER

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DISCLOSURE

I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: Mulill M

Date: 26.02.2024



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Bradford D. Gessner

AFFILIATION: Pfizer, Inc.

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

I have no potential conflict of interest to report X I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: A

Date: October 31, 2023

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Name of commercial company

As an employee of Pfizer, I may hold stock or stock options

Pfizer employee



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: David Goldblatt

AFFILIATION: University College London

In accordance with criterion 13 of document UEMS 2023/07 "EACCME[®] Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME[®] upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

🗖 X I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Signature:

Other support (please specify):

0000

Date: 31/10/2023



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Conflict of Interest Disclosure Form

NAME. Barney S. Graham, MD, PhD

AFFILIATION: Morehouse School of Medicine

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DISCLOSURE

□ I have no potential conflict of interest to report

 \blacksquare I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

GSK, Pfizer, Janssen, Sanofi, Merck, AstroZeneca, Exevir,

Name of commercial company

and Third Rock Ventures ad hoc consultation

Icosavax, Vaccine Company, Inc.

Spouse/partner:

Other support (please specify):

Signature:

I am an inventor on some patents for antiviral vaccines and monoclonal antibodies.

Date: 8 January 2024



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Conflict of Interest Disclosure Form

NAME: JAN GREVEN DONK

AFFILIATION: WORLD NEALTH ORGANIZATION

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DISCLOSURE

I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: g februeny 2024

Name of commercial company



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

RORAH

AFFILIATION: NONE (GREEZANCE COMMUNICATIONS NOA

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date

SI oct



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME mary Hand mD

AFFILIATION: UTt)

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DISCLOSURE

DI have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's

bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 4 Dec 2023



EUROPEAN ACCREDITATION COUNCIL FOR CME (EACCME®)

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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Robert S Heyderman UCL, London, UK

In accordance with criterion 13 of document UEMS 2023/07 "EACCME[®] Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME[®] upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

🖄 I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: Job Hlydw/www

Date: 20/10/23



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: JOACHIM HOMBACH AFFILIATION: WHO HQ, GENEVA

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DISCLOSURE

💢 I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 24/10/23



EUROPEAN ACCREDITATION COUNCIL FOR CME (EACCME®)

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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Luis Jo dar AFFILIATION: PFIZER

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DISCLOSURE

I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Pfizer

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

sto

Date:

01/11/2023



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Conflict of Interest Disclosure Form

NAME: KARI JOHANSEN AFFILIATION: PUBLIC ITEMAT AJENCY OF SWEDEN

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DISCLOSURE

Thave no potential conflict of interest to report
I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: December 15, 2023



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Conflict of Interest Disclosure Form

NAME PHILIPE JUVIN

AFFILIATION: SAND FI PASTEUR

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DISCLOSURE

□ I have no potential conflict of interest to report		
have the following potential conflict(s) of interest to re	eport	
Employee of SANOFT PASTEUR		
Type of affiliation / financial interest	Name of commercial company	
Receipt of grants/research supports:		
Receipt of honoraria or consultation fees: Sturry	SANOF NASTICIAR	
Participation in a company sponsored speaker's bureau:		
Stock shareholder:	SPANOF NAJTEUR	
Spouse/partner:		
Other support (please specify):		
Signature:	Date: $12/12/23$	
UEMS _{aisbl} – Union Européenne des Médecins Spécialistes		
VAT n° BE 0469.067.848 RPM Bruxelle	s-Brusseis	

EU Transparency Register ID 219038730914-92



EUROPEAN ACCREDITATION COUNCIL FOR CME (EACCME®)

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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

David C. Kaslow, M.D. NAME. US FDA

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DISCLOSURE

I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: David Charles

Date: 11 DEC 2024



EUROPEAN ACCREDITATION COUNCIL FOR CME (EACCME®)

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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME:Keith P. Klugman

AFFILIATION: Bill & Melinda Gates Foundation

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 23 October 2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Souleymane KONE

AFFILIATION: World Health Organization (WHO)

In accordance with criterion 13 of document UEMS 2023/07 "EACCME[®] Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME[®] upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

✓ I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

I do why

Date: 14 November 2023



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Conflict of Interest Disclosure Form

NAME DE SHAMEZ LADHANI AFFILIATION: UK HEALTH SECURITY AGENCY

AFFILIATION: UN INCREMENTS COUNTY ATTE

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

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I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date:

12 02 1 2024



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Paul. Hewin LAMBERT

AFFILIATION: UNIGE

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DISCLOSURE

I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

anelt tan be Signature:

Date: 12.10.2023



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Conflict of Interest Disclosure Form

Myron M. Levine NAME: University of Maryland School of Medicine AFFILIATION:

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DISCLOSURE

□ I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

14(12) 2023 Signature: Date:

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Name of commercial company

Pfizer (not related to ADVAC)



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

Stephan Lewandowsky NAME: University of Bristol AFFILIATION:

In accordance with criterion 13 of document UEMS 2023/07 "EACCME[®] Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME[®] upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

I have no potential conflict of interest to report

<u>EXIMATION CONSIGNATION CONSIGNATICON CONSIGNATION CONSIGNATICON </u>

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

He lesse

Date: 19 December 2023



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Conflict of Interest Disclosure Form

AFFILIATION: FUNDAGON INFANT / ITNIDLS

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DISCLOSURE

□ I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports: PATH / London School of Hygiene and tropical redicine / MSD / PFiZER

Receipt of honoraria or consultation fees: JACUEN (MUD) NOJDNOX (ADIMAX) PFIZER

Participation in a company sponsored speaker's bureau: No

Stock shareholder: ITMALS SA / ITMALS LLC

Spouse/partner: NO

Other support (please specify):

Signature:

Date: 28 DEC2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Ann Lindstrand

AFFILIATION: World Health Organization

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Signature:

Other support (please specify):

MIL

Date:

3 November 2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: PROF. HELEN. MCSHANE

AFFILIATION: JENNER INSTITUTE, UNIVERSITY OF OXFORD.

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DISCLOSURE

Thave no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

NO Signature:

Date: 06/11/2023.

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Name of commercial company



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Conflict of Interest Disclosure Form

(to be completed by Scientific/Organizing Committee Members)

NAME: Jennifer Moïsi

AFFILIATION: Pfizer Inc

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DISCLOSURE

□ I have no potential conflict of interest to report

X I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder: current employee and holds company stock at Pfizer

Spouse/partner:

Other support (please specify):

Signature:

Jennifer Moisi

Date: 10/4/2024



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Conflict of Interest Disclosure Form

NAME. Prof Keymanthri Moodley

AFFILIATION: Stellenbosch University x

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DISCLOSURE

□ I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation /	financial interest	Nam	e of commercial company
Receipt of grants/reso	earch supports:	Nation Botna	al Institutes of Health (NIH) and Foundation
Receipt of honoraria	or consultation fees:	Pathca	Ire
Participation in a cor bureau:	npany sponsored speaker's	No	
Stock shareholder:		No	
Spouse/partner:		N/A	
Other support (please	e specify):	N/A	
Signature:		Date:	9 February 2024
UEMS _{aisbl} – Union Européenne des Médecins Spécialistes			
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	EU Transparency Register ID 2190387	30914	-92



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Rudzani Muloiwa

AFFILIATION: University of Cape Town

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I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 12th November 2023

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Name of commercial company

· Sanofi

· Sanofi, MSD



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Conflict of Interest Disclosure Form

NAME: Pieter Neels

AFFILIATION: Vaccine Advice BV - IABS chair of Human Vaccine Committee

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DISCLOSURE

I have no potential conflict of interest to report

X I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest	Name of commercial company
	Pfizer
Receipt of grants/research supports:	GSK
	Sanofi Pasteur
Receipt of honoraria or consultation fees: X	MSD
	Curevo
Participation in a company sponsored speaker's	Curevac
	Icosavac
bureau:	Bill and Melinda Gates foundation
	WHO
Stock shareholder:	Wellcomùe trust
	DCVMN
Spouse/partner:	CR2O
	ADVAC
Other support (please specify):	CanSino
A. I. December of the second s	Osivax
	Arcturus
Ht.ool	
Signature:	 Date: 19/12/2023
/	
UEMS _{atsbl} – Union Européenne de	es Médecins Spécialistes
VAT n° BE 0469.067.848 RPM	A Bruxelles-Brussels
EU Transparency Register ID	219056750914-92



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Dr. Kathleen Neuzil

AFFILIATION: University of Maryland School of Medicine Center for Vaccine Development and Global Health

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DISCLOSURE

I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports: Phase 1 trial of a ferritin nanoparticle COVID vaccine. Company: VaxCo

Receipt of honoraria or consultation fees: N/A

Participation in a company sponsored speaker's bureau: N/A

Stock shareholder: N/A

Spouse/partner: $\hat{\nu}/A$

Other support (please specify): N/A

Signature:

Date: September 14, 2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Aurélia Nguyen

AFFILIATION: Gavi, the Vaccine Alliance

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Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Dguy-

Date:

07/11/2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: HANNA M. NOHYNEK

AFFILIATION: FINNIGHT INGTIMTE FOR HEATTH AND WELFARE

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Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Date: 14. September 2023

Signature:



