

DECLARATION OF PERSONAL INTERESTS 2017

| LAST NAME, First name: Feychting, Maria | CURRENT OR APPLIED POSITION W | VITHIN ICNIRP: Vice Chair |
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| ACTIVITIES AND ASSETS | | Period 2013-2016 and 2017 |
| Always mention the title of the activity, function, asset listed, and the name of company, | organization, or institution involved. | Please, also report any current application or negotiation for future work |
| EMPLOYMENT (main employer, function, title) | | |
| Head Unit of Epidemiology, and Professor of Epidemiology at the Institute of Environme | ntal Medicine, Karolinska Institutet | Period: Permanent position |
| UNPAID CONSULTANCY, ADVISORY POSITIONS AND SERVICES | | |
| Unpaid consultancy including service as a scientific or other advisor. Unpaid advisory office part of a regulatory legislative or judicial process with an interest in NIR (i.e. membership) | e or services for a commercial entity or an in scientific councils, associations, etc.): | y organizations and/or as |
| Name and description of the activity | Personal advantages (hospitality, prestige, etc specify and quantify) | Period: January 2012 – current |
| Participant of the WHO core group for development of the Environmental Criteria monograph for a health risk assessment of radiofrequency electromagnetic fields. | Prestige | |
| PAID CONSULTANCY, ADVISORY POSITIONS AND SERVICES | | |
| Paid consultancy including service as a scientific or other advisor. Paid advisory office or s regulatory legislative or judicial process with an interest in NIR (i.e. membership in scientic | ervices for a commercial entity or any orga fic councils, associations, etc.): | nizations and/or as part of a |
| Name and description of the activity: | Income – amount and percentage of yearly laboratory/working group/personal income (specify): | Period: |
| Member of the scientific group assigned by the Swedish Council for Working Life and Social Research, to follow the research regarding potential health effects of exposure to electric and magnetic fields | No personal income, my Institute | 2003-2013 |



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| Name and status of the contractor: Swedish Council for Working Life and Social Research, Governmental Research funding agency Member of the UK Advisory Group on Non-ionising Radiation (AGNIR). Name and status of the contractor: Publich Health England | <1% of income 2009-current | |
|--|---|------------------------------|
| RESEARCH SUPPORT RECEIVED FROM COMMERCIAL ENTITIES | | |
| Grants, collaborations, sponsorships, other funding and in kind support valued at more the meetings, etc.) | nan EUR 1000 overall (include equipment, facilities, staff, pa | id travel to |
| Name and description of the activity: Name and status of the contractor: | Income – amount and percentage of Period: yearly laboratory/unit/personal income (specify): | |
| Which unit receives and manages the research funding from the above activity? University/Unit/Laboratory/Personal Research Fund/Other: | Please describe how your independence is safeguarded: | |
| It is assumed that you are free of publishing whatever results your research shows without the influence from the entity funding your research. Is this explicitly stated within the contract? Yes No | If, yes. Please specify the wording used in the contract: | |
| INVESTMENTS AND COMMERCIAL INTERESTS | | |
| Investments (income valued at more than EUR 1 000) in a commercial entity, in a trust or commercial business interests (e.g., proprietorships, partnerships, joint ventures) and sto broadly diversified mutual funds, pension funds or similar investments. | holding company with an interest related to NIR. List, for ecks, bonds, stock options, other securities (e.g., short sales) | xample, any) - excluding |
| Investment/Share: None Income: | Period: | |



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| INTELLECTUAL PROPERTY | |
|---|-------------|
| Such as patents, trademarks, or copyrights (also include pending applications) and proprietary know-how in a substance, technology | or process. |
| Property: None | Period: |
| Income: | |
| ADDITIONAL INFORMATION | |
| When relevant, please provide details about the subject, the parties involved, the time-frame and any other relevant details. | |
| To your knowledge, would the outcome of your activities within ICNIRP benefit or adversely affect interests of others with whom you have substantial common personal, financial or professional interests (such as your spouse or partner, adult children or siblings)? | |
| No | Period: |
| Is there any other aspect of your background or present circumstances not addressed above that might be perceived as affecting your objectivity or independence? | |
| No | Period: |

I hereby declare that the disclosed information is true and complete to the best of my knowledge. Should there be any change to the above information, I will promptly notify the ICNIRP Secretariat and complete a new declaration of interests which takes the changes into account.

Date: November 25, 2016 Name: Maria Feychting

Signature: