

## European Commission Initiative on Breast Cancer

### Annual Declaration of Interests (ADoI)

Name: **G RIVEYNEE, Audre Robert**

*[Please copy rows as needed for subsequent or parallel activities of the same nature]*

*[If it is not clear to you under which category of the form to declare an interest, you can declare it under "Other"].*

Nature of activities	Period	Entity	Subject matter
1. Ownership or financial investments, including shares	NONE	Companies or organisations in which the financial interest is placed	[Relevant field of activity]
2. Membership of a managing body or equivalent structure	NONE	- Name - Location - Nature: public, private, etc.	Function of institution: Function of expert: Link to website of institution:



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3. Membership of another scientific advisory body	NONE	- Name - Location - Nature: public, private, etc.	Function of body: Function of expert: Link to website of body:
4. Employment		- Name, Place - Type: public, private, etc.	[Describe professional activities in relation to activities of this project]
5. Consultancy/Advisory	SINCE 01/07/2019	- CENTRE COMMUNAUTAIRE DE REFERENCE MONT SAINT GUIBERT - Type: Public HEALTH ORGANIZATION - Amount	COORDINATOR BREAST CANCER SCREENING
6. Influence on definition of research priorities	NONE		
7. Research grants and other funding	NONE	- Name, Place - Type: public, private, etc. - Amount	[Describe research]
8. Principal investigator or investigator	NONE	- Name, Place - Type: public, private, etc.	[Describe research]
9. Intellectual property rights (IPR)	NONE	- Name, Place - Type: public, private, etc.	[Describe activity, function]
10. Other membership or affiliation		- Name, Place - Type: public, private, etc.	[Describe activity, function, website]
11. Interests of others		- Name, Place - Type: public, private, etc.	[Describe activity, function]
12. Other		- Name, Place - Type: public, private, etc.	[Describe activity, function, website]

I also declare on my honour that the information disclosed in this form is true and complete to the best of my knowledge.

Should there be any change to the above information, I will promptly notify the responsible service of the Commission and complete a new DoI form including the changes.

Done at: BRUSSELS

Date: 20/01/2021

Signature: 

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