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Conflict of Interest Disclosure Form

NAME: Katherine O'Brien

AFFILIATION: World Health Organization

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□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: Latherine Opin

Date: 14 December 2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

METH PARASHAR NAME: **AFFILIATION:**

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DISCLOSURE

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I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date:



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: .. J BLUAR D

AFFILIATION: University of Oxfor

years, whether due to a financial or other relationship, must be provided to the EACCME^{\otimes} in relation to the LEE has been provided. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses will not be accepted. Declarations must be made available online on the event website of the LEE. submission of the application. COI declarations signed more than 6 months before the date of the event Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of upon

DISCLOSURE

I have no potential conflict of interest to report

Thave the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

(ponoids.

Name of commercial company server institute of Indian

bureau: Participation in a company sponsored speaker's

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

UEMS_{aisbl} – Union Européenne des Médecins Spécialistes

Date:

52/01

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 $\frac{N}{A}$

n/A



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME:Dr Kamel Senouci.....

AFFILIATION: ...University of Geneva (UNIGE).....

In accordance with criterion 13 of document UEMS 2023/07 "EACCME[®] Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME[®] upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

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Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 02/10/2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: SIEGRIST Claire Anne AFFILIATION: (Iniversity of Genera

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

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Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date:

14/9/2023



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Conflict of Interest Disclosure Form

NAME Dr Catherine Slack

AFFILIATION: HAVEG, CASPR

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees: 1 am on dEMB for Clover biopharmaceuticls Participation in a company sponsored speaker's bureau: And for Minervax and for Nimio

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Cmt

Date: 11 Jan 2024



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Peter Smith

AFFILIATION: London School of Hygiene & Tropical Medicine

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DISCLOSURE

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I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 20/10/23

UEMS_{aisbl} – Union Européenne des Médecins Spécialistes VAT n° BE 0469.067.848 RPM Bruxelles-Brussels EU Transparency Register ID 219038730914-92

Name of commercial company

Sanofi, Takeda, Curevac, Valneva



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

Margaret Stanley

NAME: University of Cambridge UK

AFFILIATION:

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DISCLOSURE

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Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

M.a. Stanley.

Date: 05 November 2023

Name of commercial company



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Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME : STEFFEN Christoph

AFFILIATION: WHO

In accordance with criterion 24 of document UEMS 2012/30 "Accreditation of Live Educational Events by the EACCME", all declarations of potential or actual conflicts of interest, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. Declarations also must be made readily available, either in printed form, with the programme of the LEE, or on the website of the organiser of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

 \boxtimes I have no potential conflict of interest to report

□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 31 October 2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: JULIA STOWE AFFILIATION: UK Health Security Agency

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DISCLOSURE

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□ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 30/10/23



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Kawsar Talaat

AFFILIATION: Johns Hopkins Bloomberg School of Public Health

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DISCLOSURE

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I have the following potential conflict(s) of interest to report

Type of affiliation	/ financial interest
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Receipt of honoraria or consultation fees:

Name of commercial company

Receipt of grants/research supports:

Pfizer- I am the site PI for adult (completed) and pediatric COVID vaccine trials. Sanofi- I am the site PI for a trial of cell-culture based Yellow Fever vaccine. Scandinavian BioPharma:I am the PI of a controlled human infection study

I serve on safety monitoring committees for Merck (RSV mAB, Gardasii), Takeda (Zika), PATH (polio), Intralytix (bacteriophage), Moderna (COVID) vaccines

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: 1anser La Laa

Date: 25 October 2023

None

None

None



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME Helen Keipp B. Talbot

AFFILIATION: Vanderbilt University Medical Center

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DISCLOSURE

I have no potential conflict of interest to report

Thave the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:_____

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date:

20 007 2023

UEMS_{aisbl} – Union Européenne des Médecins Spécialistes VAT n° BE 0469.067.848 RPM Bruxelles-Brussels EU Transparency Register ID 219038730914-92

Name of commercial company

US Centers for Disease Control and Prevention



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME DR NAVEEN THACKER

AFFILIATION: PRESIDENT, IPA

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DISCLOSURE

I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest	Name of commercial company
Receipt of grants/research supports: Receipt of honoraria or consultation fees: Participation in a company sponsored speaker's	NIL DEPARTMENT OF PEDIATRICS, UNIVERSITY OF OXFORD FUNDED BY MSD
bureau:	NIL
Stock shareholder:	NIL
Spouse/partner:	NIL
Other support (please specify):	NIF

Signature:

Date: 14-09-2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Melinda Wharton

AFFILIATION: U.S. Centers for Disease Control and Prevention

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

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Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: Melinda Weat

Date: 15 September 2023