

## SAMRC BOARD MEMBER ANNUAL DECLARATION OF INTERESTS

Title (Mr/Ms/Professor/Doctor)	Doctor
Name & Surname	Nico Patrick Swartz
Name of Primary Employer or Self- Employed	Self-Employed. Swartz and Associates Consultancy
Position Held	Director

I hereby certify that the following information is complete and correct to the best of my knowledge and I hereby declare to have the following interests:

Please provide details of any potential conflicts of interests arising out of the following:

(1) Bo	pard Directorships (Please provide the full name of the organisation/institution/entity)
1.	Non-Executive Director (Alexkor SOC (PEY) Ltd
2.	
3.	
4.	

5.	
6.	
7.	
8.	
9.	
10.	
(2) Ro	esearch Funding (funding you/ your Institution/Organisation is receiving from the
	NIA
	areholding/Financial Interests eclare interests in companies that provide goods or services to the SAMRC
	NA
(4) Ma	gior academic collaborators [national and international]
Please	declare all significant collaborations outside your primary institution or organisation
	NM

(5) Interests of Close Family Members:	
Please provide the full name and relationship (spouse/partner/son/daughter etc.) of	
immediate family members associated with or employed by an	
institution/organisation/company that receives funding from the SAMRC or provides god	ods
and services to the SAMRC.	
NIA	
1-7	
(6) Sponsorships, Gifts and Hospitality from a source other than a family membe	er
Please include name of entity, description of gift/sponsorship and value	
NIA	
7111	
(7) Any other interests you wish to declare:	
None	
None	

Signature: New 5

Date: 6/11/2025