



Appendix A. Competing or Conflict of Interest Form

Your name:	Jenny Berg
Your INAHTA member agency name:	SBU (Swedish Agency for Health Technology Assessment and Assessment of Social Services)
Indicate your position on the INAHTA Board of Directors and the term start/end date:	Director 2024-2026 Director (2022-2024)
Do you currently hold any position of governance or leadership in a global/international or regional HTA-related organization?	No
If yes, please indicate the name of the organization, your role or position, and the term start/end dates.	
Do you have any financial interests that conflict with any activities planned or underway in INAHTA?	No
I consent to have this CCI form posted publicly on the INAHTA website	Yes

Signature Jenny Berg

Date 9/10/2024